

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

Part I Annual Report Identification Information

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

- A** This return/report is for:
 - a multiemployer plan
 - a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
 - a single-employer plan
 - a DFE (specify) _____
- B** This return/report is:
 - the first return/report
 - the final return/report
 - an amended return/report
 - a short plan year return/report (less than 12 months)
- C** If the plan is a collectively-bargained plan, check here. ▶
- D** Check box if filing under:
 - Form 5558
 - automatic extension
 - the DFVC program
 - special extension (enter description)
- E** If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶

Part II Basic Plan Information—enter all requested information

1a Name of plan <u>PENSION PLAN OF TALLAHASSEE MEMORIAL HEALTHCARE, INC.</u>	1b Three-digit plan number (PN) ▶ <u>001</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>TALLAHASSEE MEMORIAL HEALTHCARE, INC.</u> <u>1300 MICCOSUKEE ROAD</u> <u>TALLAHASSEE, FL 32308</u>	1c Effective date of plan <u>07/01/1979</u> 2b Employer Identification Number (EIN) <u>59-1917016</u> 2c Plan Sponsor's telephone number <u>850-431-5238</u> 2d Business code (see instructions) <u>622000</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2025	PRISCILLA NEEDHAM
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2025	PRISCILLA NEEDHAM
	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

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

Form 5500 (2024)
v. 240311

3a Plan administrator's name and address <input checked="" type="checkbox"/> 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	2246
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)	451
	6a(2)	370
	6b	1038
	6c	592
	6d	2000
	6e	119
	6f	2119
	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 3H

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

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) <input type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules	b General Schedules
(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> I (Financial Information – Small Plan)
(3) <input checked="" type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input type="checkbox"/> A (Insurance Information) – Number Attached _____
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> C (Service Provider Information)
(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	(5) <input type="checkbox"/> D (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> 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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

A Name of plan <u>PENSION PLAN OF TALLAHASSEE MEMORIAL HEALTHCARE, INC.</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>TALLAHASSEE MEMORIAL HEALTHCARE, INC.</u>	D Employer Identification Number (EIN) <u>59-1917016</u>	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information

1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>		
2	Assets:		
	a Market value	2a	<u>250824233</u>
	b Actuarial value	2b	<u>271245202</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>1060</u>	<u>66584842</u>
	b For terminated vested participants	<u>735</u>	<u>24398150</u>
	c For active participants	<u>451</u>	<u>24119711</u>
	d Total	<u>2246</u>	<u>115102703</u>
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	<u>5.10 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>0</u>
	b Expected plan-related expenses	6b	<u>0</u>
	c Target normal cost	6c	<u>0</u>

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

SIGN HERE Signature of actuary <u>PETER N. STRONG, FSA, EA, FCA, MAAA</u> Type or print name of actuary <u>GABRIEL, ROEDER, SMITH & COMPANY</u> Firm name <u>ONE EAST BROWARD BLVD., SUITE 505</u> <u>FT. LAUDERDALE, FL 33301-1804</u> Address of the firm	<u>10/14/2025</u> Date <u>23-06975</u> Most recent enrollment number <u>954-527-1616</u> 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	83984768
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	83984768
10	Interest on line 9 using prior year's actual return of <u>6.49</u> %	0	5450611
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	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>5.22</u> %		0
	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		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections		0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	89435379

Part III Funding Percentages			
14	Funding target attainment percentage	14	157.95 %
15	Adjusted funding target attainment percentage	15	151.46 %
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	117.29 %
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
Totals ▶			18(b)	0	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 0
20	Quarterly contributions and liquidity shortfalls:	
	a Did the plan have a "funding shortfall" for the prior year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	c If line 20a is "Yes," see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of quarter of this plan year		
(1) 1st	(2) 2nd	(3) 3rd
(4) 4th		

Part V Assumptions Used to Determine Funding Target and Target Normal Cost				
21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 65
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> Substitute	

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years				
28 Unpaid minimum required contributions for all prior years				28 0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....				29 0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....				30 0

Part VIII Minimum Required Contribution For Current Year				
31 Target normal cost and excess assets (see instructions):				
a Target normal cost (line 6c)				31a 0
b Excess assets, if applicable, but not greater than line 31a				31b 0
32 Amortization installments:		Outstanding Balance	Installment	
a Net shortfall amortization installment		0	0	
b Waiver amortization installment				
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount				33
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....				34 0
		Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement		0	0	0
36 Additional cash requirement (line 34 minus line 35)				36 0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)				37 0
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. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input type="checkbox"/> 2021				

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

A Name of plan PENSION PLAN OF TALLAHASSEE MEMORIAL HEALTHCARE, INC.	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 TALLAHASSEE MEMORIAL HEALTHCARE, INC.	D Employer Identification Number (EIN) 59-1917016	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

SUNTRUST BANK, CENTRAL FLORIDA, NA

58-0466330

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 50 65	NONE	136523	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BANK OF AMERICA, N.A

94-1687665

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	29137	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

COLUMBIA THREADNEEDLE INVESTMENTS

41-1533211

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	25159	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan PENSION PLAN OF TALLAHASSEE MEMORIAL HEALTHCARE, INC.	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 TALLAHASSEE MEMORIAL HEALTHCARE, INC.	D Employer Identification Number (EIN) 59-1917016

Part I	Asset and Liability Statement
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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	426289	130101
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions		
(2) Participant contributions		
(3) Other	2411473	1770648
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	47485092	44987157
(2) U.S. Government securities	33380276	4146404
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred		
(B) All other	16961073	114973729
(4) Corporate stocks (other than employer securities):		
(A) Preferred		
(B) Common		
(5) Partnership/joint venture interests		
(6) Real estate (other than employer real property)		
(7) Loans (other than to participants)		
(8) Participant loans		
(9) Value of interest in common/collective trusts		
(10) Value of interest in pooled separate accounts		
(11) Value of interest in master trust investment accounts		
(12) Value of interest in 103-12 investment entities		
(13) Value of interest in registered investment companies (e.g., mutual funds)	154676647	84237597
(14) Value of funds held in insurance company general account (unallocated contracts)		
(15) Other		

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	255340850	250245636
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	42397	35931
i Acquisition indebtedness.....	1i	4516617	557750
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	4559014	593681
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	250781836	249651955

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)	0	
(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)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	2361752	
(B) U.S. Government securities.....	2b(1)(B)	499328	
(C) Corporate debt instruments.....	2b(1)(C)	3781135	
(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)		6642215
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	4230702	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	129504689	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	132481887	
(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)	2472773	
(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)		-4930031
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		5438461

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	7318677	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	-1168000	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		6150677
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)		
(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)	190819	
(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)		
(11) Other expenses	2i(11)	226846	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		417665
j Total expenses. Add all expense amounts in column (b) and enter total	2j		6568342

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-1129881
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: PRICE WATERHOUSE COOPERS

(2) EIN: 13-4008324

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

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

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		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?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
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 0.

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 562607.

SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>PENSION PLAN OF TALLAHASSEE MEMORIAL HEALTHCARE, INC.</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>TALLAHASSEE MEMORIAL HEALTHCARE, INC.</u>	D Employer Identification Number (EIN) <u>59-1917016</u>	

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
---	---	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 59-3482833

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	105
--	---	-----

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a	
b Enter the amount contributed by the employer to the plan for this plan year	6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c	

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

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

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

Part III	Amendments
-----------------	-------------------

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
 Public Equity: 0.00 % Private Equity: 0.00 % Investment-Grade Debt and Interest Rate Hedging Assets: 82.00 %
 High-Yield Debt: 0.00 % Real Assets: 0.00 % Cash or Cash Equivalents: 18.00 % Other: 0.00 %

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 _____.

Pension Plan of Tallahassee Memorial HealthCare, Inc.

**Financial Statements and Supplemental Schedules
Required by ERISA
December 31, 2024 (in liquidation), 2023 (ongoing)
and 2022 (ongoing)**

Pension Plan of Tallahassee Memorial HealthCare, Inc.

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Other schedules required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA") not included herein have been omitted as there were no transactions of the type required to be disclosed in such schedules.	



Report of Independent Auditors

To the Administrator of Pension Plan of Tallahassee Memorial HealthCare, Inc.

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

We have performed an audit of the accompanying financial statements of Pension Plan of Tallahassee Memorial HealthCare, Inc. (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 statement of net assets available for benefits (in liquidation) as of December 31, 2024, and the related statement of changes in net assets available for benefits (in liquidation) for the period from August 28, 2024 to December 31, 2024, the statement of changes in net assets available for benefits (ongoing) for the period from January 1, 2024 to August 27, 2024, the statements of net assets available for benefits (ongoing) as of December 31, 2023 and 2022, and the related statements of changes in net assets available for benefits (ongoing) for the years ended December 31, 2023 and 2022, including the related notes (collectively referred to as the "financial statements").

Management, having determined it is permissible in the circumstances, has elected to have the audit 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 audit need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2024, 2023 and 2022 and for the period from September 1, 2024 to December 31, 2024, for the period from January 1, 2024 to August 31, 2024 and for the years ended December 31, 2023 and 2022, stating that the certified investment information, as described in Note 7 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audit and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report

- the amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- the information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

PricewaterhouseCoopers LLP, 545 NW 26th Street, Suite 800, Miami, FL 33127

T: (305) 375 7400



Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (US GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. 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.

Basis of Accounting

As discussed in Note 2 to the financial statements, the Board of Directors of Tallahassee Memorial HealthCare, Inc. approved a plan of liquidation on August 28, 2024, and the Plan determined liquidation is imminent. As a result, the Plan changed its basis of accounting on August 28, 2024 from the going concern basis to a liquidation basis. Our opinion is not modified with respect to this matter.

Emphasis of Matter

As discussed in Note 5 to the financial statements, the Plan changed from the beginning of year to end of year valuation date for the determination of accumulated plan benefits in connection with the liquidation of the Plan. Our opinion is not modified with respect to this matter.

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.

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

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with US GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material



if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with US GAAS, we:

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

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

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

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

Other Matter – Supplemental Schedules Required by ERISA

Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2024, Schedule H, Line 4i – Schedule of Assets (Acquired and Disposed of Within Year) for the year ended December 31, 2024 and Schedule H, Line 4j - Schedule of Reportable Transactions for the year ended December 31, 2024 ("supplemental schedules"), are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to the auditing procedures applied in the audit 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 US GAAS. For information included in the supplemental



schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

PricewaterhouseCoopers LLP

Miami, Florida
October 3, 2025

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Statements of Net Assets Available for Benefits
December 31, 2024 (in liquidation), 2023 (ongoing) and 2022 (ongoing)

	2024 (in liquidation)	2023 (ongoing)	2022 (ongoing)
Assets			
Non interest bearing cash	\$ 130,102	\$ 426,289	\$ 184,880
Total non interest bearing cash	130,102	426,289	184,880
Investments, at fair value			
Money market funds	44,987,157	47,485,092	33,329,661
Corporate bonds and notes	114,973,729	16,961,073	46,567,044
U.S. government and agency obligations	4,146,404	33,380,276	76,323,275
Common stocks	-	-	60,581,808
Equity mutual funds	-	-	25,102,872
Fixed income mutual funds	84,237,597	154,676,647	233,488,309
Total investments	248,344,887	252,503,088	475,392,969
Accrued interest and dividends receivable	13,460,386	549,397	762,149
Due from broker for pending sales	-	1,862,076	994,152
Total assets	261,935,375	255,340,850	477,334,150
Liabilities			
Accrued expenses	823,922	42,397	128,797
Due to broker for pending purchases	557,750	4,516,617	23,994,131
Total liabilities	1,381,672	4,559,014	24,122,928
Net assets available for benefits	\$ 260,553,703	\$ 250,781,836	\$ 453,211,222

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

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Statements of Changes in Net Assets Available for Benefits
Year ended December 31, 2023 (ongoing) and 2022 (ongoing) and the period
January 1, 2024 to August 27, 2024 (ongoing) and the period August 28, 2024 to
December 31, 2024 (in liquidation)

	For the period August 28 - December 31 2024 (in liquidation)	For the period January 1 - August 27 2024 (ongoing)	For the year ended December 31, 2023 2022 (ongoing) (ongoing)	
Additions (reductions) to net assets attributed to:				
Investment (loss) income				
Net (depreciation) appreciation in fair value of investments	\$ (5,220,578)	\$ (213,877)	\$ 14,906,040	\$ (62,241,595)
Interest	-	2,275,022	3,085,383	2,629,289
Dividends	-	4,694,208	8,432,269	5,650,017
Net investment (loss) income	<u>(5,220,578)</u>	<u>6,755,353</u>	<u>26,423,692</u>	<u>(53,962,289)</u>
Net (reductions) additions	<u>(5,220,578)</u>	<u>6,755,353</u>	<u>26,423,692</u>	<u>(53,962,289)</u>
Deductions from net assets attributed to:				
Benefits paid directly to participants	2,630,751	3,519,926	39,860,231	21,535,049
Purchase of annuity contract	-	-	188,320,929	-
Administrative expenses	-	143,432	671,918	756,364
Total deductions	<u>2,630,751</u>	<u>3,663,358</u>	<u>228,853,078</u>	<u>22,291,413</u>
Net (decrease) increase	<u>(7,851,329)</u>	<u>3,091,995</u>	<u>(202,429,386)</u>	<u>(76,253,702)</u>
Net assets available for benefits				
Beginning of period	268,405,032	250,781,836	453,211,222	529,464,924
End of period	<u>\$ 260,553,703</u>	<u>\$ 253,873,831</u>	<u>\$ 250,781,836</u>	<u>\$ 453,211,222</u>

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

Pension Plan of Tallahassee Memorial HealthCare, Inc.

Notes to Financial Statements

December 31, 2024 (in liquidation) and December 31, 2023 (ongoing) and December 31, 2022 (ongoing)

1. Plan Description

The following description of the Pension Plan of Tallahassee Memorial HealthCare, Inc. (the "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement, its amendments and summary plan documents for a more complete description of the Plan's provisions.

General

On January 16, 1980, the Board of Directors of Tallahassee Memorial HealthCare, Inc. ("TMH, Inc.") adopted the Plan agreement to replace participation in the State of Florida Retirement System. This Plan was effective as of July 1, 1979. The Plan was amended effective April 1, 1982 to include substantially all employees of Southeast Community Health Services, Inc., Professional Credit Corporation, Medical Center Home Health Care Services, Inc. and Premier Health and Fitness Center, Inc. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

On October 20, 2004, the Board of Directors of TMH, Inc. approved a resolution to freeze benefit accruals under and participation in the Plan effective December 31, 2004. While continued service after December 31, 2004 will count towards eligibility for early retirement benefits and vesting purposes, no service or compensation after December 31, 2004 will be considered for benefit accruals.

Effective April 11, 2023, the Plan was amended to allow, in general, terminated vested participants to elect a full lump sum payment. The one-time special election window closed on August 15, 2023. As a result, 569 vested deferred participants elected and received a full lump distribution of their pension benefit, and 33 participants elected an immediate monthly annuity option. The total amount distributed in lump sum payments was \$17.1M in 2023.

On October 11, 2023, a single premium group annuity contract was purchased in the amount of \$188,320,929 from Pacific Life Insurance Company that would, effective January 1, 2024, take over the monthly annuities of 859 participants. As a result, the benefit obligation was reduced by \$188,320,929 in 2024.

On August 28, 2024, the Board of Directors of TMH approved termination of the Plan. Pursuant to this resolution, the Plan was amended on September 25, 2024 to terminate the Plan effective December 31, 2024. See Note 4 for additional information. The amendment also allows for a one-time special election period beginning October 15, 2025 for all participants who are not yet in payment status and whose lump sum values are in excess of \$7,000, to elect either a lump sum distribution of the full value of their pension benefit as of the Plan Termination Distribution Date or an immediate annuity as of this same date.

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Notes to Financial Statements
December 31, 2024 (in liquidation) and December 31, 2023 (ongoing) and
December 31, 2022 (ongoing)

Pension Benefits

Employees with five or more years of credited service, as defined in the Plan document, were entitled to annual pension benefits beginning at normal retirement age. Those employees with 10 or more years of credited service were entitled to annual pension benefits upon retirement. The normal retirement benefit was an amount equal to a percentage of the average monthly earnings for each year or fractional portion of a year of credited service. The percentage of average monthly earnings for substantially all employees was 1.0% to 1.6% for credited service at normal retirement date, with increased rates upon delayed retirement. The Plan permitted early retirement following 10 years of credited service. For those participants that elected a monthly benefit and were at least age 65, the monthly benefit was increased by the cost-of-living as measured by the Consumer Price Index for the one-year period ended on the preceding June 30, and was limited to 3%. Effective April 11, 2023, the increase was amended to be fixed to 3% occurring on October 1.

The April 11, 2023 amendment also increased the limit on regular lump sum distributions (outside the one-time special election window) from \$3,500 to \$5,000 and provided for automatic payment or rollover to default IRAs for participants with lump sum values under \$5,000. This lump sum distribution amount was further amended effective January 1, 2024 to be \$7,000.

Employees could also request to have any portion of an eligible rollover distribution to be paid directly to an eligible retirement plan specified by the distributee in a direct rollover

Death and Disability Benefits

In the event of death of an active employee, a death benefit equal to 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 benefits they have accumulated as of the time they become disabled. Disability benefits are paid until normal retirement age at which time disabled participants begin receiving normal retirement benefits computed as though they had been employed to normal retirement age with their annual compensation remaining the same as at the time they became disabled, certain limitations apply.

2. Summary of Significant Accounting Policies

The following are the significant accounting policies followed by the Plan:

Basis of Accounting

The accompanying financial statements of the Plan as of and for the years ended December 31, 2022 and 2023 and for the period January 1, 2024 to August 27, 2024 are prepared in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP") using the going concern ("Ongoing") basis of accounting. As discussed in Note 1, on August 28, 2024, the Board of Directors of TMH approved the termination of the Plan. As a result, the Plan changed its basis of accounting as of December 31, 2024 and for the period subsequent to August 27, 2024 to liquidation basis of accounting ("In Liquidation") in accordance with U.S. GAAP.

Use of Estimates

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

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Notes to Financial Statements
December 31, 2024 (in liquidation) and December 31, 2023 (ongoing) and
December 31, 2022 (ongoing)

Investment Valuation and Income Recognition

Investments are reported at liquidation value at December 31, 2024 (in liquidation) and at fair value at December 31, 2023 (ongoing) and 2022 (ongoing). Under the liquidation basis of accounting, investments are carried at the amount of cash that the Plan reasonably expects to receive upon liquidation. Liquidation value approximates fair value. Under the ongoing basis of accounting the Plan utilizes prescribed guidance related to fair value measurements. 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. The Plan's Pension Trust Committee determines the Plan's investment valuation policies utilizing information provided by Truist Bank (the "Trustee"), formerly SunTrust Banks, Inc. See Note 7 for a discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Gains and losses realized on sales of securities are based on specific identification.

The Plan presents in the Statements of Changes in Net Assets Available for Benefits the net appreciation (depreciation) in the fair value of its investments, which consists of the realized gains and losses and the unrealized appreciation (depreciation) on those investments bought and sold as well as held during the year.

Administrative Expenses

The Plan's expenses are paid either by the Plan or TMH, Inc., as provided by the Plan document. Expenses that are paid directly by TMH, Inc. include actuarial, audit, legal, participant and other expenses that are excluded from these financial statements. The Plan's investment management, advisory and trustee fees incurred in connection with the general administration of the Plan are paid by the Plan and are included in the accompanying Statements of Changes in Net Assets Available for Benefits.

3. Funding Policy

Contributions from TMH, Inc. and Premier Health and Fitness Center, Inc. (the "Employers") are accrued based upon amounts actuarially determined to be funded under provisions of ERISA. There were no contributions paid to the Plan for the years ended December 31, 2024, 2023 and 2022.

In accordance with the minimum funding requirements of ERISA, the Employers were not required to make contributions for the years ended 2024, 2023 and 2022. Any contributions by the Employers are intended to fund the Plan at an amount sufficient to prevent the Plan from having an accumulated funding deficiency as of the end of the Plan year.

The Plan is a noncontributory defined benefit plan. The Employers contribute such amounts as are necessary on an actuarial basis to provide the Plan the assets sufficient to meet the benefits to be paid to plan members. Participants should refer to the Plan agreement for more complete information.

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Notes to Financial Statements
December 31, 2024 (in liquidation) and December 31, 2023 (ongoing) and
December 31, 2022 (ongoing)

4. Plan Termination

As discussed in Note 1, the Board of Directors of TMH approved a plan on August 28, 2024 to commence termination of the Plan. Pursuant to this resolution, the Plan was amended on September 25, 2024 to terminate the Plan effective December 31, 2024. The Company communicated its intent to terminate the Plan to affected participants on October 29, 2024. TMH and the Plan administrator determined that the likelihood that either the Internal Revenue Service ("IRS") or the Pension Benefit Guaranty Corporation ("PBGC") would block the termination to be remote and liquidation was deemed imminent upon the approval to terminate the Plan by the Board of Directors of TMH.

The net assets of the Plan were allocated, as prescribed by the terms and provisions of the Plan, in accordance with ERISA and its regulations, generally, to provide the Plan benefits, subject to any required approval from the IRS. The Plan received approval for the termination from the IRS on July 30, 2025. All participants are fully vested in benefits earned as of the termination date. An annuity contract(s) will be purchased from an insurance company(ies) for all retirees in November 2025. Election forms, dated September 12, 2025, are in the process of being mailed to active and deferred vested participants, and all liabilities of the Plan are anticipated to be settled by December 2025.

Upon termination, the net assets of the Plan have been 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 years preceding Plan termination.
- c. Other vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC") (a U.S. governmental agency) up to the applicable limitations.
- d. All other vested benefits (that is, vested benefits not insured by the PBGC).

Certain benefits under the Plan are insured by the PBGC. Generally, the PBGC guarantees most vested normal retirement benefits, early retirement benefits and certain disability and survivors' benefits. However, the PBGC does not guarantee all types of benefits, and there is a maximum on the amount of monthly benefit that the PBGC guarantees, which is adjusted periodically. As of December 31, 2024, the Plan's assets were more than sufficient to cover all benefits due under the Plan.

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Notes to Financial Statements
December 31, 2024 (in liquidation) and December 31, 2023 (ongoing) and
December 31, 2022 (ongoing)

5. Actuarial Present Value of Accumulated Plan Benefits

On adoption of the liquidation basis of accounting, the Plan recorded the following cumulative effect adjustment in the actuarial present value of accumulated plan benefits at the beginning of the period as of the date of adoption:

Changes in actuarial assumptions	\$255,822
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Also, in connection with the adoption of the liquidation basis of accounting, the Plan changed from using a beginning of year to end of year benefit information date. As a result of the change, accumulated plan benefit information is also reported at December 31, 2024 and for the periods January 1, 2024 to August 27, 2024 (ongoing) and August 28, 2024 to December 31, 2024 (in liquidation). The change in accounting principle was made in accordance with the liquidation basis of accounting.

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, or (c) active employees or their beneficiaries. Benefits under the Plan are based on employees' compensation during the highest five calendar years of credited service occurring on or before December 31, 2004 (the "Valuation Date"). Benefits payable under all circumstances, including retirement, death, disability, and termination of employment, are included to the extent that they are deemed attributable to employee service rendered to the Valuation Date.

The actuarial present value of accumulated plan benefits is determined by Gabriel, Roeder, Smith and Company (the "Actuaries") and is that 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 valuation as of December 31, 2024, 2023 and 2022 were (a) the fully generational PRI-2012 Weighted Mortality Table (with MP-2021 mortality improvement projections scales), (b) retirement age-assumptions (the assumed average retirement age was 65), and (c) interest rate. For the period January 1 – August 27, 2024 (ongoing) and the years ended December 31, 2023 and 2022 valuations included an assumed interest rate of 4.50%, 4.50% and 5.00%, respectively. The actuarial assumptions for these periods are based on the presumption that the Plan will continue. For the period August 28 – December 31, 2024 (in liquidation) the valuation included an assumed interest rate of 4.48%. The actuarial assumptions used for this period is based on current plan liquidation assumptions, including annuity purchase rates and IRS 417(e) lump sum rates.

The ongoing actuarial assumptions were based on the assumption that the Plan would continue. As TMH, Inc. approved the termination of the Plan and liquidation accounting was applied, different actuarial assumptions and other factors are applicable in determining the actuarial present value of accumulated plan benefits under this approach.

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Notes to Financial Statements
December 31, 2024 (in liquidation) and December 31, 2023 (ongoing) and
December 31, 2022 (ongoing)

Actuarial present value of accumulated plan benefits is as follows at December 31:

	2024 (in liquidation)	2023 (ongoing)	2022 (ongoing)
Actuarial present value of accumulated plan benefits			
Vested benefits			
Participants currently receiving payments	\$ 67,092,017	\$ 69,950,101	\$ 278,761,048
Other participants	54,541,640	53,357,987	75,616,338
Total vested benefits	<u>121,633,657</u>	<u>123,308,088</u>	<u>354,377,386</u>
Nonvested benefits	<u>-</u>	<u>-</u>	<u>-</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 121,633,657</u>	<u>\$ 123,308,088</u>	<u>\$ 354,377,386</u>

Information regarding changes in the actuarial present value of accumulated plan benefits for the years ended December 31:

	For the period August 28 - December 31 2024 (in liquidation)	For the period January 1 - August 27 2024 (ongoing)	For the year ended December 31, 2023 2022 (ongoing)	
Actuarial present value of accumulated plan benefits at beginning of year	<u>\$ 122,431,324</u>	<u>\$ 123,308,088</u>	<u>\$ 354,377,386</u>	<u>\$ 417,921,430</u>
Benefits paid	(2,630,751)	(3,519,926)	(39,860,231)	(21,535,049)
Actuarial gains	-	(1,163,863)	(21,268,356)	(2,423,197)
Decrease in discount period	1,833,084	3,551,203	12,083,837	14,253,524
Purchase of annuity contract	-	-	(188,320,929)	
Net increase (decrease) in changes of assumptions	-	-	6,296,381	(53,839,322)
Net decrease	<u>(797,667)</u>	<u>(1,132,586)</u>	<u>(231,069,298)</u>	<u>(63,544,044)</u>
Actuarial present value of accumulated plan benefits at end of year	<u>\$ 121,633,657</u>	<u>\$ 122,175,502</u>	<u>\$ 123,308,088</u>	<u>\$ 354,377,386</u>

6. Reconciliation of statement of changes in net assets available for benefits

Upon adoption of the liquidation basis of accounting, the plan recorded the following cumulative adjustments to net assets available for benefits as of the date of adoption:

Interest and dividend income expected to be earned in liquidation	\$ 15,593,424
Accrued expenses expected to be incurred in liquidation	<u>(1,062,223)</u>
Cumulative effect adjustments for changes in basis of accounting	<u>\$ 14,531,201</u>

Accrued expenses expected to be incurred in liquidation consist of various administrative fees, including investment managers and trustee fees, as well as PBGC fees.

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Notes to Financial Statements
December 31, 2024 (in liquidation) and December 31, 2023 (ongoing) and
December 31, 2022 (ongoing)

7. Information Certified by the Trustee

The Pension Trust Committee has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Truist Bank (the "Trustee"), formerly SunTrust Banks, Inc., has certified to the completeness and accuracy of investments and related investment information included in the accompanying Statements of Net Assets Available for Benefits and notes to financial statements as of December 31, 2024, 2023 and 2022, including \$3,903,687 of the cumulative effect adjustment discussed in Note 6, which excludes \$11,689,737 at December 31, 2024 related to interest and dividends to be earned in 2025, the Schedule of Assets (Held at End of Year) at December 31, 2024, the Schedule of Assets (Acquired and Disposed of Within Year) for the year ended December 31, 2024, the Schedule of Reportable Transactions for the year ended December 31, 2024, and the related investment income (loss) reflected in the Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2023 (ongoing) and 2022 (ongoing) and for the periods January 1, 2024 to August 31, 2024 (ongoing) and net depreciation in fair value of investments of \$5,220,578 for the period September 1, 2024 to December 31, 2024 (in liquidation). Effective May 2022, SunTrust Banks, Inc. was rebranded as Truist Financial Corporation as a result of the merger between SunTrust Banks, Inc. and BB&T Corporation on December 6, 2019.

8. Fair Value Measurements

The Plan follows the authoritative guidance for fair value measurements for financial assets and liabilities, as required, which establishes a framework for measuring fair value under generally accepted accounting principles and expands disclosures about fair value measurements. This guidance clarifies that fair value is an exit price, representing the amount that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants. As such, fair value is a market-based measurement that should be determined based on assumptions that market participants would use in pricing an asset or liability. As a basis for considering assumptions, the authoritative guidance establishes a three-tier fair value hierarchy, which prioritizes the inputs used in measuring fair value as follows:

- Level 1 Fair value for Level 1 is based upon quoted prices in active markets that the Plan has the ability to access for identical assets and liabilities. Market price data is generally obtained from exchange or dealer markets. The Plan does not adjust the quoted price for such assets and liabilities.
- Level 2 Fair value for Level 2 is based on quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of the assets. Inputs are obtained from various sources including market participants, dealers, and brokers.
- Level 3 Fair value for Level 3 is based on valuation techniques that use significant inputs that are unobservable as they trade infrequently or not at all.

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.

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Notes to Financial Statements
December 31, 2024 (in liquidation) and December 31, 2023 (ongoing) and
December 31, 2022 (ongoing)

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

Common stocks: Common stocks traded on a securities exchange or in the over-the-counter market are valued at the last reported sales price on the last business day of the Plan year and therefore are generally recognized as Level 1.

Money market funds, equity mutual funds, fixed income mutual funds: Valued at the net asset value (“NAV”) reported in the active market in which the investments are traded and as such, are generally recognized as Level 1.

Corporate bonds and notes, U.S. government and agency obligations: Valued based on quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments and model-based valuation techniques using observable assumptions and therefore are generally recognized as Level 2.

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

The following tables set forth by level, within the fair value hierarchy, the Plan’s assets at fair value. This information is not presented for the Plan’s investments as of December 31, 2024, as those investments are presented on a liquidation basis.

	Assets at Fair Value as of December 31, 2023			
	Level 1	Level 2	Level 3	Total
Money market funds	\$ 47,485,092	\$ -	\$ -	\$ 47,485,092
Corporate bonds and notes	-	16,961,073	-	16,961,073
U.S. government and agency obligations	-	33,380,276	-	33,380,276
Fixed income mutual funds	154,676,647	-	-	154,676,647
Total assets at fair value	<u>\$ 202,161,739</u>	<u>\$ 50,341,349</u>	<u>\$ -</u>	<u>\$ 252,503,088</u>

	Assets at Fair Value as of December 31, 2022			
	Level 1	Level 2	Level 3	Total
Money market funds	\$ 33,329,661	\$ -	\$ -	\$ 33,329,661
Corporate bonds and notes	-	46,567,044	-	46,567,044
U.S. government and agency obligations	-	76,323,275	-	76,323,275
Common stocks	60,581,808	-	-	60,581,808
Equity mutual funds	25,102,872	-	-	25,102,872
Fixed income mutual funds	233,488,309	-	-	233,488,309
Total assets at fair value	<u>\$ 352,502,650</u>	<u>\$ 122,890,319</u>	<u>\$ -</u>	<u>\$ 475,392,969</u>

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Notes to Financial Statements
December 31, 2024 (in liquidation) and December 31, 2023 (ongoing) and
December 31, 2022 (ongoing)

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period. There were no transfers between levels during the ongoing period January 1, 2024 and August 27, 2024, and the ongoing years ended December 31, 2023 and 2022.

9. Tax Status

The Plan's trust is qualified under Section 401(a) of the Internal Revenue Code ("IRC") and is therefore, exempt from Federal income taxes. The Plan obtained its determination letter on February 1, 2018, in which the IRS stated that the Plan, as then designed, was in compliance with the applicable requirements of the IRC. Subsequent to this IRS determination letter, certain amendments were made to the Plan to comply with the Omnibus Budget Reconciliation Act of 1993 provisions. The Plan's administrator believes that the Plan is designed and being operated in compliance with the applicable requirements of the IRC.

On July 30, 2025, the Plan received a favorable termination determination letter from the IRS which found that the termination of the Plan does not affect its qualification for federal tax purposes. TMH, Inc. could then begin the process of selecting one or more insurance companies to assume the responsibility for the future payment of participant benefits.

Accounting principles generally accepted in the United States of America require the Plan's management to evaluate tax positions taken by the Plan and recognize a tax liability or asset if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions by the Plan, and has concluded that as of December 31, 2024 (in liquidation), 2023 (ongoing) and 2022 (ongoing), there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability or asset or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2021.

10. Related Party and Party-in-Interest Transactions

Truist Bank is the trustee as defined by the Plan, and fees paid by the Plan for trustee management services amounted to \$47,387 for the period August 28, 2024 to December 31, 2024 (in liquidation), \$89,136 for the period January 1, 2024 to August 27, 2024 (ongoing), and \$362,769 and \$405,916 for the years ended December 31, 2023 (ongoing) and 2022 (ongoing), respectively. These fees qualify as party-in-interest transactions and are recorded in administrative expenses in the accompanying Statements of Changes in Net Assets Available for Benefits. Party-in-interest investments at December 31, 2022 were \$10,760,179. There were no party-in-interest investments at December 31, 2024 and 2023.

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Notes to Financial Statements
December 31, 2024 (in liquidation) and December 31, 2023 (ongoing) and
December 31, 2022 (ongoing)

Columbia Management Advisors/Bank of America N.A. also provides investment advisory services for one of the Plan's mutual fund investment accounts, and fees paid by the Plan for the advisory services amounted to \$0 for the period August 28, 2024 to December 31, 2024 (in liquidation), \$54,296 for the period January 1, 2024 to August 27, 2024 (ongoing), and \$309,149 and \$350,448 for the years ended December 31, 2023 (ongoing) and 2022 (ongoing), respectively. These fees qualify as party-in-interest transactions and are recorded in administrative expenses in the accompanying Statements of Changes in Net Assets Available for Benefits.

TMH, Inc. provides certain accounting and other administrative services to the Plan for which no fees are charged.

11. Concentrations of Credit Risk

Financial instruments which potentially subject the Plan to concentrations of credit risk consist of the Plan's investments. Management maintains the Plan's investments with what management believes to be high credit quality financial institutions and attempts to limit the amount of credit exposure to any particular investment.

12. Risks and Uncertainties

The Plan invests in a combination of common stocks, mutual funds, bonds, fixed income securities, and other investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risk. Market risks include global events which could impact the value of investment securities, such as a pandemic, international conflict, tariffs or trade wars. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in risks in the near term would materially affect the amounts reported in the Statements of Net Assets Available for Benefits and the Statements of Changes in Net Assets Available for Benefits.

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

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Notes to Financial Statements
December 31, 2024 (in liquidation) and December 31, 2023 (ongoing) and
December 31, 2022 (ongoing)

13. Reconciliation of Financial Statements to Form 5500

The following reconciliation of net assets available for benefits per the financial statements to the Form 5500 as of December 31, 2024:

Net assets available for benefits per financial statements	\$ 260,553,703
Less: Interest and dividend income expected to be earned in liquidation	(11,689,739)
Plus: Administrative expenses expected to be paid during liquidation	787,991
Net assets available for benefits per Form 5500	<u>\$ 249,651,955</u>

The following is a reconciliation of interest and dividend income per the financial statements to the Form 5500 for the year ended December 31, 2024:

Interest and dividend income per financial statements	\$ 6,969,230
Plus: Interest and dividend income earned 9/1/2024 to 12/31/2024	3,903,687
Interest and dividend income per Form 5500	<u>\$ 10,872,917</u>

The following is a reconciliation of administrative expenses per the financial statements to the Form 5500 for the year ended December 31, 2024:

Administrative expenses per financial statements	\$ 143,432
Plus: Administrative expenses incurred 9/1/2024 to 12/31/2024	274,233
Administrative expenses per Form 5500	<u>\$ 417,665</u>

14. Subsequent Events

The Plan has evaluated subsequent events for disclosure or recognition in the financial statements through October 3, 2025, which is the date that the financial statements were available for issuance.

Supplemental Schedules Required by ERISA

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024

(a)	(b)	(c)			(d)	(e)
		Description of Investment				
	Identity of issuer, borrower, lessor or similar party	Par/ Shares	Maturity Date	Interest Rate %	Cost	Current Value
	MONEY MARKET FUNDS					
	FEDERATED HERMES TREASURY OBLIGATION	44,987,157	N/A	N/A	\$ 44,987,157	\$ 44,987,157
	TOTAL MONEY MARKET FUNDS				<u>\$ 44,987,157</u>	<u>\$ 44,987,157</u>
	U.S. GOVERNMENT AND AGENCY OBLIGATIONS					
	UNITED STATES TREASURY BONDS	4,175,600	2/15/2045	3.60	\$ 2,949,909	\$ 2,897,115
	UNITED STATES TREASURY NOTES	350,000	11/15/2032	4.23	348,005	341,362
	UNITED STATES TREASURY NOTES	922,100	5/15/2034	4.44	947,828	907,927
	TOTAL U.S. GOVERNMENT AND AGENCY OBLIGATIONS				<u>\$ 4,245,742</u>	<u>\$ 4,146,404</u>
	CORPORATE BONDS AND NOTES					
	ABBVIE INC	285,000	3/15/2034	5.11	280,451	281,574
	ABBVIE INC	570,000	3/15/2054	5.61	559,979	548,659
	ABBVIE INC	650,000	11/6/2042	5.08	568,269	562,588
	AERCAP IRELAND CAPITAL LTD	590,000	1/19/2034	5.41	571,828	578,477
	AKER BP ASA	562,000	10/1/2054	6.40	559,864	509,037
	AKER BP ASA SR	565,000	6/13/2033	5.97	568,237	567,452
	ALCOA INC	550,000	2/1/2037	5.75	560,791	568,821
	ALEXANDRIA REAL ESTATE	380,000	2/1/2050	5.39	279,726	282,047
	ALTRIA GROUP INC	390,000	9/16/2046	5.35	283,043	282,664
	AMAZON.COM INC	800,000	5/12/2041	3.92	587,160	587,248
	AMAZON.COM INC	645,000	6/3/2050	4.19	389,193	384,807
	AMERICA MOVIL SAB DE CV	385,000	3/30/2040	6.00	399,676	393,374
	AMERICAN HOMES 4 RENT	370,000	4/15/2052	5.52	283,109	288,108
	AMERICAN TOWER CORP	395,000	10/15/2049	5.11	282,674	286,023
	AMGEN INC	630,000	3/1/2033	4.53	578,378	584,256
	AMGEN INC	1,165,000	3/2/2043	5.76	1,147,875	1,132,531
	AMGEN INC	300,000	3/2/2053	5.87	308,388	288,831
	ANHEUSER-BUSCH CO	1,035,000	2/1/2036	4.96	972,538	981,718
	ANHEUSER-BUSCH COS LLC	610,000	2/1/2046	5.39	556,454	554,716
	AON NORTH AMERICA INC	285,000	3/1/2054	5.90	279,049	277,904
	APACHE CORP	667,000	9/1/2040	5.85	567,090	581,224
	APOLLO DEBT SOLUTIONS BD	586,000	4/13/2029	6.67	609,317	606,211
	APOLLO MANAGEMENT HOLDINGS LP	615,000	2/15/2029	4.91	618,752	610,683
	APPLE INC	680,000	5/4/2043	4.65	566,270	563,271
	APPLE INC	490,000	8/8/2052	4.97	393,416	389,839
	ARES CAPITAL CORP	604,000	7/15/2029	5.89	614,769	610,723
	ARES FINANCE CO	305,000	6/30/2051	4.31	284,669	292,266
	AT&T INC	1,275,000	5/15/2035	4.87	1,161,041	1,179,222
	AT&T INC	1,125,000	6/1/2041	4.57	852,458	862,054
	ATHENE HOLDING LTD	501,000	4/1/2054	6.24	505,337	501,862
	ATHENE HOLDING LTD	440,000	10/15/2054	6.66	440,000	437,540
	ATHENE HOLDING LTD	560,000	1/15/2034	5.80	556,035	567,588
	AVOLON HOLDINGS FNDG	606,000	3/1/2029	5.69	619,290	612,157
	BACARDI LTD	760,000	5/15/2048	5.91	684,421	681,051
	BANK OF AMERICA CORP	1,485,000	9/21/2036	3.05	1,200,593	1,209,889
	BANK OF AMERICA CORP	1,185,000	4/25/2034	5.33	1,176,665	1,175,046
	BANK OF AMERICA CORP	1,220,000	6/19/2041	3.86	846,839	846,961
	BARCLAYS PLC	760,000	11/24/2042	4.60	559,018	550,080
	BAT CAPITAL CORP	265,000	8/2/2033	6.08	275,825	280,089
	BAT CAPITAL CORP	515,000	8/2/2053	6.45	551,853	565,001
	BAT CAPITAL CORP	150,000	8/15/2047	5.76	122,013	118,295
	BERKLEY (WR) CORPORATION	485,000	9/30/2061	5.36	284,991	285,156
	BERKSHIRE HATHAWAY ENERGY CO	340,000	5/1/2053	5.54	281,085	282,095

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

**Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

(a)	(b)	(c)			(d)	(e)
		Description of Investment				
	Identity of issuer, borrower, lessor or similar party	Par/ Shares	Maturity Date	Interest Rate %	Cost	Current Value
	BERKSHIRE HATHAWAY FIN	360,000	3/15/2052	5.09	277,110	272,531
	BLACKROCK FUNDING INC	144,000	1/8/2055	5.60	143,597	137,464
	BLACKSTONE HOLDINGS FINA	275,000	8/15/2042	6.15	280,929	279,521
	BLACKSTONE PRIVATE CREDIT FUND	545,000	1/25/2031	6.15	552,098	554,167
	BLUE OWL FINANCE LLC	400,000	10/7/2051	5.66	284,600	291,296
	BOARDWALK PIPELINES LP	320,000	2/15/2031	3.81	277,850	285,882
	BOEING CO	620,000	5/1/2040	6.00	568,242	589,856
	BOEING CO/THE	285,000	5/1/2034	6.23	288,380	298,569
	BOEING CO/THE	275,000	5/1/2054	6.45	278,297	292,284
	BP CAP MARKETS	435,000	6/4/2051	4.75	276,812	269,309
	BP CAP MARKETS AMERICA	380,000	6/17/2041	4.24	275,325	274,121
	BRISTOL-MYERS SQUIBB CO	290,000	2/22/2034	5.21	286,970	289,638
	BRISTOL-MYERS SQUIBB CO	735,000	11/13/2050	4.41	428,726	425,418
	BROADCOM INC	670,000	4/15/2034	4.00	562,813	580,662
	BROADCOM INC	740,000	2/15/2041	4.48	561,090	577,888
	BURLINGTON NORTH SANTA FE	610,000	4/1/2044	5.35	561,322	558,540
	CARGILL INC	335,000	4/22/2052	5.30	280,790	276,395
	CARLYLE HOLDINGS II FIN	295,000	3/30/2043	5.85	281,566	283,899
	CENTERPOINT ENERGY HOUSTON	280,000	3/1/2034	5.21	275,408	276,601
	CHARLES SCHWAB CORP	335,000	12/31/2099	4.63	280,683	289,206
	CHARTER COMM OPT LLC	605,000	12/1/2061	6.61	391,181	402,706
	CHARTER COMM OPT LLC/CAP	150,000	10/23/2045	6.86	146,031	141,738
	CHARTER COMM OPT LLC/CAP	300,000	10/23/2055	7.02	283,854	291,876
	CHENIERE CORP CHRISTI HD	350,000	12/31/2039	3.44	278,663	278,866
	CITIGROUP INC	555,000	5/25/2034	6.06	562,592	565,395
	CITIZENS FINL GROUP INC	280,000	1/23/2030	5.76	278,012	284,124
	CMS ENERGY CORP	690,000	12/1/2050	4.31	571,871	600,680
	COMCAST CORP	545,000	1/15/2051	4.71	350,321	323,921
	COMCAST CORP	1,147,000	11/1/2039	4.29	870,309	869,151
	COMERICA INC	285,000	1/30/2030	5.92	280,677	288,195
	CONCENTRIX CORP	344,000	8/2/2033	6.79	340,193	347,003
	CONOCOPHILLIPS	365,000	2/1/2039	5.95	399,726	398,963
	CONSOLIDATED EDISON CO	650,000	12/1/2048	5.44	553,696	555,347
	CONSTELLATION BRANDS INC	385,000	5/1/2050	5.12	281,920	282,051
	COREBRIDGE FINANCIAL INC	720,000	4/5/2052	5.48	568,051	578,405
	COREBRIDGE FINL INC	282,000	9/15/2054	6.42	282,000	280,071
	COSTAR GROUP INC	330,000	7/15/2030	3.21	278,273	288,169
	CRH AMERICA FINANCE INC	340,000	4/4/2048	5.42	282,496	282,156
	CSL FIN PLC	455,000	4/3/2054	5.76	437,665	428,046
	CSX CORP	650,000	11/15/2052	5.34	553,066	548,119
	CUMMINS INC	285,000	2/20/2054	5.60	278,334	277,328
	DANAHER CORP	440,000	12/10/2051	4.54	275,141	271,520
	DCP MIDSTREAM OPERATING	290,000	4/1/2044	5.99	277,530	271,054
	DIAGEO CAPITAL PLC	345,000	4/29/2043	4.86	282,476	275,013
	DIAMONDBACK ENERGY INC	596,000	4/18/2034	5.49	596,922	586,011
	DOMINION ENERGY INC	234,000	8/15/2052	5.65	205,826	200,912
	DOMINION ENERGY INC	780,000	4/15/2041	4.48	567,294	574,439
	DOMINION ENERGY INC	230,000	5/15/2055	6.52	230,000	233,832
	DTE ELEC CO	770,000	3/1/2052	4.99	562,562	563,371
	DTE ELECTRIC CO	280,000	4/1/2033	5.21	278,510	279,672
	DUKE ENERGY CORP	640,000	8/15/2052	5.73	556,051	558,522
	DUKE ENERGY FLA LLC	560,000	11/15/2033	5.65	579,247	582,837
	DUKE ENERGY PROGRESS LLC	780,000	9/15/2047	4.95	565,531	567,380
	ENABLE MIDSTREAM PARTNERS	640,000	5/15/2044	5.82	550,234	550,323
	ENERGY TRANSFER OPERATNG	532,000	5/15/2050	5.89	448,912	451,328

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

**Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

(a)	(b)	(c)			(d)	(e)
		Description of Investment				
	Identity of issuer, borrower, lessor or similar party	Par/ Shares	Maturity Date	Interest Rate %	Cost	Current Value
	ENLINK MIDSTREAM LLC	854,000	9/1/2030	6.21	903,634	894,360
	ENSTAR FINANCE LLC	295,000	1/15/2042	5.76	288,283	281,693
	ENERGY LOUISIANA LLC	570,000	3/15/2054	5.77	559,598	563,251
	ENTERPRISE PRODUCTS OPER	437,000	2/15/2053	5.02	294,158	287,271
	ERAC USA FINANCE LLC	570,000	3/15/2042	5.66	566,842	566,455
	EVERSOURCE ENERGY	410,000	1/15/2050	5.05	279,079	280,206
	EXELON CORP	929,000	3/15/2033	5.31	915,934	926,770
	EXXON MOBIL CORPORATION	320,000	3/19/2040	4.82	281,280	280,579
	FACTSET RESEARCH SYSTEMS	660,000	3/1/2032	3.91	567,277	582,424
	FEDERAL REALTY INVT TRUST	310,000	6/1/2030	3.82	277,887	284,357
	FIDELITY NATL FINANCIAL INC	455,000	9/17/2051	5.20	280,690	280,203
	FIFTH THIRD BANCORP	635,000	4/25/2033	4.67	575,221	589,883
	FIRST AMERICAN FINANCIAL	316,000	9/30/2034	5.65	315,231	304,700
	FIRSTENERGY CORP	650,000	7/15/2047	5.69	554,359	554,405
	FISERV INC	680,000	7/1/2049	5.39	552,242	555,172
	FLORIDA POWER CORP	530,000	9/15/2037	5.97	559,367	563,364
	FORD MOTOR COMPANY	353,000	1/15/2043	6.03	291,942	278,284
	FORD MOTOR COMPANY	280,000	8/19/2032	6.13	278,328	278,645
	FOUNDRY JV HOLDCO LLC	286,000	1/25/2038	6.33	296,771	288,977
	GE CAPITAL INTL FUNDING	300,000	11/15/2035	4.79	274,338	276,945
	GE HEALTHCARE TECH INC	510,000	11/22/2052	5.93	551,973	548,235
	GENERAL MOTORS FINL CO	275,000	1/7/2034	6.01	275,902	278,982
	GEORGIA POWER CO	1,200,000	5/15/2052	5.53	1,149,216	1,113,204
	GLOBAL ATLANTIC FIN CO	727,000	3/15/2054	6.65	726,553	737,774
	HALEON US CAPITAL LLC	355,000	3/24/2052	5.19	280,070	273,883
	HALLIBURTON CO	600,000	11/15/2045	5.60	546,216	535,668
	HARRIS CORPORATION	310,000	4/27/2045	5.52	285,377	284,050
	HCA INC	575,000	4/1/2054	6.30	560,844	547,751
	HCA INC	565,000	6/1/2033	5.56	555,525	558,960
	HOME DEPOT INC	915,000	9/15/2051	4.51	561,234	558,205
	HP ENTERPRISE CO	150,000	10/15/2045	6.12	160,584	155,673
	HSBC HOLDINGS INC	802,000	11/22/2032	3.40	655,915	676,615
	HUNTINGTON BANCSHARES INC	555,000	8/21/2029	6.01	564,862	572,976
	HYUNDAI CAPITAL AMERICA	585,000	9/21/2030	5.96	612,499	608,517
	INDIANA MICHIGAN POWER	580,000	4/1/2053	5.77	566,370	565,117
	INTERCONTINENTAL EXCHANGE INC	340,000	9/21/2048	5.26	279,378	274,659
	INVITATION HOMES OP	315,000	4/15/2032	4.50	284,451	290,525
	JEFFERIES GROUP INC	150,000	1/20/2043	6.12	159,807	159,336
	JOHNSON (S.C.) & SON INC	330,000	10/15/2046	5.59	283,275	280,431
	JPMORGAN CHASE	302,000	11/29/2045	5.67	302,000	294,797
	JPMORGAN CHASE & CO	990,000	7/25/2033	5.02	949,019	967,943
	JPMORGAN CHASE & CO	680,000	2/22/2048	5.15	570,996	563,020
	JPMORGAN CHASE & CO	1,535,000	4/22/2041	4.19	1,144,465	1,137,926
	KENVUE INC	300,000	3/22/2030	4.96	313,452	302,250
	KIMCO REALTY CORP	355,000	9/1/2047	5.40	280,461	292,556
	KINDER MORGAN INC	430,000	2/15/2051	5.33	293,346	290,254
	KKR GROUP FIN CO X LLC	716,000	12/15/2051	4.98	483,966	467,348
	KLA CORP	300,000	7/15/2052	5.45	277,107	272,658
	KRAFT FOODS GROUP INC	250,000	1/26/2039	6.24	275,538	275,663
	KRAFT HEINZ FOODS CO	325,000	10/1/2049	5.70	282,835	277,807
	LAM RESEARCH CORP	420,000	6/15/2050	4.55	273,286	265,289
	LEXINGTON REALTY TRUST	340,000	9/15/2030	3.12	281,625	294,039
	LLOYDS BANKING GROUP PLC	405,000	12/14/2046	4.87	280,009	280,171
	LOCKHEED MARTIN CORP	690,000	6/15/2053	5.19	554,967	551,393
	LOWES COS INC	597,000	7/1/2033	5.18	614,474	593,561

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024

(a)	(b)	(c)			(d)	(e)
		Description of Investment				
	Identity of issuer, borrower, lessor or similar party	Par/ Shares	Maturity Date	Interest Rate %	Cost	Current Value
	LOWE'S COS INC	305,000	4/15/2040	5.35	281,280	285,059
	LPL HOLDINGS INC	290,000	5/20/2034	5.89	289,391	295,264
	LYB INT FINANCE III	370,000	5/1/2050	5.63	281,848	275,898
	MACQUARIE BANK LTD	535,000	1/18/2033	6.41	561,194	567,806
	MARATHON PETROLEUM CORP	260,000	9/15/2044	5.72	231,808	215,774
	MARTIN MARIETTA MATERIALS	340,000	12/15/2047	5.29	276,757	273,013
	MARVELL TECHNOLOGY INC	280,000	9/15/2033	5.73	286,174	290,702
	MCDONALD'S CORP	430,000	12/9/2045	5.44	386,170	385,185
	MERCEDES-BENZ FIN NA	575,000	8/3/2033	5.18	562,735	561,148
	META PLATFORMS INC	660,000	8/15/2052	5.28	561,053	556,241
	META PLATFORMS INC	142,000	8/15/2054	5.58	141,433	137,509
	MICROSOFT CORP	920,000	6/1/2050	4.10	577,456	566,168
	MIDAMERICAN ENERGY CO	310,000	9/15/2043	5.35	279,186	278,343
	MORGAN STANLEY	880,000	4/21/2034	5.33	858,062	866,536
	MORGAN STANLEY	1,090,000	9/16/2036	3.05	856,500	886,530
	MPLX LP	620,000	12/1/2047	5.88	550,238	548,533
	MPLX LP	332,000	4/15/2038	5.16	293,687	289,351
	NATIONAL GRID PLC	270,000	6/12/2033	5.70	269,806	275,397
	NEW YORK LIFE INSURANCE	808,000	5/15/2050	5.15	598,298	588,337
	NEWMONT CORP	285,000	3/15/2034	5.38	282,084	283,558
	NEWMONT MINING CORP	305,000	3/15/2042	5.35	278,215	278,096
	NEXTERA ENERGY CAP	585,000	3/15/2034	5.31	569,995	578,606
	NIPPON LIFE INSURANCE	575,000	4/16/2054	5.90	572,476	579,819
	NORTHWESTERN MUTUAL LIFE	400,000	3/30/2051	5.03	276,236	274,516
	NOVARTIS CAPITAL CORP	375,000	9/18/2031	4.20	372,049	357,184
	NVIDIA CORP	630,000	4/1/2030	3.11	564,934	577,345
	NXP FDG LLC	580,000	1/15/2033	5.14	560,019	564,433
	ONCOR ELECTRIC DELIVERY COMPANY LLC	310,000	9/15/2052	5.54	280,476	276,877
	ONEOK INC	280,000	9/1/2053	6.30	297,998	294,398
	ONEOK INC	975,000	10/15/2029	4.54	973,967	945,263
	ORACLE CORP	870,000	2/6/2033	5.03	837,349	847,058
	ORACLE CORP	740,000	3/25/2041	4.68	563,924	577,008
	OREILLY AUTOMOTIVE INC	300,000	4/1/2030	4.37	282,918	288,420
	OVINTIV INC	510,000	7/15/2053	6.67	558,470	542,808
	PACIFIC LIFECORP	415,000	9/15/2050	5.05	282,997	275,548
	PACKAGING CORP AMER	435,000	10/1/2051	4.75	282,902	279,170
	PENSKE TRUCK LEASING CO	530,000	6/15/2030	5.91	547,336	556,150
	PFIZER INVT ENTERPRISES	600,000	5/19/2033	4.89	611,922	583,008
	PHILIP MORRIS INTL INC	660,000	11/15/2041	5.15	553,865	561,033
	PHILIP MORRIS INTL INC	340,000	11/10/2044	5.19	275,427	278,327
	PNC FINANCIAL SERVICES	967,000	1/22/2030	2.87	878,337	858,735
	PROLOGIS TA US LOG FD LP	575,000	4/1/2034	5.49	566,640	575,650
	PRUDENTIAL FINANCIAL INC	665,000	10/1/2050	4.16	573,636	591,577
	PUBLIC SERVICE ELECTRIC	370,000	5/1/2049	5.03	285,740	283,416
	PUBLIC STORAGE	290,000	8/1/2053	5.63	278,209	275,660
	PUGET SOUND ENERGY INC	280,000	4/15/2041	5.74	275,612	274,890
	RADIAN GROUP INC	560,000	5/15/2029	6.04	562,156	574,689
	REALTY INCOME CORP	90,000	9/1/2054	5.66	88,537	85,433
	REINSURANCE GRP OF AMER	585,000	9/15/2034	5.71	580,601	589,604
	RTX CORPORATION	270,000	3/15/2034	5.79	281,467	284,310
	RTX CORPORATION	255,000	3/15/2054	5.89	277,172	277,330
	S&P GLOBAL INC	750,000	3/1/2052	4.96	563,535	559,680
	SALESFORCE.COM INC	430,000	7/15/2051	4.54	276,516	274,637
	SAMMONS FINANCIAL GROUP	280,000	4/15/2034	6.58	284,217	292,589
	SAN DIEGO G & E	350,000	6/15/2049	5.24	273,686	274,124

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024

(a)	(b)	(c)			(d)	(e)
		Description of Investment				
	Identity of issuer, borrower, lessor or similar party	Par/ Shares	Maturity Date	Interest Rate %	Cost	Current Value
	SAUDI ARABIAN OIL CO	200,000	7/17/2064	6.30	195,278	186,508
	SBL HOLDINGS INC	777,000	10/30/2034	7.40	774,122	755,687
	SEMPRA ENERGY	690,000	2/1/2038	4.60	560,170	570,271
	SEMPRA INFRASTRUCTURE PARTNERS	340,000	1/15/2032	3.89	278,970	283,931
	SHELL INTERNATIONAL FIN	500,000	12/15/2038	5.86	545,760	544,190
	SMURFIT KAPPA TREAS	285,000	4/3/2034	5.45	279,956	284,493
	SOUTHERN CAL EDISON	580,000	3/1/2053	5.86	565,541	564,108
	SOUTHERN CAL EDISON	550,000	11/1/2032	5.71	566,198	573,612
	SOUTHERN COPPER CORP	245,000	7/27/2035	6.59	282,022	278,986
	SPRINT CAPITAL CORP	235,000	3/15/2032	7.33	279,930	280,567
	STARBUCKS CORP	790,000	11/15/2050	5.07	554,240	545,764
	STEEL DYNAMICS INC	435,000	10/15/2050	4.95	283,246	285,643
	TAKEDA PHARMACEUTICALS	400,000	7/9/2040	4.17	291,880	289,936
	TAKE-TWO INTERACTIVE SOF	310,000	4/14/2032	4.33	281,124	286,108
	TANGER PROPERTIES LP	700,000	9/1/2031	3.26	566,594	590,422
	TARGA RES CORP	270,000	7/1/2052	6.26	271,504	269,417
	TIME WARNER CABLE INC	485,000	5/1/2037	6.77	456,443	468,937
	T-MOBILE USA INC	570,000	1/15/2053	5.84	557,848	551,543
	T-MOBILE USA INC	1,335,000	4/15/2040	5.05	1,155,763	1,157,191
	TORONTO-DOMINION BANK	295,000	9/15/2031	3.73	280,695	286,716
	TOTALENERGIES CAP	440,000	9/10/2064	5.85	440,000	408,078
	TRACTOR SUPPLY CO	295,000	5/15/2033	5.25	291,018	294,826
	TRANSCANADA TRUST	564,000	3/7/2082	5.91	510,973	534,796
	UBS GROUP AG	595,000	8/5/2033	5.15	565,869	576,739
	UBS GROUP AG	350,000	9/6/2045	5.65	350,000	333,354
	UDR INC	715,000	11/1/2034	3.81	569,669	582,267
	UNION ELECTRIC CO	420,000	10/1/2049	4.72	282,866	289,426
	UNION PACIFIC CORP	670,000	9/15/2037	4.29	559,028	562,237
	UNITEDHEALTH GROUP INC	245,000	2/15/2038	6.09	278,411	276,767
	UNITEDHEALTH GROUP INC	590,000	4/15/2034	5.12	577,162	575,752
	VERIZON COMMUNICATIONS	384,000	3/22/2041	4.50	294,182	290,415
	VERIZON COMMUNICATIONS INC	1,175,000	3/16/2037	5.38	1,149,538	1,146,929
	VICI PROPERTIES LP	590,000	4/1/2054	6.17	563,975	586,206
	VISTRA OPERATIONS CO LLC	172,000	12/30/2034	5.76	171,833	170,196
	VOYA FINANCIAL INC	150,000	6/15/2046	5.64	130,470	127,775
	WALMART INC	405,000	9/22/2041	3.63	278,968	278,806
	WALT DISNEY CO	445,000	9/1/2049	4.41	280,150	277,529
	WARNERMEDIA HOLDINGS INC	325,000	3/15/2032	4.86	282,802	286,393
	WASTE CONNECTIONS INC	435,000	1/15/2052	4.73	277,404	271,370
	WELLS FARGO & COMPANY	1,183,000	4/24/2034	5.45	1,185,580	1,169,833
	WELLS FARGO & COMPANY	788,000	4/30/2041	4.22	575,996	573,317
	WELLS FARGO & COMPANY	605,000	11/2/2043	5.76	569,868	564,913
	WOODSIDE FINANCE LTD	435,000	9/12/2054	6.11	433,451	405,803
	WYETH	270,000	4/1/2037	5.70	281,364	281,867
	XCEL ENERGY INC	820,000	12/1/2049	5.09	557,789	564,349
	ZOETIS INC	315,000	2/1/2043	5.29	279,594	279,924
	TOTAL CORPORATE BONDS AND NOTES				\$ 114,986,202	\$ 114,973,729
	FIXED INCOME MUTUAL FUNDS					
	BAIRD SHORT TERM BOND FD	4,492,790	0	4.334	\$ 44,638,055	\$ 42,501,797
	VANGUARD SHORT-TERM BOND INDEX FD	4,120,020	0	3.317	\$ 44,648,561	\$ 41,735,800
	TOTAL FIXED INCOME MUTUAL FUNDS				\$ 89,286,616	\$ 84,237,597
	TOTAL				\$ 253,505,717	\$ 248,344,887

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Acquired and Disposed of Within Year)
Year Ended December 31, 2024

(a)	(b)			(c)	(d)
Identity of issuer, borrower, lessor or similar party	Description of Investment	Maturity Date	Interest Rate %	Cost of Acquisitions	Proceeds of Dispositions
	Description				
AT&T INC	Corporate Bond	9/15/1955	3.55	\$ 45,431	\$ 83,131
BAE SYSTEMS PLC	Corporate Bond	3/26/1954	5.50	281,419	298,425
BANK OF AMER MTN V-Q 4.330%	Corporate Bond	3/15/1950	4.54	571,749	609,705
BARCLAYS PLC V-S	Corporate Bond	3/10/2042	3.81	571,504	580,690
CVS HEALTH CORP	Corporate Bond	7/20/2045	5.13	558,114	668,324
CVS HEALTH CORP	Corporate Bond	8/21/2040	2.70	281,295	292,715
CVS HEALTH CORP	Corporate Bond	6/1/1953	5.88	550,206	570,837
CAMPBELL SOUP CO	Corporate Bond	3/20/2026	5.30	376,904	376,968
CANADIAN PAC RY CO	Corporate Bond	5/1/1950	3.50	278,343	283,893
CENTENE CORP	Corporate Bond	10/15/2030	3.00	183,186	316,788
CISCO SYSTEMS INC	Corporate Bond	2/26/2034	5.05	175,530	173,698
CITIGROUP INC V-D	Corporate Bond	2/13/2030	5.17	126,000	124,681
CONSUMERS ENERGY CO	Corporate Bond	5/30/2029	4.60	165,615	162,489
DIAMONDBACK ENERGY	Corporate Bond	3/15/1952	4.25	279,173	291,089
DOWDUPONT INC	Corporate Bond	11/15/2038	5.32	273,905	290,452
EQT CORP	Corporate Bond	2/1/2030	7.00	273,915	284,903
ENBRIDGE INC	Corporate Bond	4/5/2029	5.30	100,282	99,668
ENERGY TRANSFER LP	Corporate Bond	5/15/2034	5.55	125,187	123,149
ENERGY LA LLC	Corporate Bond	6/15/2032	2.35	561,645	594,377
EXETER AUTOMOBIL ABS	Corporate Bond	8/16/2027	5.53	52,998	52,714
FORD CREDIT AUT ABS	Corporate Bond	5/15/2027	5.06	152,984	152,002
FORD MOTOR COMPANY	Corporate Bond	12/8/2046	5.29	275,914	293,229
GM FINANCIAL ABS	Corporate Bond	12/18/2028	4.85	82,983	81,911
GM FINL AUTO ABS	Corporate Bond	3/22/2027	5.09	215,973	214,625
GENERAL MOTORS CO	Corporate Bond	4/1/2046	6.75	282,366	289,062
GENERAL MOTORS CO	Corporate Bond	4/1/2038	5.15	283,337	294,946
GOLDMAN SACHS V-D	Corporate Bond	4/25/2035	5.85	61,000	62,246
HSBC HLDGS CONV V-D	Corporate Bond	5/17/2028	5.60	154,211	154,171
HARRIS CORPORATION	Corporate Bond	4/27/2035	4.85	281,733	299,334
HESS CORP	Corporate Bond	2/15/2041	5.60	280,842	292,382
HEWLETT PACKARD ENTE 4.850% 1	Corporate Bond	2/15/2041	4.85	480,682	476,180
HOME DEPOT INC	Corporate Bond	6/25/1954	5.30	140,762	147,396
INTERPUBLIC GRP	Corporate Bond	3/1/2041	3.38	283,082	291,025
KENVUE INC	Corporate Bond	3/22/1953	5.05	280,695	307,455
L3HARRIS TECH INC	Corporate Bond	6/1/2034	5.35	95,202	93,498
LYB INTERNATIONAL FI 5.500%	Corporate Bond	3/1/2034	4.20	174,202	172,737
LOWE'S COS INC	Corporate Bond	4/1/1951	3.50	280,871	297,004
LOWES COS INC	Corporate Bond	4/1/1962	4.45	278,518	298,181
MARATHON PETROL CORP 6.500%	Corporate Bond	3/1/2041	4.28	273,044	283,291
MATTEL INC	Corporate Bond	11/1/1941	5.45	285,158	293,760
MERCEDES-BENZ ABS	Corporate Bond	4/16/2029	4.80	278,981	275,513
METLIFE INC	Corporate Bond	8/13/2042	4.13	280,537	283,880
MICROCHIP TECHNOLOGY 5.050%	Corporate Bond	3/15/2029	2.53	107,007	106,008
MORGAN STAN MTN V-D	Corporate Bond	4/19/2035	5.83	173,213	176,505
NOVARTIS CAPITAL COR 4.700%	Corporate Bond	9/18/1954	3.45	145,907	142,827
OCCIDENTAL PETE CORP 6.600%	Corporate Bond	3/15/2046	4.20	281,075	283,524
PNC FINANCIAL V-D	Corporate Bond	1/22/2035	5.68	35,000	35,010
PACIFICORP	Corporate Bond	2/15/2029	5.10	159,950	158,934
PEPSICO INC	Corporate Bond	2/15/1953	4.65	561,813	605,719
PFIZER INVT ENTERPRI 5.110%	Corporate Bond	5/19/2043	4.75	553,515	596,010

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Acquired and Disposed of Within Year)
Year Ended December 31, 2024

(a) Identity of issuer, borrower, lessor or similar party	(b) Description of Investment			(c) Cost of Acquisitions	(d) Proceeds of Dispositions
	Description	Maturity Date	Interest Rate %		
ROCHE HLDGS INC	Corporate Bond	3/8/1954	5.22	373,579	377,190
SBL HOLDINGS INC	Corporate Bond	2/18/2031	5.00	579,748	609,194
SOUTHERN CALIF EDISO 5.750%	Corporate Bond	4/15/1954	5.70	131,254	132,002
T MOBILE USA INC	Corporate Bond	1/15/2029	4.85	321,824	317,512
TECK COMINCO LTD	Corporate Bond	10/1/2035	6.13	283,788	296,173
US BANCORP V-D	Corporate Bond	1/23/2035	5.68	108,000	107,888
UNITEDHEALTH GROUP	Corporate Bond	8/15/2039	3.50	564,423	597,804
VOLKSWAGEN AUTO ABS	Corporate Bond	6/21/2027	5.21	103,991	103,480
WELLPOINT INC	Corporate Bond	8/15/2044	4.65	561,144	607,416
WELLS FARGO CO V-D	Corporate Bond	1/23/2035	5.50	64,000	63,410
WORLD OMNI AUTO ABS	Corporate Bond	3/15/2029	4.86	288,962	285,749
				\$ 16,433,671	\$ 17,234,879

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4j - Schedule of Reportable Transactions
Year Ended December 31, 2024

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of party Involved	Description of Asset	Purchase price	Selling price	Lease rental	Expense incurred with transaction	Cost	Current value of asset on transaction date	Net gain or (loss)
Single Transactions in Excess of 5% of the Fair Value of Plan Assets at Beginning of Year								
FIDELITY LONG TERM TREASURY BD INDEX	Fidelity Investments	Fixed Income Mutual Fund	\$ -	\$ 60,159,836	\$ -	\$ -	63,000,000	\$ 63,000,000 \$ (2,840,164)
Series of Transactions in Same Security In Excess of 5% of the Fair Value of Plan Assets at Beginning of Year								
FEDERATED HERMES TREASURY OBLIGATION	Federated Investors, Inc.	Short Term Investment	\$ 25,300,497 ⁽¹⁾	\$ -	\$ -	\$ -	25,300,497	\$ 25,300,497 \$ -
FEDERATED HERMES TREASURY OBLIGATION	Federated Investors, Inc.	Short Term Investment	-	27,798,427 ⁽¹⁾	-	-	27,798,427	27,798,427 -

(1) Represents a series of 251 purchase transactions and a series of 146 sales transaction. No single security transactions in excess of 5% of the fair value of Plan assets at the beginning of the year.

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

**SCHEDULE SB
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2024

**This Form is Open to Public
Inspection**

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

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

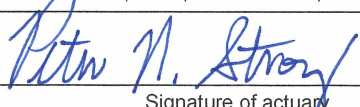
▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan PENSION PLAN OF TALLAHASSEE MEMORIAL HEALTHCARE, INC.		B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF TALLAHASSEE MEMORIAL HEALTHCARE, INC.		D Employer Identification Number (EIN) 59-1917016	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B		F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information			
1	Enter the valuation date:	Month <u>1</u> Day <u>1</u> Year <u>2024</u>	
2	Assets:		
	a Market value	2a	250,824,233
	b Actuarial value	2b	271,245,202
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment.....	1,060	66,584,842
	b For terminated vested participants.....	735	24,398,150
	c For active participants	451	24,119,711
	d Total.....	2,246	115,102,703
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor.....	4b	
5	Effective interest rate	5	5.10 %
6	Target normal cost.....		
	a Present value of current plan year accruals.....	6a	0
	b Expected plan-related expenses	6b	0
	c Target normal cost	6c	0

Statement by Enrolled Actuary

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

SIGN HERE		<u>10/14/2025</u>
	Signature of actuary	Date
	Peter N. Strong, FSA, EA, FCA, MAAA	23-06975
	Type or print name of actuary	Most recent enrollment number
	Gabriel, Roeder, Smith & Company	(954) 527-1616
	Firm name	Telephone number (including area code)
	One East Broward Blvd., Suite 505	
	Ft. Lauderdale	FL 33301-1804
	Address of the firm	

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

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

Schedule SB (Form 5500) 2024
v. 240311

Part 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	83,984,768
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	83,984,768
10	Interest on line 9 using prior year's actual return of <u>6.49%</u>	0	5,450,611
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	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>5.22%</u>		0
	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		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections		0
13	Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)	0	89,435,379

Part III Funding Percentages			
14	Funding target attainment percentage	14	157.95%
15	Adjusted funding target attainment percentage	15	151.46%
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	117.29%
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		
Totals ▶			18(b)	0	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	0
20	Quarterly contributions and liquidity shortfalls:		
	a Did the plan have a "funding shortfall" for the prior year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	c If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

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

21 Discount rate:

a Segment rates:

1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
------------------------	------------------------	------------------------	---

b Applicable month (enter code) **21b** 4

22 Weighted average retirement age **22** 65

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** 0

b Excess assets, if applicable, but not greater than line 31a **31b** 0

32 Amortization installments:

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

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount **33**

34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).... **34** 0

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

36 Additional cash requirement (line 34 minus line 35) **36** 0

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) **37** 0

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

**Attachment to Schedule SB, Part V, Line 22
Description of Weighted Average Retirement Age
For Plan Year Ending December 31, 2024**

EIN: 59-1917016

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

Persons who are at or over the assumed retirement age on the valuation date are assumed to retire on the valuation date. Participants hired after 1/1/85 are assumed to retire at age 65; others may retire at 62. The retirement age on line 22 is a count-weighted average retirement age.

Attachment to Schedule SB, Part V
Statement of Actuarial Assumptions and Methods
For Plan Year Ending December 31, 2024
EIN: 59-1917016

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

I. SUMMARY OF ACTUARIAL METHODS

A. Calculation of Funding Liabilities and Costs

Liabilities and contributions shown in this report are calculated using the unit credit actuarial cost method, as prescribed under Internal Revenue Code §430 and ASC 960.

The objective under this method is to fund each participant's benefits under the Plan as they accrue. An individual's funding target is the actuarial present value of the accrued benefits as of the valuation date determined by applying mortality table and the yield curve of high-quality corporate bond rates prescribed by the IRS. The Plan's funding target is the sum of the funding targets for all participants in the Plan. Since the Plan is frozen, the target normal cost is zero for Plan participants. Beginning in 2009, Plan administrative expenses expected to be paid out of pension trust assets must be included as part of the normal cost. Plan administrative expenses are not expected to be paid out of pension trust assets in 2024, so they are assumed to be zero for the current valuation.

In the first year in which the adjusted plan assets (actuarial value of assets, reduced by any retained credit balances), is less than the funding target, a shortfall amortization base must be established. This base is amortized over a 7-year period (exception noted below) using the 1st and 2nd funding segment interest rates from the prescribed corporate bond yield curve. New shortfall amortization bases are established each year based on the Plan's funded status each year, and all bases are maintained until either fully amortized or until the adjusted plan assets exceed the funding target. The Shortfall Amortization Bases established in 2010 and 2011 are amortized over a period of fifteen (15) years, as permitted under the Preservation of Access to Care for Medicare Beneficiaries and Pension Relief Act and elected by Tallahassee Memorial HealthCare, Inc.

The American Rescue Plan Act of 2021 changed the rules for amortizing shortfall amortization bases. Under the ARPA all existing amortization bases were required to be eliminated and replaced with one 15-year amortization base effective in the 2022 plan year. All shortfall bases established in 2023 and later must also be amortized over a 15-year period. Plan sponsors can choose to make these changes effective for plan years beginning as early as in 2019.

B. Description of Asset Valuation Method

The method for valuing plan assets is the 24-month asset smoothing method as described and made available under the Worker, Retiree, and Employer Recovery Act of 2008 (WRERA).

C. Valuation Procedures

No benefits are projected to be greater than the limitation currently imposed by Section 415(b)(1) of the Internal Revenue Code, in accordance with the requirements of Section 404(j) of the Code.

No actuarial accrued liability is held for nonvested, inactive participants who have a break in service, or for nonvested participants who have quit or been terminated, even if a break in service had not occurred as of the valuation date.

II. SUMMARY OF ACTUARIAL ASSUMPTIONS

A. ACTUARIAL ASSUMPTIONS

1. Funding Valuation Interest Rates

Applicable Month	September
Funding Target (with ARPA corridor adjustments)	
First segment rate (0 – 5 yrs)	4.75% (4.75% used in 2023)
Second segment rate (6 – 20)	4.87% (5.00% used in 2023)
Third segment rates (20+)	5.59% (5.74% used in 2023)
Effective interest rate	5.10% (5.22% used in 2023)
Funding Target (without corridor adjustments)	
First segment rate (0 – 5 yrs)	3.62% (1.41% used in 2023)
Second segment rate (6 – 20)	4.46% (3.09% used in 2023)
Third segment rates (20+)	4.52% (3.58% used in 2023)
Effective interest rate	4.43% (3.19% used in 2023)
PBGC Funding Target (Standard Method)	
First segment rate (0 – 5 yrs)	5.01% (4.84% used in 2023)
Second segment rate (6 – 20)	5.13% (5.15% used in 2023)
Third segment rates (20+)	5.15% (4.85% used in 2023)

2. Accounting Interest Rate

ASC 960 Liabilities	4.50%, compounded annually (5.00% used in 2023)
---------------------	--

- | | |
|--|--|
| 3. Mortality | <p>For funding, the prescribed sex-distinct mortality tables with separate rates for annuitants and non-annuitants contained in final regulations issued by the U.S. Treasury Department and IRS (T.D. 9983), with fully generational mortality improvements projected using the 2024 Adjusted Scale MP-2021 (also prescribed in T.D. 9983).</p> <p>For ASC 960 accounting, the Pri-2012 Total Dataset Amount-Weighted Mortality Tables with separate sex-distinct rates for employees, healthy annuitants, contingent survivors, and disabled annuitants, with fully generational mortality improvements projected using scale MP-2021.</p> <p>90% of deaths are assumed to be non-service connected.</p> |
| 4. Percentage Married | 100%. Wives are assumed to be 3 years younger than their husbands. |
| 5. Salary Increases | N/A due to Plan freeze as of December 31, 2004. |
| 6. Retirement Age | <p>For participants with Credited Service prior to 1/1/85: Age 62 with 10 years of Credited Service (maximum age 70), or on the valuation date if over retirement age.</p> <p>For participants with Credited Service beginning after 1/1/85: Age 65, or on the valuation date if over age 65.</p> |
| 7. Postretirement Cost of Living Increases | 3.00% per year beginning at age 65 for pre-1985 participants. |
| 8. Termination | Sample rates in the table on the next page. |
| 9. Disability | <p>Sample rates in the table on the next page.</p> <p>90% of disabilities are assumed to be non-service connected.</p> |

<u>Age</u>	<u>Annual Rate</u>	
	<u>Termination</u>	<u>Disability</u>
25	20.6%	0.09%
30	16.0	0.11
35	10.4	0.14
40	7.4	0.19
45	6.4	0.30
50	5.4	0.51
55	6.5	0.96
60	9.0	1.66

10. Changes from Previous Report

The funding valuation interest rate(s) have been updated to the September 2023 segment rates with ARPA/IIJA corridor adjustments from the September 2022 segment rates with ARPA/IIJA corridor adjustments.

The funding mortality tables and improvement projection scale have been updated in accordance with final regulations issued by the U.S. Treasury Department and IRS (T.D. 9983) (issued on October 20, 2023) which apply for valuation dates occurring on or after January 1, 2024.

The ASC 960 interest rate has been updated from 5.00% to 4.50% to reflect the re-allocation of assets to 100% fixed income and the interest rate environment as of the January 1, 2024.

Attachment to Schedule SB, Part V
Summary of Plan Provisions
For Plan Year Ending December 31, 2024
EIN: 59-1917016

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

SUMMARY OF PRINCIPAL PLAN PROVISIONS

A. Effective Date

July 1, 1979, **Plan frozen as of December 31, 2004.**

B. Eligibility Requirements

Those Florida Retirement System (FRS) participants employed as of the Effective Date began participation on the Effective Date. Those employed on or after the Effective Date participate following age 21 and completion of 1 Year of Service. **Due to the Plan freeze, no new entrants after December 31, 2004.**

C. Employer

Tallahassee Memorial HealthCare, Inc. and any affiliated entity who adopted the Plan.

D. Plan Year

January 1 through December 31.

E. FRS Service

For those Participants on the Effective Date, includes all service prior to July 1, 1979, for which a participant received credit for benefit purposes under the FRS and for which the Participant has not received a refund of required contributions. Also includes service for which the Participant has (a) re-deposited required contributions for prior service and/or (b) purchased past or military service (to include up to 4 years of *wartime* service). However, those with less than 10 years of FRS Service will receive credit for such service under this plan only if they request a refund of their contributions from FRS and deposit them into this Plan and Trust.

F. Future Service

Each Plan Year beginning January 1, 1980 in which a Participant completes 1000 Hours of Service, or one-half year's credit if Hours of Service completed were from 500-999.

G. Credited Service

For participants employed by Tallahassee Memorial HealthCare, Inc., total of FRS Service plus Prior Plan Service plus Future Service. For employees of Affiliated Employers, only

Future Service after Effective Date of adoption of the Plan, unless otherwise specified. **Due to the Plan Freeze, no service is credited after December 31, 2004.**

H. Compensation

Compensation as reported on IRS Form W-2, plus any deferred compensation accrued and any tax sheltered annuity contributions made by the Employer.

I. Final Average Pay

The average monthly amount of an Employee's Compensation during the highest five (5) calendar years included in the period of Credited Service.

Due to the Plan Freeze, no earnings are considered after December 31, 2004.

J. Normal Retirement

Employees with Credited Service prior to January 1, 1985

Eligibility

Age sixty-two (62) and ten (10) years of Credited Service.

Monthly Benefit (from the Plan and FRS combined)

Final Average Pay times each benefit rate in effect during the period of Credited Service times the years of Credited Service for which each benefit rate applies as follows:

Prior to 12/31/57 and for any FRS Division A service prior to 11/30/70 – 2%

1/1/58 through 11/30/70 – 1.5%

After 11/30/70 – 1.6% if retirement at Normal Retirement Date; 1.63% if one year later; 1.65% if two years later; 1.68% if three or more years later.

Maximum annual benefit not greater than Internal Revenue Code 415 limit.

Due to the Plan Freeze, no benefit accruals after December 31, 2004.

Employees with Credited Service beginning after January 1, 1985

Eligibility

Age sixty-five (65) and five (5) years of Plan participation.

Monthly Benefit

Final Average Pay times 1% up to \$833.33, plus 1.6% of Final Average Pay in excess of \$833.33 times years of Credited Service up to 35 years, plus 1.3% of Final Average pay times years of Credited Service over 35 years.

Due to the Plan Freeze, no benefit accruals after December 31, 2004.

Form of Benefit

Life Annuity (options available). If married, reduced benefit under Qualified Joint and Survivor Annuity Option, unless elected otherwise with Spousal Consent.

K. Supplemental Benefit

A supplemental benefit has been provided for a select group of management employees.

L. Early Retirement

Eligibility

Ten (10) years of Credited Service.

Benefit

For employees with Credited Service prior to 1/1/85, accrued pension reduced 5/12% for each month between Early and Normal Retirement Date (measured from age 62). Retirees with 30 years of Credited Service will receive the full accrued pension without reduction.

For employees with Credited Service beginning after 1/1/85, accrued pension reduced 1/15th for each of the first 5 years, 1/30th for each of the next 5 years, and actuarially reduced if Early Retirement is before age 55.

Due to the Plan Freeze, no benefit accruals after December 31, 2004. Future employment will be credited towards Early Retirement eligibility.

M. Disability Retirement

Service Connected

Eligibility

For Participants as of July 1, 1979 only; total and permanent disability, i.e., unable to render useful and efficient service as an employee.

Benefit

Accrued pension, on a Life Annuity basis, but not less than 42% of Final Average Pay.

Due to the Plan Freeze, no benefit accruals after December 31, 2004.

Non-Service Connected and/or New Participant after 7/1/79

Eligibility

Total and permanent disability as stated above, but with five (5) years of Credited Service. If Credited Service begins after 1/1/85, there is a five (5) month waiting period and must be receiving Social Security disability benefits.

Benefit

Accrued pension, on a Life Annuity basis, but not less than 25% of Final Average Pay if Credited Service before 1/1/85, and not less than 70% of projected Normal Retirement Benefit (based on Final Average pay at disablement) if Credited Service begins after 1/1/85.

Due to the Plan Freeze, no benefit accruals after December 31, 2004.

N. Death (Prior to Retirement)

Service Connected

50% of pay to spouse, for life or until remarriage, and/or unmarried children under age 18; or pension otherwise payable, if greater.

Due to the Plan Freeze, pay used to calculate this benefit is the pay for the calendar year 2004.

Non-Service Connected

Eligibility

Five (5) years of Credited Service

Benefit

Accrued pension payable to spouse in the form of a Qualified Joint and Survivor Annuity or as a 10 Year Certain benefit if unmarried or if elected (with spouse's consent). Benefit payable at employee's earliest retirement date and reduced as if employee had retired on the date benefit commences.

Due to the Plan Freeze, no benefit accruals after December 31, 2004.

O. Vesting (Termination Benefits if Not Eligible for Any of the Above)

Five (5) Years or More

Vested Accrued pension payable at Normal Retirement Date, or payable immediately after reduction for Early Retirement.

Due to the Plan Freeze, no benefit accruals after December 31, 2004. Future employment will be counted towards vesting.

P. Cost of Living Increases for Retirees with Credited Service prior to 1/1/85

3.0% per year, limited to the change in the Consumer Price Index for years prior to 2023. Cost of living adjustments begin on October 1 following age 65 for retirees and their beneficiaries and October 1 immediately following retirement for disability retirees.

Q. Changes from Previous Report

The following Plan provisions were changed since the prior year valuation:

- The cost of living increase for eligible participants was changed from a variable rate, based upon the Consumer Price Index (with a maximum of 3.0% per year), to a fixed rate of 3.0% per year effective with the October 2023 increase.
- A one-time special election period was added to the Plan for vested deferred Participants to have the opportunity to elect a lump sum distribution of the full value of their pension benefit during the period June 15, 2023 through August 15, 2023.
- The maximum limit on regular lump sum distributions was increased from \$3,500 to \$5,000 (and to \$7,000 effective January 1, 2024).
- The Plan was amended to allow for automatic payment or rollover (to default safe harbor IRAs) for vested deferred Participants with lump sum values under \$5,000 (increasing to \$7,000 effective January 1, 2024).

**Attachment to Schedule SB, Part VI, Line 24
Change in Actuarial Assumptions
For Plan Year Ending December 31, 2024
EIN: 59-1917016**

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

The valuation recognizes the following non-prescribed assumption changes as of January 1, 2024:

- The Expected Return on Asset assumption (which is also the ASC 960 accounting interest rate) was increased from 3.50% as of January 1, 2022 to 5.00% as of January 1, 2023. The EROA is used in the development of the actuarial value of assets. Refer to the following table for more information:

Year	Unlimited Expected Return (ASC 960 accounting interest rate)	Third Segment Rate Limit	Final (Limited) Expected Return Used in Development of Actuarial Value of Assets
2023	5.00%	5.74%	5.00%
2022	3.50%	5.92%	3.50%

This change was made to better reflect the anticipated plan experience and fixed-income yield levels as of January 1, 2023.

Attachment to Schedule SB, Part VI, Line 26a
 Schedule of Active Participant Data

EIN: 59-1917016

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

ACTIVE PARTICIPANT AGE-CREDITED SERVICE-DISTRIBUTION
JANUARY 1, 2024

AGE	COMPLETED YEARS OF CREDITED SERVICE										TOTAL	
	00-00	01-04	05-09	10-14	15-19	20-24	25-29	30-34	35-39	40+		
15-24												
25-29												
30-34												
35-39												
40-44	15	3										18
45-49	25	28	2									55
50-54	26	42	28	1								97
55-59	15	49	25	21	1							111
60-64	25	33	20	39	5	1						123
65-69	9	16	7	7	1	2						42
70+	1	2		2								5
TOTAL	116	173	82	70	7	3						451

Average Age: 57.1 years

Average Credited Service: 8.7 years

Percentage Female: 77.8%

Attachment to Schedule SB, Part VI, Line 26b
Schedule of Projection of Expected Benefit Payments
For Plan Year Ending December 31, 2024
EIN: 59-1917016

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants	Total
			and Beneficiaries Receiving Payments	
2024	710,598	529,328	6,056,967	7,296,893
2025	910,713	678,791	5,951,011	7,540,515
2026	1,105,562	830,348	5,831,845	7,767,755
2027	1,255,628	960,855	5,707,048	7,923,531
2028	1,424,931	1,127,149	5,569,371	8,121,451
2029	1,535,184	1,259,726	5,420,423	8,215,333
2030	1,631,993	1,435,839	5,259,449	8,327,281
2031	1,695,368	1,535,312	5,078,602	8,309,282
2032	1,772,347	1,626,214	4,899,305	8,297,866
2033	1,818,242	1,737,616	4,714,517	8,270,375
2034	1,846,508	1,814,356	4,522,199	8,183,063
2035	1,870,929	1,890,195	4,323,322	8,084,446
2036	1,870,774	1,959,269	4,116,933	7,946,976
2037	1,878,658	2,012,182	3,903,828	7,794,668
2038	1,858,470	2,051,421	3,684,957	7,594,848
2039	1,830,171	2,070,572	3,461,429	7,362,172
2040	1,797,566	2,072,445	3,234,501	7,104,512
2041	1,759,263	2,045,505	3,005,580	6,810,348
2042	1,715,693	2,023,990	2,776,239	6,515,922
2043	1,666,461	1,988,857	2,548,244	6,203,562
2044	1,611,829	1,939,351	2,323,470	5,874,650
2045	1,551,261	1,877,163	2,103,803	5,532,227
2046	1,486,005	1,807,554	1,891,081	5,184,640
2047	1,416,760	1,733,129	1,687,011	4,836,900
2048	1,343,914	1,655,126	1,493,159	4,492,199
2049	1,267,760	1,573,771	1,310,865	4,152,396
2050	1,188,753	1,489,343	1,141,220	3,819,316
2051	1,107,688	1,402,235	985,042	3,494,965
2052	1,025,292	1,312,948	842,848	3,181,088
2053	942,386	1,222,087	714,850	2,879,323
2054	859,867	1,130,371	600,965	2,591,203
2055	778,646	1,038,624	500,832	2,318,102
2056	699,609	947,723	413,842	2,061,174
2057	623,584	858,557	339,176	1,821,317
2058	551,294	771,973	275,849	1,599,116
2059	483,346	688,764	222,758	1,394,868
2060	420,201	609,621	178,756	1,208,578

**Attachment to Schedule SB, Part VI, Line 26b
Schedule of Projection of Expected Benefit Payments
For Plan Year Ending December 31, 2024**

EIN: 59-1917016

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2061	362,182	535,117	142,694	1,039,993
2062	309,476	465,710	113,449	888,635
2063	262,136	401,720	89,959	753,815
2064	220,099	343,349	71,251	634,699
2065	183,175	290,680	56,458	530,313
2066	151,089	243,665	44,830	439,584
2067	123,499	202,158	35,736	361,393
2068	100,016	165,926	28,646	294,588
2069	80,236	134,665	23,129	238,030
2070	63,743	108,016	18,843	190,602
2071	50,130	85,577	15,511	151,218
2072	39,012	66,922	12,921	118,855
2073	30,029	51,620	10,903	92,552

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024

(a)	(b)	(c)			(d)	(e)
		Description of Investment				
	Identity of issuer, borrower, lessor or similar party	Par/ Shares	Maturity Date	Interest Rate %	Cost	Current Value
	MONEY MARKET FUNDS					
	FEDERATED HERMES TREASURY OBLIGATION	44,987,157	N/A	N/A	\$ 44,987,157	\$ 44,987,157
	TOTAL MONEY MARKET FUNDS				<u>\$ 44,987,157</u>	<u>\$ 44,987,157</u>
	U.S. GOVERNMENT AND AGENCY OBLIGATIONS					
	UNITED STATES TREASURY BONDS	4,175,600	2/15/2045	3.60	\$ 2,949,909	\$ 2,897,115
	UNITED STATES TREASURY NOTES	350,000	11/15/2032	4.23	348,005	341,362
	UNITED STATES TREASURY NOTES	922,100	5/15/2034	4.44	947,828	907,927
	TOTAL U.S. GOVERNMENT AND AGENCY OBLIGATIONS				<u>\$ 4,245,742</u>	<u>\$ 4,146,404</u>
	CORPORATE BONDS AND NOTES					
	ABBVIE INC	285,000	3/15/2034	5.11	280,451	281,574
	ABBVIE INC	570,000	3/15/2054	5.61	559,979	548,659
	ABBVIE INC	650,000	11/6/2042	5.08	568,269	562,588
	AERCAP IRELAND CAPITAL LTD	590,000	1/19/2034	5.41	571,828	578,477
	AKER BP ASA	562,000	10/1/2054	6.40	559,864	509,037
	AKER BP ASA SR	565,000	6/13/2033	5.97	568,237	567,452
	ALCOA INC	550,000	2/1/2037	5.75	560,791	568,821
	ALEXANDRIA REAL ESTATE	380,000	2/1/2050	5.39	279,726	282,047
	ALTRIA GROUP INC	390,000	9/16/2046	5.35	283,043	282,664
	AMAZON.COM INC	800,000	5/12/2041	3.92	587,160	587,248
	AMAZON.COM INC	645,000	6/3/2050	4.19	389,193	384,807
	AMERICA MOVIL SAB DE CV	385,000	3/30/2040	6.00	399,676	393,374
	AMERICAN HOMES 4 RENT	370,000	4/15/2052	5.52	283,109	288,108
	AMERICAN TOWER CORP	395,000	10/15/2049	5.11	282,674	286,023
	AMGEN INC	630,000	3/1/2033	4.53	578,378	584,256
	AMGEN INC	1,165,000	3/2/2043	5.76	1,147,875	1,132,531
	AMGEN INC	300,000	3/2/2053	5.87	308,388	288,831
	ANHEUSER-BUSCH CO	1,035,000	2/1/2036	4.96	972,538	981,718
	ANHEUSER-BUSCH COS LLC	610,000	2/1/2046	5.39	556,454	554,716
	AON NORTH AMERICA INC	285,000	3/1/2054	5.90	279,049	277,904
	APACHE CORP	667,000	9/1/2040	5.85	567,090	581,224
	APOLLO DEBT SOLUTIONS BD	586,000	4/13/2029	6.67	609,317	606,211
	APOLLO MANAGEMENT HOLDINGS LP	615,000	2/15/2029	4.91	618,752	610,683
	APPLE INC	680,000	5/4/2043	4.65	566,270	563,271
	APPLE INC	490,000	8/8/2052	4.97	393,416	389,839
	ARES CAPITAL CORP	604,000	7/15/2029	5.89	614,769	610,723
	ARES FINANCE CO	305,000	6/30/2051	4.31	284,669	292,266
	AT&T INC	1,275,000	5/15/2035	4.87	1,161,041	1,179,222
	AT&T INC	1,125,000	6/1/2041	4.57	852,458	862,054
	ATHENE HOLDING LTD	501,000	4/1/2054	6.24	505,337	501,862
	ATHENE HOLDING LTD	440,000	10/15/2054	6.66	440,000	437,540
	ATHENE HOLDING LTD	560,000	1/15/2034	5.80	556,035	567,588
	AVOLON HOLDINGS FNDG	606,000	3/1/2029	5.69	619,290	612,157
	BACARDI LTD	760,000	5/15/2048	5.91	684,421	681,051
	BANK OF AMERICA CORP	1,485,000	9/21/2036	3.05	1,200,593	1,209,889
	BANK OF AMERICA CORP	1,185,000	4/25/2034	5.33	1,176,665	1,175,046
	BANK OF AMERICA CORP	1,220,000	6/19/2041	3.86	846,839	846,961
	BARCLAYS PLC	760,000	11/24/2042	4.60	559,018	550,080
	BAT CAPITAL CORP	265,000	8/2/2033	6.08	275,825	280,089
	BAT CAPITAL CORP	515,000	8/2/2053	6.45	551,853	565,001
	BAT CAPITAL CORP	150,000	8/15/2047	5.76	122,013	118,295
	BERKLEY (WR) CORPORATION	485,000	9/30/2061	5.36	284,991	285,156
	BERKSHIRE HATHAWAY ENERGY CO	340,000	5/1/2053	5.54	281,085	282,095

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

**Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

(a)	(b)	(c)			(d)	(e)
		Description of Investment				
	Identity of issuer, borrower, lessor or similar party	Par/ Shares	Maturity Date	Interest Rate %	Cost	Current Value
	BERKSHIRE HATHAWAY FIN	360,000	3/15/2052	5.09	277,110	272,531
	BLACKROCK FUNDING INC	144,000	1/8/2055	5.60	143,597	137,464
	BLACKSTONE HOLDINGS FINA	275,000	8/15/2042	6.15	280,929	279,521
	BLACKSTONE PRIVATE CREDIT FUND	545,000	1/25/2031	6.15	552,098	554,167
	BLUE OWL FINANCE LLC	400,000	10/7/2051	5.66	284,600	291,296
	BOARDWALK PIPELINES LP	320,000	2/15/2031	3.81	277,850	285,882
	BOEING CO	620,000	5/1/2040	6.00	568,242	589,856
	BOEING CO/THE	285,000	5/1/2034	6.23	288,380	298,569
	BOEING CO/THE	275,000	5/1/2054	6.45	278,297	292,284
	BP CAP MARKETS	435,000	6/4/2051	4.75	276,812	269,309
	BP CAP MARKETS AMERICA	380,000	6/17/2041	4.24	275,325	274,121
	BRISTOL-MYERS SQUIBB CO	290,000	2/22/2034	5.21	286,970	289,638
	BRISTOL-MYERS SQUIBB CO	735,000	11/13/2050	4.41	428,726	425,418
	BROADCOM INC	670,000	4/15/2034	4.00	562,813	580,662
	BROADCOM INC	740,000	2/15/2041	4.48	561,090	577,888
	BURLINGTON NORTH SANTA FE	610,000	4/1/2044	5.35	561,322	558,540
	CARGILL INC	335,000	4/22/2052	5.30	280,790	276,395
	CARLYLE HOLDINGS II FIN	295,000	3/30/2043	5.85	281,566	283,899
	CENTERPOINT ENERGY HOUSTON	280,000	3/1/2034	5.21	275,408	276,601
	CHARLES SCHWAB CORP	335,000	12/31/2099	4.63	280,683	289,206
	CHARTER COMM OPT LLC	605,000	12/1/2061	6.61	391,181	402,706
	CHARTER COMM OPT LLC/CAP	150,000	10/23/2045	6.86	146,031	141,738
	CHARTER COMM OPT LLC/CAP	300,000	10/23/2055	7.02	283,854	291,876
	CHENIERE CORP CHRISTI HD	350,000	12/31/2039	3.44	278,663	278,866
	CITIGROUP INC	555,000	5/25/2034	6.06	562,592	565,395
	CITIZENS FINL GROUP INC	280,000	1/23/2030	5.76	278,012	284,124
	CMS ENERGY CORP	690,000	12/1/2050	4.31	571,871	600,680
	COMCAST CORP	545,000	1/15/2051	4.71	350,321	323,921
	COMCAST CORP	1,147,000	11/1/2039	4.29	870,309	869,151
	COMERICA INC	285,000	1/30/2030	5.92	280,677	288,195
	CONCENTRIX CORP	344,000	8/2/2033	6.79	340,193	347,003
	CONOCOPHILLIPS	365,000	2/1/2039	5.95	399,726	398,963
	CONSOLIDATED EDISON CO	650,000	12/1/2048	5.44	553,696	555,347
	CONSTELLATION BRANDS INC	385,000	5/1/2050	5.12	281,920	282,051
	COREBRIDGE FINANCIAL INC	720,000	4/5/2052	5.48	568,051	578,405
	COREBRIDGE FINL INC	282,000	9/15/2054	6.42	282,000	280,071
	COSTAR GROUP INC	330,000	7/15/2030	3.21	278,273	288,169
	CRH AMERICA FINANCE INC	340,000	4/4/2048	5.42	282,496	282,156
	CSL FIN PLC	455,000	4/3/2054	5.76	437,665	428,046
	CSX CORP	650,000	11/15/2052	5.34	553,066	548,119
	CUMMINS INC	285,000	2/20/2054	5.60	278,334	277,328
	DANAHER CORP	440,000	12/10/2051	4.54	275,141	271,520
	DCP MIDSTREAM OPERATING	290,000	4/1/2044	5.99	277,530	271,054
	DIAGEO CAPITAL PLC	345,000	4/29/2043	4.86	282,476	275,013
	DIAMONDBACK ENERGY INC	596,000	4/18/2034	5.49	596,922	586,011
	DOMINION ENERGY INC	234,000	8/15/2052	5.65	205,826	200,912
	DOMINION ENERGY INC	780,000	4/15/2041	4.48	567,294	574,439
	DOMINION ENERGY INC	230,000	5/15/2055	6.52	230,000	233,832
	DTE ELEC CO	770,000	3/1/2052	4.99	562,562	563,371
	DTE ELECTRIC CO	280,000	4/1/2033	5.21	278,510	279,672
	DUKE ENERGY CORP	640,000	8/15/2052	5.73	556,051	558,522
	DUKE ENERGY FLA LLC	560,000	11/15/2033	5.65	579,247	582,837
	DUKE ENERGY PROGRESS LLC	780,000	9/15/2047	4.95	565,531	567,380
	ENABLE MIDSTREAM PARTNERS	640,000	5/15/2044	5.82	550,234	550,323
	ENERGY TRANSFER OPERATNG	532,000	5/15/2050	5.89	448,912	451,328

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

**Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

(a)	(b)	(c)			(d)	(e)
		Description of Investment				
	Identity of issuer, borrower, lessor or similar party	Par/ Shares	Maturity Date	Interest Rate %	Cost	Current Value
	ENLINK MIDSTREAM LLC	854,000	9/1/2030	6.21	903,634	894,360
	ENSTAR FINANCE LLC	295,000	1/15/2042	5.76	288,283	281,693
	ENERGY LOUISIANA LLC	570,000	3/15/2054	5.77	559,598	563,251
	ENTERPRISE PRODUCTS OPER	437,000	2/15/2053	5.02	294,158	287,271
	ERAC USA FINANCE LLC	570,000	3/15/2042	5.66	566,842	566,455
	EVERSOURCE ENERGY	410,000	1/15/2050	5.05	279,079	280,206
	EXELON CORP	929,000	3/15/2033	5.31	915,934	926,770
	EXXON MOBIL CORPORATION	320,000	3/19/2040	4.82	281,280	280,579
	FACTSET RESEARCH SYSTEMS	660,000	3/1/2032	3.91	567,277	582,424
	FEDERAL REALTY INVT TRUST	310,000	6/1/2030	3.82	277,887	284,357
	FIDELITY NATL FINANCIAL INC	455,000	9/17/2051	5.20	280,690	280,203
	FIFTH THIRD BANCORP	635,000	4/25/2033	4.67	575,221	589,883
	FIRST AMERICAN FINANCIAL	316,000	9/30/2034	5.65	315,231	304,700
	FIRSTENERGY CORP	650,000	7/15/2047	5.69	554,359	554,405
	FISERV INC	680,000	7/1/2049	5.39	552,242	555,172
	FLORIDA POWER CORP	530,000	9/15/2037	5.97	559,367	563,364
	FORD MOTOR COMPANY	353,000	1/15/2043	6.03	291,942	278,284
	FORD MOTOR COMPANY	280,000	8/19/2032	6.13	278,328	278,645
	FOUNDRY JV HOLDCO LLC	286,000	1/25/2038	6.33	296,771	288,977
	GE CAPITAL INTL FUNDING	300,000	11/15/2035	4.79	274,338	276,945
	GE HEALTHCARE TECH INC	510,000	11/22/2052	5.93	551,973	548,235
	GENERAL MOTORS FINL CO	275,000	1/7/2034	6.01	275,902	278,982
	GEORGIA POWER CO	1,200,000	5/15/2052	5.53	1,149,216	1,113,204
	GLOBAL ATLANTIC FIN CO	727,000	3/15/2054	6.65	726,553	737,774
	HALEON US CAPITAL LLC	355,000	3/24/2052	5.19	280,070	273,883
	HALLIBURTON CO	600,000	11/15/2045	5.60	546,216	535,668
	HARRIS CORPORATION	310,000	4/27/2045	5.52	285,377	284,050
	HCA INC	575,000	4/1/2054	6.30	560,844	547,751
	HCA INC	565,000	6/1/2033	5.56	555,525	558,960
	HOME DEPOT INC	915,000	9/15/2051	4.51	561,234	558,205
	HP ENTERPRISE CO	150,000	10/15/2045	6.12	160,584	155,673
	HSBC HOLDINGS INC	802,000	11/22/2032	3.40	655,915	676,615
	HUNTINGTON BANCSHARES INC	555,000	8/21/2029	6.01	564,862	572,976
	HYUNDAI CAPITAL AMERICA	585,000	9/21/2030	5.96	612,499	608,517
	INDIANA MICHIGAN POWER	580,000	4/1/2053	5.77	566,370	565,117
	INTERCONTINENTAL EXCHANGE INC	340,000	9/21/2048	5.26	279,378	274,659
	INVITATION HOMES OP	315,000	4/15/2032	4.50	284,451	290,525
	JEFFERIES GROUP INC	150,000	1/20/2043	6.12	159,807	159,336
	JOHNSON (S.C.) & SON INC	330,000	10/15/2046	5.59	283,275	280,431
	JPMORGAN CHASE	302,000	11/29/2045	5.67	302,000	294,797
	JPMORGAN CHASE & CO	990,000	7/25/2033	5.02	949,019	967,943
	JPMORGAN CHASE & CO	680,000	2/22/2048	5.15	570,996	563,020
	JPMORGAN CHASE & CO	1,535,000	4/22/2041	4.19	1,144,465	1,137,926
	KENVUE INC	300,000	3/22/2030	4.96	313,452	302,250
	KIMCO REALTY CORP	355,000	9/1/2047	5.40	280,461	292,556
	KINDER MORGAN INC	430,000	2/15/2051	5.33	293,346	290,254
	KKR GROUP FIN CO X LLC	716,000	12/15/2051	4.98	483,966	467,348
	KLA CORP	300,000	7/15/2052	5.45	277,107	272,658
	KRAFT FOODS GROUP INC	250,000	1/26/2039	6.24	275,538	275,663
	KRAFT HEINZ FOODS CO	325,000	10/1/2049	5.70	282,835	277,807
	LAM RESEARCH CORP	420,000	6/15/2050	4.55	273,286	265,289
	LEXINGTON REALTY TRUST	340,000	9/15/2030	3.12	281,625	294,039
	LLOYDS BANKING GROUP PLC	405,000	12/14/2046	4.87	280,009	280,171
	LOCKHEED MARTIN CORP	690,000	6/15/2053	5.19	554,967	551,393
	LOWES COS INC	597,000	7/1/2033	5.18	614,474	593,561

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

**Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

(a)	(b)	(c)			(d)	(e)
		Description of Investment				
	Identity of issuer, borrower, lessor or similar party	Par/ Shares	Maturity Date	Interest Rate %	Cost	Current Value
	LOWE'S COS INC	305,000	4/15/2040	5.35	281,280	285,059
	LPL HOLDINGS INC	290,000	5/20/2034	5.89	289,391	295,264
	LYB INT FINANCE III	370,000	5/1/2050	5.63	281,848	275,898
	MACQUARIE BANK LTD	535,000	1/18/2033	6.41	561,194	567,806
	MARATHON PETROLEUM CORP	260,000	9/15/2044	5.72	231,808	215,774
	MARTIN MARIETTA MATERIALS	340,000	12/15/2047	5.29	276,757	273,013
	MARVELL TECHNOLOGY INC	280,000	9/15/2033	5.73	286,174	290,702
	MCDONALD'S CORP	430,000	12/9/2045	5.44	386,170	385,185
	MERCEDES-BENZ FIN NA	575,000	8/3/2033	5.18	562,735	561,148
	META PLATFORMS INC	660,000	8/15/2052	5.28	561,053	556,241
	META PLATFORMS INC	142,000	8/15/2054	5.58	141,433	137,509
	MICROSOFT CORP	920,000	6/1/2050	4.10	577,456	566,168
	MIDAMERICAN ENERGY CO	310,000	9/15/2043	5.35	279,186	278,343
	MORGAN STANLEY	880,000	4/21/2034	5.33	858,062	866,536
	MORGAN STANLEY	1,090,000	9/16/2036	3.05	856,500	886,530
	MPLX LP	620,000	12/1/2047	5.88	550,238	548,533
	MPLX LP	332,000	4/15/2038	5.16	293,687	289,351
	NATIONAL GRID PLC	270,000	6/12/2033	5.70	269,806	275,397
	NEW YORK LIFE INSURANCE	808,000	5/15/2050	5.15	598,298	588,337
	NEWMONT CORP	285,000	3/15/2034	5.38	282,084	283,558
	NEWMONT MINING CORP	305,000	3/15/2042	5.35	278,215	278,096
	NEXTERA ENERGY CAP	585,000	3/15/2034	5.31	569,995	578,606
	NIPPON LIFE INSURANCE	575,000	4/16/2054	5.90	572,476	579,819
	NORTHWESTERN MUTUAL LIFE	400,000	3/30/2051	5.03	276,236	274,516
	NOVARTIS CAPITAL CORP	375,000	9/18/2031	4.20	372,049	357,184
	NVIDIA CORP	630,000	4/1/2030	3.11	564,934	577,345
	NXP FDG LLC	580,000	1/15/2033	5.14	560,019	564,433
	ONCOR ELECTRIC DELIVERY COMPANY LLC	310,000	9/15/2052	5.54	280,476	276,877
	ONEOK INC	280,000	9/1/2053	6.30	297,998	294,398
	ONEOK INC	975,000	10/15/2029	4.54	973,967	945,263
	ORACLE CORP	870,000	2/6/2033	5.03	837,349	847,058
	ORACLE CORP	740,000	3/25/2041	4.68	563,924	577,008
	OREILLY AUTOMOTIVE INC	300,000	4/1/2030	4.37	282,918	288,420
	OVINTIV INC	510,000	7/15/2053	6.67	558,470	542,808
	PACIFIC LIFECORP	415,000	9/15/2050	5.05	282,997	275,548
	PACKAGING CORP AMER	435,000	10/1/2051	4.75	282,902	279,170
	PENSKE TRUCK LEASING CO	530,000	6/15/2030	5.91	547,336	556,150
	PFIZER INVT ENTERPRISES	600,000	5/19/2033	4.89	611,922	583,008
	PHILIP MORRIS INTL INC	660,000	11/15/2041	5.15	553,865	561,033
	PHILIP MORRIS INTL INC	340,000	11/10/2044	5.19	275,427	278,327
	PNC FINANCIAL SERVICES	967,000	1/22/2030	2.87	878,337	858,735
	PROLOGIS TA US LOG FD LP	575,000	4/1/2034	5.49	566,640	575,650
	PRUDENTIAL FINANCIAL INC	665,000	10/1/2050	4.16	573,636	591,577
	PUBLIC SERVICE ELECTRIC	370,000	5/1/2049	5.03	285,740	283,416
	PUBLIC STORAGE	290,000	8/1/2053	5.63	278,209	275,660
	PUGET SOUND ENERGY INC	280,000	4/15/2041	5.74	275,612	274,890
	RADIAN GROUP INC	560,000	5/15/2029	6.04	562,156	574,689
	REALTY INCOME CORP	90,000	9/1/2054	5.66	88,537	85,433
	REINSURANCE GRP OF AMER	585,000	9/15/2034	5.71	580,601	589,604
	RTX CORPORATION	270,000	3/15/2034	5.79	281,467	284,310
	RTX CORPORATION	255,000	3/15/2054	5.89	277,172	277,330
	S&P GLOBAL INC	750,000	3/1/2052	4.96	563,535	559,680
	SALESFORCE.COM INC	430,000	7/15/2051	4.54	276,516	274,637
	SAMMONS FINANCIAL GROUP	280,000	4/15/2034	6.58	284,217	292,589
	SAN DIEGO G & E	350,000	6/15/2049	5.24	273,686	274,124

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024

(a)	(b)	(c)			(d)	(e)
		Description of Investment				
	Identity of issuer, borrower, lessor or similar party	Par/ Shares	Maturity Date	Interest Rate %	Cost	Current Value
	SAUDI ARABIAN OIL CO	200,000	7/17/2064	6.30	195,278	186,508
	SBL HOLDINGS INC	777,000	10/30/2034	7.40	774,122	755,687
	SEMPRA ENERGY	690,000	2/1/2038	4.60	560,170	570,271
	SEMPRA INFRASTRUCTURE PARTNERS	340,000	1/15/2032	3.89	278,970	283,931
	SHELL INTERNATIONAL FIN	500,000	12/15/2038	5.86	545,760	544,190
	SMURFIT KAPPA TREAS	285,000	4/3/2034	5.45	279,956	284,493
	SOUTHERN CAL EDISON	580,000	3/1/2053	5.86	565,541	564,108
	SOUTHERN CAL EDISON	550,000	11/1/2032	5.71	566,198	573,612
	SOUTHERN COPPER CORP	245,000	7/27/2035	6.59	282,022	278,986
	SPRINT CAPITAL CORP	235,000	3/15/2032	7.33	279,930	280,567
	STARBUCKS CORP	790,000	11/15/2050	5.07	554,240	545,764
	STEEL DYNAMICS INC	435,000	10/15/2050	4.95	283,246	285,643
	TAKEDA PHARMACEUTICALS	400,000	7/9/2040	4.17	291,880	289,936
	TAKE-TWO INTERACTIVE SOF	310,000	4/14/2032	4.33	281,124	286,108
	TANGER PROPERTIES LP	700,000	9/1/2031	3.26	566,594	590,422
	TARGA RES CORP	270,000	7/1/2052	6.26	271,504	269,417
	TIME WARNER CABLE INC	485,000	5/1/2037	6.77	456,443	468,937
	T-MOBILE USA INC	570,000	1/15/2053	5.84	557,848	551,543
	T-MOBILE USA INC	1,335,000	4/15/2040	5.05	1,155,763	1,157,191
	TORONTO-DOMINION BANK	295,000	9/15/2031	3.73	280,695	286,716
	TOTALENERGIES CAP	440,000	9/10/2064	5.85	440,000	408,078
	TRACTOR SUPPLY CO	295,000	5/15/2033	5.25	291,018	294,826
	TRANSCANADA TRUST	564,000	3/7/2082	5.91	510,973	534,796
	UBS GROUP AG	595,000	8/5/2033	5.15	565,869	576,739
	UBS GROUP AG	350,000	9/6/2045	5.65	350,000	333,354
	UDR INC	715,000	11/1/2034	3.81	569,669	582,267
	UNION ELECTRIC CO	420,000	10/1/2049	4.72	282,866	289,426
	UNION PACIFIC CORP	670,000	9/15/2037	4.29	559,028	562,237
	UNITEDHEALTH GROUP INC	245,000	2/15/2038	6.09	278,411	276,767
	UNITEDHEALTH GROUP INC	590,000	4/15/2034	5.12	577,162	575,752
	VERIZON COMMUNICATIONS	384,000	3/22/2041	4.50	294,182	290,415
	VERIZON COMMUNICATIONS INC	1,175,000	3/16/2037	5.38	1,149,538	1,146,929
	VICI PROPERTIES LP	590,000	4/1/2054	6.17	563,975	586,206
	VISTRA OPERATIONS CO LLC	172,000	12/30/2034	5.76	171,833	170,196
	VOYA FINANCIAL INC	150,000	6/15/2046	5.64	130,470	127,775
	WALMART INC	405,000	9/22/2041	3.63	278,968	278,806
	WALT DISNEY CO	445,000	9/1/2049	4.41	280,150	277,529
	WARNERMEDIA HOLDINGS INC	325,000	3/15/2032	4.86	282,802	286,393
	WASTE CONNECTIONS INC	435,000	1/15/2052	4.73	277,404	271,370
	WELLS FARGO & COMPANY	1,183,000	4/24/2034	5.45	1,185,580	1,169,833
	WELLS FARGO & COMPANY	788,000	4/30/2041	4.22	575,996	573,317
	WELLS FARGO & COMPANY	605,000	11/2/2043	5.76	569,868	564,913
	WOODSIDE FINANCE LTD	435,000	9/12/2054	6.11	433,451	405,803
	WYETH	270,000	4/1/2037	5.70	281,364	281,867
	XCEL ENERGY INC	820,000	12/1/2049	5.09	557,789	564,349
	ZOETIS INC	315,000	2/1/2043	5.29	279,594	279,924
	TOTAL CORPORATE BONDS AND NOTES				\$ 114,986,202	\$ 114,973,729
	FIXED INCOME MUTUAL FUNDS					
	BAIRD SHORT TERM BOND FD	4,492,790	0	4.334	\$ 44,638,055	\$ 42,501,797
	VANGUARD SHORT-TERM BOND INDEX FD	4,120,020	0	3.317	\$ 44,648,561	\$ 41,735,800
	TOTAL FIXED INCOME MUTUAL FUNDS				\$ 89,286,616	\$ 84,237,597
	TOTAL				\$ 253,505,717	\$ 248,344,887

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

Attachment to Schedule SB, Part V
Statement of Actuarial Assumptions and Methods
For Plan Year Ending December 31, 2024
EIN: 59-1917016

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

I. SUMMARY OF ACTUARIAL METHODS

A. Calculation of Funding Liabilities and Costs

Liabilities and contributions shown in this report are calculated using the unit credit actuarial cost method, as prescribed under Internal Revenue Code §430 and ASC 960.

The objective under this method is to fund each participant's benefits under the Plan as they accrue. An individual's funding target is the actuarial present value of the accrued benefits as of the valuation date determined by applying mortality table and the yield curve of high-quality corporate bond rates prescribed by the IRS. The Plan's funding target is the sum of the funding targets for all participants in the Plan. Since the Plan is frozen, the target normal cost is zero for Plan participants. Beginning in 2009, Plan administrative expenses expected to be paid out of pension trust assets must be included as part of the normal cost. Plan administrative expenses are not expected to be paid out of pension trust assets in 2024, so they are assumed to be zero for the current valuation.

In the first year in which the adjusted plan assets (actuarial value of assets, reduced by any retained credit balances), is less than the funding target, a shortfall amortization base must be established. This base is amortized over a 7-year period (exception noted below) using the 1st and 2nd funding segment interest rates from the prescribed corporate bond yield curve. New shortfall amortization bases are established each year based on the Plan's funded status each year, and all bases are maintained until either fully amortized or until the adjusted plan assets exceed the funding target. The Shortfall Amortization Bases established in 2010 and 2011 are amortized over a period of fifteen (15) years, as permitted under the Preservation of Access to Care for Medicare Beneficiaries and Pension Relief Act and elected by Tallahassee Memorial HealthCare, Inc.

The American Rescue Plan Act of 2021 changed the rules for amortizing shortfall amortization bases. Under the ARPA all existing amortization bases were required to be eliminated and replaced with one 15-year amortization base effective in the 2022 plan year. All shortfall bases established in 2023 and later must also be amortized over a 15-year period. Plan sponsors can choose to make these changes effective for plan years beginning as early as in 2019.

B. Description of Asset Valuation Method

The method for valuing plan assets is the 24-month asset smoothing method as described and made available under the Worker, Retiree, and Employer Recovery Act of 2008 (WRERA).

C. Valuation Procedures

No benefits are projected to be greater than the limitation currently imposed by Section 415(b)(1) of the Internal Revenue Code, in accordance with the requirements of Section 404(j) of the Code.

No actuarial accrued liability is held for nonvested, inactive participants who have a break in service, or for nonvested participants who have quit or been terminated, even if a break in service had not occurred as of the valuation date.

II. SUMMARY OF ACTUARIAL ASSUMPTIONS

A. ACTUARIAL ASSUMPTIONS

1. Funding Valuation Interest Rates

Applicable Month	September
Funding Target (with ARPA corridor adjustments)	
First segment rate (0 – 5 yrs)	4.75% (4.75% used in 2023)
Second segment rate (6 – 20)	4.87% (5.00% used in 2023)
Third segment rates (20+)	5.59% (5.74% used in 2023)
Effective interest rate	5.10% (5.22% used in 2023)
Funding Target (without corridor adjustments)	
First segment rate (0 – 5 yrs)	3.62% (1.41% used in 2023)
Second segment rate (6 – 20)	4.46% (3.09% used in 2023)
Third segment rates (20+)	4.52% (3.58% used in 2023)
Effective interest rate	4.43% (3.19% used in 2023)
PBGC Funding Target (Standard Method)	
First segment rate (0 – 5 yrs)	5.01% (4.84% used in 2023)
Second segment rate (6 – 20)	5.13% (5.15% used in 2023)
Third segment rates (20+)	5.15% (4.85% used in 2023)

2. Accounting Interest Rate

ASC 960 Liabilities	4.50%, compounded annually (5.00% used in 2023)
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3. Mortality	<p>For funding, the prescribed sex-distinct mortality tables with separate rates for annuitants and non-annuitants contained in final regulations issued by the U.S. Treasury Department and IRS (T.D. 9983), with fully generational mortality improvements projected using the 2024 Adjusted Scale MP–2021 (also prescribed in T.D. 9983).</p> <p>For ASC 960 accounting, the Pri-2012 Total Dataset Amount-Weighted Mortality Tables with separate sex-distinct rates for employees, healthy annuitants, contingent survivors, and disabled annuitants, with fully generational mortality improvements projected using scale MP-2021.</p> <p>90% of deaths are assumed to be non-service connected.</p>
4. Percentage Married	100%. Wives are assumed to be 3 years younger than their husbands.
5. Salary Increases	N/A due to Plan freeze as of December 31, 2004.
6. Retirement Age	<p>For participants with Credited Service prior to 1/1/85:</p> <p>Age 62 with 10 years of Credited Service (maximum age 70), or on the valuation date if over retirement age.</p> <p>For participants with Credited Service beginning after 1/1/85:</p> <p>Age 65, or on the valuation date if over age 65.</p>
7. Postretirement Cost of Living Increases	3.00% per year beginning at age 65 for pre-1985 participants.
8. Termination	Sample rates in the table on the next page.
9. Disability	<p>Sample rates in the table on the next page.</p> <p>90% of disabilities are assumed to be non-service connected.</p>

<u>Age</u>	<u>Annual Rate</u>	
	<u>Termination</u>	<u>Disability</u>
25	20.6%	0.09%
30	16.0	0.11
35	10.4	0.14
40	7.4	0.19
45	6.4	0.30
50	5.4	0.51
55	6.5	0.96
60	9.0	1.66

10. Changes from Previous Report

The funding valuation interest rate(s) have been updated to the September 2023 segment rates with ARPA/IIJA corridor adjustments from the September 2022 segment rates with ARPA/IIJA corridor adjustments.

The funding mortality tables and improvement projection scale have been updated in accordance with final regulations issued by the U.S. Treasury Department and IRS (T.D. 9983) (issued on October 20, 2023) which apply for valuation dates occurring on or after January 1, 2024.

The ASC 960 interest rate has been updated from 5.00% to 4.50% to reflect the re-allocation of assets to 100% fixed income and the interest rate environment as of the January 1, 2024.

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Acquired and Disposed of Within Year)
Year Ended December 31, 2024

(a)	(b)			(c)	(d)
Identity of issuer, borrower, lessor or similar party	Description of Investment	Maturity Date	Interest Rate %	Cost of Acquisitions	Proceeds of Dispositions
	Description				
AT&T INC	Corporate Bond	9/15/1955	3.55	\$ 45,431	\$ 83,131
BAE SYSTEMS PLC	Corporate Bond	3/26/1954	5.50	281,419	298,425
BANK OF AMER MTN V-Q 4.330%	Corporate Bond	3/15/1950	4.54	571,749	609,705
BARCLAYS PLC V-S	Corporate Bond	3/10/2042	3.81	571,504	580,690
CVS HEALTH CORP	Corporate Bond	7/20/2045	5.13	558,114	668,324
CVS HEALTH CORP	Corporate Bond	8/21/2040	2.70	281,295	292,715
CVS HEALTH CORP	Corporate Bond	6/1/1953	5.88	550,206	570,837
CAMPBELL SOUP CO	Corporate Bond	3/20/2026	5.30	376,904	376,968
CANADIAN PAC RY CO	Corporate Bond	5/1/1950	3.50	278,343	283,893
CENTENE CORP	Corporate Bond	10/15/2030	3.00	183,186	316,788
CISCO SYSTEMS INC	Corporate Bond	2/26/2034	5.05	175,530	173,698
CITIGROUP INC V-D	Corporate Bond	2/13/2030	5.17	126,000	124,681
CONSUMERS ENERGY CO	Corporate Bond	5/30/2029	4.60	165,615	162,489
DIAMONDBACK ENERGY	Corporate Bond	3/15/1952	4.25	279,173	291,089
DOWDUPONT INC	Corporate Bond	11/15/2038	5.32	273,905	290,452
EQT CORP	Corporate Bond	2/1/2030	7.00	273,915	284,903
ENBRIDGE INC	Corporate Bond	4/5/2029	5.30	100,282	99,668
ENERGY TRANSFER LP	Corporate Bond	5/15/2034	5.55	125,187	123,149
ENERGY LA LLC	Corporate Bond	6/15/2032	2.35	561,645	594,377
EXETER AUTOMOBIL ABS	Corporate Bond	8/16/2027	5.53	52,998	52,714
FORD CREDIT AUT ABS	Corporate Bond	5/15/2027	5.06	152,984	152,002
FORD MOTOR COMPANY	Corporate Bond	12/8/2046	5.29	275,914	293,229
GM FINANCIAL ABS	Corporate Bond	12/18/2028	4.85	82,983	81,911
GM FINL AUTO ABS	Corporate Bond	3/22/2027	5.09	215,973	214,625
GENERAL MOTORS CO	Corporate Bond	4/1/2046	6.75	282,366	289,062
GENERAL MOTORS CO	Corporate Bond	4/1/2038	5.15	283,337	294,946
GOLDMAN SACHS V-D	Corporate Bond	4/25/2035	5.85	61,000	62,246
HSBC HLDGS CONV V-D	Corporate Bond	5/17/2028	5.60	154,211	154,171
HARRIS CORPORATION	Corporate Bond	4/27/2035	4.85	281,733	299,334
HESS CORP	Corporate Bond	2/15/2041	5.60	280,842	292,382
HEWLETT PACKARD ENTE 4.850% 1	Corporate Bond	2/15/2041	4.85	480,682	476,180
HOME DEPOT INC	Corporate Bond	6/25/1954	5.30	140,762	147,396
INTERPUBLIC GRP	Corporate Bond	3/1/2041	3.38	283,082	291,025
KENVUE INC	Corporate Bond	3/22/1953	5.05	280,695	307,455
L3HARRIS TECH INC	Corporate Bond	6/1/2034	5.35	95,202	93,498
LYB INTERNATIONAL FI 5.500%	Corporate Bond	3/1/2034	4.20	174,202	172,737
LOWE'S COS INC	Corporate Bond	4/1/1951	3.50	280,871	297,004
LOWES COS INC	Corporate Bond	4/1/1962	4.45	278,518	298,181
MARATHON PETROL CORP 6.500%	Corporate Bond	3/1/2041	4.28	273,044	283,291
MATTEL INC	Corporate Bond	11/1/1941	5.45	285,158	293,760
MERCEDES-BENZ ABS	Corporate Bond	4/16/2029	4.80	278,981	275,513
METLIFE INC	Corporate Bond	8/13/2042	4.13	280,537	283,880
MICROCHIP TECHNOLOGY 5.050%	Corporate Bond	3/15/2029	2.53	107,007	106,008
MORGAN STAN MTN V-D	Corporate Bond	4/19/2035	5.83	173,213	176,505
NOVARTIS CAPITAL COR 4.700%	Corporate Bond	9/18/1954	3.45	145,907	142,827
OCCIDENTAL PETE CORP 6.600%	Corporate Bond	3/15/2046	4.20	281,075	283,524
PNC FINANCIAL V-D	Corporate Bond	1/22/2035	5.68	35,000	35,010
PACIFICORP	Corporate Bond	2/15/2029	5.10	159,950	158,934
PEPSICO INC	Corporate Bond	2/15/1953	4.65	561,813	605,719
PFIZER INVT ENTERPRI 5.110%	Corporate Bond	5/19/2043	4.75	553,515	596,010

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4i - Schedule of Assets (Acquired and Disposed of Within Year)
Year Ended December 31, 2024

(a) Identity of issuer, borrower, lessor or similar party	(b) Description of Investment			(c)	(d)
	Description	Maturity Date	Interest Rate %	Cost of Acquisitions	Proceeds of Dispositions
ROCHE HLDGS INC	Corporate Bond	3/8/1954	5.22	373,579	377,190
SBL HOLDINGS INC	Corporate Bond	2/18/2031	5.00	579,748	609,194
SOUTHERN CALIF EDISO 5.750%	Corporate Bond	4/15/1954	5.70	131,254	132,002
T MOBILE USA INC	Corporate Bond	1/15/2029	4.85	321,824	317,512
TECK COMINCO LTD	Corporate Bond	10/1/2035	6.13	283,788	296,173
US BANCORP V-D	Corporate Bond	1/23/2035	5.68	108,000	107,888
UNITEDHEALTH GROUP	Corporate Bond	8/15/2039	3.50	564,423	597,804
VOLKSWAGEN AUTO ABS	Corporate Bond	6/21/2027	5.21	103,991	103,480
WELLPOINT INC	Corporate Bond	8/15/2044	4.65	561,144	607,416
WELLS FARGO CO V-D	Corporate Bond	1/23/2035	5.50	64,000	63,410
WORLD OMNI AUTO ABS	Corporate Bond	3/15/2029	4.86	288,962	285,749
				\$ 16,433,671	\$ 17,234,879

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)

**Attachment to Schedule SB, Part V, Line 22
Description of Weighted Average Retirement Age
For Plan Year Ending December 31, 2024**

EIN: 59-1917016

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

Persons who are at or over the assumed retirement age on the valuation date are assumed to retire on the valuation date. Participants hired after 1/1/85 are assumed to retire at age 65; others may retire at 62. The retirement age on line 22 is a count-weighted average retirement age.

Attachment to Schedule SB, Part VI, Line 26b
Schedule of Projection of Expected Benefit Payments
For Plan Year Ending December 31, 2024
EIN: 59-1917016

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants	Total
			and Beneficiaries Receiving Payments	
2024	710,598	529,328	6,056,967	7,296,893
2025	910,713	678,791	5,951,011	7,540,515
2026	1,105,562	830,348	5,831,845	7,767,755
2027	1,255,628	960,855	5,707,048	7,923,531
2028	1,424,931	1,127,149	5,569,371	8,121,451
2029	1,535,184	1,259,726	5,420,423	8,215,333
2030	1,631,993	1,435,839	5,259,449	8,327,281
2031	1,695,368	1,535,312	5,078,602	8,309,282
2032	1,772,347	1,626,214	4,899,305	8,297,866
2033	1,818,242	1,737,616	4,714,517	8,270,375
2034	1,846,508	1,814,356	4,522,199	8,183,063
2035	1,870,929	1,890,195	4,323,322	8,084,446
2036	1,870,774	1,959,269	4,116,933	7,946,976
2037	1,878,658	2,012,182	3,903,828	7,794,668
2038	1,858,470	2,051,421	3,684,957	7,594,848
2039	1,830,171	2,070,572	3,461,429	7,362,172
2040	1,797,566	2,072,445	3,234,501	7,104,512
2041	1,759,263	2,045,505	3,005,580	6,810,348
2042	1,715,693	2,023,990	2,776,239	6,515,922
2043	1,666,461	1,988,857	2,548,244	6,203,562
2044	1,611,829	1,939,351	2,323,470	5,874,650
2045	1,551,261	1,877,163	2,103,803	5,532,227
2046	1,486,005	1,807,554	1,891,081	5,184,640
2047	1,416,760	1,733,129	1,687,011	4,836,900
2048	1,343,914	1,655,126	1,493,159	4,492,199
2049	1,267,760	1,573,771	1,310,865	4,152,396
2050	1,188,753	1,489,343	1,141,220	3,819,316
2051	1,107,688	1,402,235	985,042	3,494,965
2052	1,025,292	1,312,948	842,848	3,181,088
2053	942,386	1,222,087	714,850	2,879,323
2054	859,867	1,130,371	600,965	2,591,203
2055	778,646	1,038,624	500,832	2,318,102
2056	699,609	947,723	413,842	2,061,174
2057	623,584	858,557	339,176	1,821,317
2058	551,294	771,973	275,849	1,599,116
2059	483,346	688,764	222,758	1,394,868
2060	420,201	609,621	178,756	1,208,578

**Attachment to Schedule SB, Part VI, Line 26b
Schedule of Projection of Expected Benefit Payments
For Plan Year Ending December 31, 2024
EIN: 59-1917016**

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2061	362,182	535,117	142,694	1,039,993
2062	309,476	465,710	113,449	888,635
2063	262,136	401,720	89,959	753,815
2064	220,099	343,349	71,251	634,699
2065	183,175	290,680	56,458	530,313
2066	151,089	243,665	44,830	439,584
2067	123,499	202,158	35,736	361,393
2068	100,016	165,926	28,646	294,588
2069	80,236	134,665	23,129	238,030
2070	63,743	108,016	18,843	190,602
2071	50,130	85,577	15,511	151,218
2072	39,012	66,922	12,921	118,855
2073	30,029	51,620	10,903	92,552

Attachment to Schedule SB, Part V
Summary of Plan Provisions
For Plan Year Ending December 31, 2024
EIN: 59-1917016

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

SUMMARY OF PRINCIPAL PLAN PROVISIONS

A. Effective Date

July 1, 1979, **Plan frozen as of December 31, 2004.**

B. Eligibility Requirements

Those Florida Retirement System (FRS) participants employed as of the Effective Date began participation on the Effective Date. Those employed on or after the Effective Date participate following age 21 and completion of 1 Year of Service. **Due to the Plan freeze, no new entrants after December 31, 2004.**

C. Employer

Tallahassee Memorial HealthCare, Inc. and any affiliated entity who adopted the Plan.

D. Plan Year

January 1 through December 31.

E. FRS Service

For those Participants on the Effective Date, includes all service prior to July 1, 1979, for which a participant received credit for benefit purposes under the FRS and for which the Participant has not received a refund of required contributions. Also includes service for which the Participant has (a) re-deposited required contributions for prior service and/or (b) purchased past or military service (to include up to 4 years of *wartime* service). However, those with less than 10 years of FRS Service will receive credit for such service under this plan only if they request a refund of their contributions from FRS and deposit them into this Plan and Trust.

F. Future Service

Each Plan Year beginning January 1, 1980 in which a Participant completes 1000 Hours of Service, or one-half year's credit if Hours of Service completed were from 500-999.

G. Credited Service

For participants employed by Tallahassee Memorial HealthCare, Inc., total of FRS Service plus Prior Plan Service plus Future Service. For employees of Affiliated Employers, only

Future Service after Effective Date of adoption of the Plan, unless otherwise specified. **Due to the Plan Freeze, no service is credited after December 31, 2004.**

H. Compensation

Compensation as reported on IRS Form W-2, plus any deferred compensation accrued and any tax sheltered annuity contributions made by the Employer.

I. Final Average Pay

The average monthly amount of an Employee's Compensation during the highest five (5) calendar years included in the period of Credited Service.

Due to the Plan Freeze, no earnings are considered after December 31, 2004.

J. Normal Retirement

Employees with Credited Service prior to January 1, 1985

Eligibility

Age sixty-two (62) and ten (10) years of Credited Service.

Monthly Benefit (from the Plan and FRS combined)

Final Average Pay times each benefit rate in effect during the period of Credited Service times the years of Credited Service for which each benefit rate applies as follows:

Prior to 12/31/57 and for any FRS Division A service prior to 11/30/70 – 2%

1/1/58 through 11/30/70 – 1.5%

After 11/30/70 – 1.6% if retirement at Normal Retirement Date; 1.63% if one year later; 1.65% if two years later; 1.68% if three or more years later.

Maximum annual benefit not greater than Internal Revenue Code 415 limit.

Due to the Plan Freeze, no benefit accruals after December 31, 2004.

Employees with Credited Service beginning after January 1, 1985

Eligibility

Age sixty-five (65) and five (5) years of Plan participation.

Monthly Benefit

Final Average Pay times 1% up to \$833.33, plus 1.6% of Final Average Pay in excess of \$833.33 times years of Credited Service up to 35 years, plus 1.3% of Final Average pay times years of Credited Service over 35 years.

Due to the Plan Freeze, no benefit accruals after December 31, 2004.

Form of Benefit

Life Annuity (options available). If married, reduced benefit under Qualified Joint and Survivor Annuity Option, unless elected otherwise with Spousal Consent.

K. Supplemental Benefit

A supplemental benefit has been provided for a select group of management employees.

L. Early Retirement

Eligibility

Ten (10) years of Credited Service.

Benefit

For employees with Credited Service prior to 1/1/85, accrued pension reduced 5/12% for each month between Early and Normal Retirement Date (measured from age 62). Retirees with 30 years of Credited Service will receive the full accrued pension without reduction.

For employees with Credited Service beginning after 1/1/85, accrued pension reduced 1/15th for each of the first 5 years, 1/30th for each of the next 5 years, and actuarially reduced if Early Retirement is before age 55.

Due to the Plan Freeze, no benefit accruals after December 31, 2004. Future employment will be credited towards Early Retirement eligibility.

M. Disability Retirement

Service Connected

Eligibility

For Participants as of July 1, 1979 only; total and permanent disability, i.e., unable to render useful and efficient service as an employee.

Benefit

Accrued pension, on a Life Annuity basis, but not less than 42% of Final Average Pay.

Due to the Plan Freeze, no benefit accruals after December 31, 2004.

Non-Service Connected and/or New Participant after 7/1/79

Eligibility

Total and permanent disability as stated above, but with five (5) years of Credited Service. If Credited Service begins after 1/1/85, there is a five (5) month waiting period and must be receiving Social Security disability benefits.

Benefit

Accrued pension, on a Life Annuity basis, but not less than 25% of Final Average Pay if Credited Service before 1/1/85, and not less than 70% of projected Normal Retirement Benefit (based on Final Average pay at disablement) if Credited Service begins after 1/1/85.

Due to the Plan Freeze, no benefit accruals after December 31, 2004.

N. Death (Prior to Retirement)

Service Connected

50% of pay to spouse, for life or until remarriage, and/or unmarried children under age 18; or pension otherwise payable, if greater.

Due to the Plan Freeze, pay used to calculate this benefit is the pay for the calendar year 2004.

Non-Service Connected

Eligibility

Five (5) years of Credited Service

Benefit

Accrued pension payable to spouse in the form of a Qualified Joint and Survivor Annuity or as a 10 Year Certain benefit if unmarried or if elected (with spouse's consent). Benefit payable at employee's earliest retirement date and reduced as if employee had retired on the date benefit commences.

Due to the Plan Freeze, no benefit accruals after December 31, 2004.

O. Vesting (Termination Benefits if Not Eligible for Any of the Above)

Five (5) Years or More

Vested Accrued pension payable at Normal Retirement Date, or payable immediately after reduction for Early Retirement.

Due to the Plan Freeze, no benefit accruals after December 31, 2004. Future employment will be counted towards vesting.

P. Cost of Living Increases for Retirees with Credited Service prior to 1/1/85

3.0% per year, limited to the change in the Consumer Price Index for years prior to 2023. Cost of living adjustments begin on October 1 following age 65 for retirees and their beneficiaries and October 1 immediately following retirement for disability retirees.

Q. Changes from Previous Report

The following Plan provisions were changed since the prior year valuation:

- The cost of living increase for eligible participants was changed from a variable rate, based upon the Consumer Price Index (with a maximum of 3.0% per year), to a fixed rate of 3.0% per year effective with the October 2023 increase.
- A one-time special election period was added to the Plan for vested deferred Participants to have the opportunity to elect a lump sum distribution of the full value of their pension benefit during the period June 15, 2023 through August 15, 2023.
- The maximum limit on regular lump sum distributions was increased from \$3,500 to \$5,000 (and to \$7,000 effective January 1, 2024).
- The Plan was amended to allow for automatic payment or rollover (to default safe harbor IRAs) for vested deferred Participants with lump sum values under \$5,000 (increasing to \$7,000 effective January 1, 2024).

Attachment to Schedule SB, Part VI, Line 26a

Schedule of Active Participant Data

EIN: 59-1917016

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

ACTIVE PARTICIPANT AGE-CREDITED SERVICE-DISTRIBUTION

JANUARY 1, 2024

AGE	-----COMPLETED YEARS OF CREDITED SERVICE-----										
	00-00	01-04	05-09	10-14	15-19	20-24	25-29	30-34	35-39	40+	TOTAL
15-24											
25-29											
30-34											
35-39											
40-44		15	3								18
45-49		25	28	2							55
50-54		26	42	28	1						97
55-59		15	49	25	21	1					111
60-64		25	33	20	39	5	1				123
65-69		9	16	7	7	1	2				42
70+		1	2		2						5
TOTAL		116	173	82	70	7	3				451

Average Age: 57.1 years

Average Credited Service: 8.7 years

Percentage Female: 77.8%

**Attachment to Schedule SB, Part VI, Line 24
Change in Actuarial Assumptions
For Plan Year Ending December 31, 2024
EIN: 59-1917016**

Name of Plan: Pension Plan of Tallahassee Memorial Healthcare, Inc.

The valuation recognizes the following non-prescribed assumption changes as of January 1, 2024:

- The Expected Return on Asset assumption (which is also the ASC 960 accounting interest rate) was increased from 3.50% as of January 1, 2022 to 5.00% as of January 1, 2023. The EROA is used in the development of the actuarial value of assets. Refer to the following table for more information:

Year	Unlimited Expected Return (ASC 960 accounting interest rate)	Third Segment Rate Limit	Final (Limited) Expected Return Used in Development of Actuarial Value of Assets
2023	5.00%	5.74%	5.00%
2022	3.50%	5.92%	3.50%

This change was made to better reflect the anticipated plan experience and fixed-income yield levels as of January 1, 2023.

Pension Plan of Tallahassee Memorial HealthCare, Inc.
Schedule H, Line 4j - Schedule of Reportable Transactions
Year Ended December 31, 2024

	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
	Identity of party Involved	Description of Asset	Purchase price	Selling price	Lease rental	Expense incurred with transaction	Cost	Current value of asset on transaction date	Net gain or (loss)	
Single Transactions in Excess of 5% of the Fair Value of Plan Assets at Beginning of Year										
	FIDELITY LONG TERM TREASURY BD INDEX	Fidelity Investments	Fixed Income Mutual Fund	\$ -	\$ 60,159,836	\$ -	\$ -	63,000,000	\$ 63,000,000	\$ (2,840,164)
Series of Transactions in Same Security In Excess of 5% of the Fair Value of Plan Assets at Beginning of Year										
	FEDERATED HERMES TREASURY OBLIGATION	Federated Investors, Inc.	Short Term Investment	\$ 25,300,497 ⁽¹⁾	\$ -	\$ -	\$ -	25,300,497	\$ 25,300,497	\$ -
	FEDERATED HERMES TREASURY OBLIGATION	Federated Investors, Inc.	Short Term Investment	-	27,798,427 ⁽¹⁾	-	-	27,798,427	27,798,427	-

(1) Represents a series of 251 purchase transactions and a series of 146 sales transaction. No single security transactions in excess of 5% of the fair value of Plan assets at the beginning of the year.

(The information in this schedule has been certified as complete and accurate by Truist Bank, Trustee.)