

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning 07/01/2024 and ending 06/30/2025	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information	
1a	Name of plan RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER	1b Three-digit plan number (PN) ▶ 001
		1c Effective date of plan 07/01/1969
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) MEADVILLE MEDICAL CENTER 751 LIBERTY STREET MEADVILLE, PA 16335	2b Employer Identification Number (EIN) 25-1512436 2c Plan Sponsor's telephone number 814-333-5466 2d Business code (see instructions) 622000

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.			
Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.			
SIGN HERE	Filed with authorized/valid electronic signature.	04/15/2026	HEATHER FRAZIER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN																				
	3c Administrator's telephone number																				
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN																				
5 Total number of participants at the beginning of the plan year	5 1170																				
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 15%;">6a(1)</td><td style="text-align: right;">223</td></tr><tr><td>6a(2)</td><td style="text-align: right;">165</td></tr><tr><td>6b</td><td style="text-align: right;">671</td></tr><tr><td>6c</td><td style="text-align: right;">138</td></tr><tr><td>6d</td><td style="text-align: right;">974</td></tr><tr><td>6e</td><td style="text-align: right;">57</td></tr><tr><td>6f</td><td style="text-align: right;">1031</td></tr><tr><td>6g(1)</td><td></td></tr><tr><td>6g(2)</td><td></td></tr><tr><td>6h</td><td></td></tr></table>	6a(1)	223	6a(2)	165	6b	671	6c	138	6d	974	6e	57	6f	1031	6g(1)		6g(2)		6h	
6a(1)	223																				
6a(2)	165																				
6b	671																				
6c	138																				
6d	974																				
6e	57																				
6f	1031																				
6g(1)																					
6g(2)																					
6h																					
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7																				

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
1A 1I 3H

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

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 07/01/2024 and ending 06/30/2025	
▶ Round off amounts to nearest dollar.	
▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.	
A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF MEADVILLE MEDICAL CENTER	D Employer Identification Number (EIN) 25-1512436
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 07 Day 01 Year 2024			
2	Assets:			
a	Market value	2a	78360343	
b	Actuarial value	2b	79504456	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a	For retired participants and beneficiaries receiving payment	729	60563018	60563018
b	For terminated vested participants	218	9413123	9413123
c	For active participants	223	12557676	12557676
d	Total	1170	82533817	82533817
4	If the plan is in at-risk status, check the box and complete lines (a) and (b). ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.24 %	
6	Target normal cost			
a	Present value of current plan year accruals	6a	0	
b	Expected plan-related expenses	6b	420000	
c	Target normal cost	6c	420000	

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 JEFFREY SIWIK Type or print name of actuary BUCK GLOBAL, LLC Firm name 444 LIBERTY AVENUE SUITE 805 PITTSBURGH, PA 15222-1226 Address of the firm	03/16/2026 Date 23-08913 Most recent enrollment number 412-715-3507 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	11597783
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	1686735
9 Amount remaining (line 7 minus line 8)	0	9911048
10 Interest on line 9 using prior year's actual return of <u>2.75</u> %	0	272554
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		1594459
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		43848
c Total available at beginning of current plan year to add to prefunding balance		1638307
d Portion of (c) to be added to prefunding balance		1638307
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	11821909

Part III Funding Percentages

14 Funding target attainment percentage	14	82.00 %
15 Adjusted funding target attainment percentage	15	82.00 %
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	84.09 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
01/15/2026	2000000	0			
Totals ►			18(b)	2000000	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	1848489

20 Quarterly contributions and liquidity shortfalls:

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

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

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

21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 5.12 %	3rd segment: 5.59 %	☐ 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	420000	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	14851270	1731361	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	2151361	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	1911465	1911465
36 Additional cash requirement (line 34 minus line 35)	36	239896	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	1848489	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	1608593	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	1608593	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☒ 2019 ☐ 2020 ☐ 2021
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SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection.

For calendar plan year 2024 or fiscal plan year beginning 07/01/2024 and ending 06/30/2025

A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 MEADVILLE MEDICAL CENTER	D Employer Identification Number (EIN) 25-1512436

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a

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

Yes

☒

No
- b

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

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

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

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

RIVERVIEW RESEARCH LLC

26-4637003

(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 51	NONE	97398	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PNC BANK NATIONAL ASSOCIATION

25-1211909

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 51 28 52 50	NONE	41748	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection
For calendar plan year 2024 or fiscal plan year beginning 07/01/2024 and ending 06/30/2025		
A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 MEADVILLE MEDICAL CENTER		D Employer Identification Number (EIN) 25-1512436

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2000000	2000000
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	6190143	729749
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1733133	1881488
(2) U.S. Government securities	1c(2)	3591040	4546981
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	53134958	54223229
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	8379900	5482498
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	3610414	2801146

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	78639588	71665091
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	78639588	71665091

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)	2000000	
(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)		2000000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	127598	
(B) U.S. Government securities	2b(1)(B)	167118	
(C) Corporate debt instruments	2b(1)(C)	2849958	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	295149	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		3439823
(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)	38292	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		38292
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	10095499	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	9824304	
(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)	323834	
(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)		202932
c Other income	2c		597465
d Total income. Add all income amounts in column (b) and enter total	2d		6873541

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	13400194	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		13400194
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)	97398	
(6) Bank or trust company trustee/custodial fees	2i(6)	41748	
(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)	308698	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		447844
j Total expenses. Add all expense amounts in column (b) and enter total	2j		13848038

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-6974497
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: **MCGILL POWER BELL & ASSOCIATES LLP**

(2) EIN: **25-1031405**

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		☒	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		☒	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		☒	
e Was this plan covered by a fidelity bond?	☒		1500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	☒		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 570604.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation		Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 2024 This Form is Open to Public Inspection.	
For calendar plan year 2024 or fiscal plan year beginning 07/01/2024 and ending 06/30/2025					
A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER				B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 MEADVILLE MEDICAL CENTER				D Employer Identification Number (EIN) 25-1512436	
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): 25-1435979					
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	108
Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)					
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.					
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.					
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)				6a	
b Enter the amount contributed by the employer to the plan for this plan year				6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....				6c	
If you completed line 6c, skip lines 8 and 9.					
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A					
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A					
Part III Amendments					
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☒ Increase ☐ Decrease ☐ Both ☐ No					
Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.					
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ☐ Yes ☐ No					
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No					
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No					
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No					
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.				Schedule R (Form 5500) 2024 v. 240311	

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

14a

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

14b

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

14c

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

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

15a

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

15b

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

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

16a

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

16b

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

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

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

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

a Enter the percentage of plan assets held as:

Public Equity: 7.9 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 85.7 %

High-Yield Debt: _____ % Real Assets: 1.8 % Cash or Cash Equivalents: 2.4 % Other: 2.2 %

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:

☐ 0-5 years ☒ 5-10 years ☐ 10-15 years ☐ 15 years or more

20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☒ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation.....

Part VII IRS Compliance Questions

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

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

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

Retirement Plan for Employees of Meadville Medical Center

FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION

JUNE 30, 2025 AND 2024

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER
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Independent Auditor's Report

Board of Directors
Retirement Plan for Employees of Meadville Medical Center
Meadville, Pennsylvania

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

We have performed audits of the accompanying financial statements of the Retirement Plan for Employees of Meadville Medical Center, an employee benefit plan subject to the *Employee Retirement Income Security Act of 1974* (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of June 30, 2025 and 2024, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of and for the years ended June 30, 2025 and 2024, stating that the certified investment information, as described in Note D to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Retirement Plan for Employees of Meadville Medical Center and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Retirement Plan for Employees of Meadville Medical Center's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter – Supplemental Schedules Required by ERISA

The supplemental schedules identified in the table of contents are presented for purposes of additional analysis and are not a required part of the financial statements, but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the 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 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).

McGill, Power, Bell & Associates, LLP

McGill, Power, Bell & Associates, LLP
Erie, Pennsylvania
April 14, 2026

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
JUNE 30, 2025 AND 2024

	2025	2024
ASSETS		
Investments, at Fair Value		
Money Market Funds	\$ 1,856,725	\$ 1,729,804
U.S. Government Securities	4,546,981	3,591,040
Corporate Debt	54,223,229	53,134,958
Mutual Funds	5,482,498	8,379,900
Interest Bearing Cash	24,763	3,329
Alternative Investments	2,801,146	3,610,414
Total Investments	68,935,342	70,449,445
Receivables		
Employer Contributions	2,000,000	2,000,000
Due from Broker for Securities Sold	-	5,248,105
Accrued Interest and Dividends	729,749	942,038
Total Receivables	2,729,749	8,190,143
Total Assets	71,665,091	78,639,588
NET ASSETS AVAILABLE FOR BENEFITS	\$ 71,665,091	\$ 78,639,588

See notes to financial statements.

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEARS ENDED JUNE 30, 2025 AND 2024

	2025	2024
ADDITIONS		
Investment Income		
Net Appreciation (Depreciation) in Fair Value of Investments	\$ 1,395,426	\$ 1,048,028
Interest and Dividends	3,478,115	1,359,927
Net Investment Income	4,873,541	2,407,955
Employer Contributions	2,000,000	2,000,000
TOTAL ADDITIONS	6,873,541	4,407,955
DEDUCTIONS		
Benefits Paid to Participants	13,400,194	6,043,422
Administrative Expenses	447,844	533,340
TOTAL DEDUCTIONS	13,848,038	6,576,762
NET INCREASE (DECREASE)	(6,974,497)	(2,168,807)
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of Year	78,639,588	80,808,395
End of Year	<u>\$ 71,665,091</u>	<u>\$ 78,639,588</u>

See notes to financial statements.

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

NOTES TO FINANCIAL STATEMENTS

NOTE A DESCRIPTION OF THE PLAN

General

The following description of the Retirement Plan for Employees of Meadville Medical Center (the "Plan") provides only general information. Additional information about the vesting and benefit provisions and the Pension Benefit Guaranty Corporation's (PBGC) benefit guarantee is contained in the Plan Document and *Summary Plan Description*, which are available from the Plan Administrator.

The Plan is a noncontributory defined benefit plan covering substantially all employees of Meadville Medical Center (the "Hospital") and its related entities hired before January 1, 2006 who have completed one year of service, defined as completion of 1,000 hours of service during the 12-month period following the employee's first hour of service, or any plan year thereafter, and are at least 21 years of age. The Plan is subject to the provisions of the *Employee Retirement Income Security Act of 1974* ("ERISA"). PNC Bank, National Association, is the trustee and custodian of the Plan. Morgan Stanley is also custodian of the Plan.

The Plan was amended making all new employees hired after January 1, 2006 ineligible for the Plan, and after December 31, 2012, ceased all benefit accruals for the Plan. In conjunction with these changes, the Meadville Medical Center Defined Contribution Retirement Plan was established to provide employer contributions for employees hired after January 1, 2006; and effective January 1, 2013, all participants in the Plan became participants and will receive employer contributions based on their vesting service in the Plan at December 31, 2012.

The Plan is administered by the Hospital's Board of Directors. The Board of Directors has overall responsibility for the operation and administration of the Plan. The Board of Directors or their delegates determine the appropriateness of the Plan's investment offerings and monitors investment performance.

Contributions

There are no employee contributions to the Plan. The Hospital has agreed to voluntarily contribute such amounts that are necessary to provide assets sufficient to meet the benefits to be paid to Plan members. The Hospital's present intention is to make contributions in amounts sufficient to meet the minimum requirements established by ERISA and consider additional amounts that may be warranted to achieve the desired funded status. The Plan has met the minimum funding requirements established by ERISA.

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

Pension Benefits

Pension benefits were modified to reduce future benefit accruals for certain employees. Employees 55 years of age or older with 20 or more years of service as of January 1, 2011 were "grandfathered" and continued to earn benefits beginning at normal retirement age (65) equal to 1.125% of their average monthly earnings for each year of credited service plus .431% of their average monthly earnings in excess of monthly Social Security Covered Compensation for each year of credited service up to 35 years. "Non-grandfathered" participants earned the same as "grandfathered" participants through December 31, 2010.

For service earned on or after January 1, 2011, "non-grandfathered" participants earned 0.7% of their average monthly earnings for each year of credited service after January 1, 2011. The Plan has a minimum monthly benefit of \$8.00 for each year of service for all participants. Average monthly earnings were calculated based on the highest 60 consecutive months out of the last 120 months of service. The Plan permits early retirement at age 55 with 10 years of service; however, the accrued benefit is reduced by .50% for the first 60 months and .27% for each of the next 60 months the benefit commencement date precedes the normal retirement date.

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

NOTES TO FINANCIAL STATEMENTS

The benefit accrued was calculated as of December 31, 2012 as indicated above, with the exception that "final average pay" replaced "average monthly earnings". Final average pay is defined as the average of your highest five consecutive calendar years of compensation during the last 10 calendar years immediately preceding retirement or termination of employment or December 31, 2012, whichever was earlier.

Employees, upon retirement, will be paid a monthly life annuity unless the value of the benefit is less than \$1,000. These retirees with an accrued benefit less than \$1,000 will receive a lump sum payment. Married employees receive their pension benefits in the form of a joint and survivor annuity unless their spouse consents to an alternative payment option offered by the Plan.

Death and Disability Benefits

If an active employee dies at age 55 or older with at least 10 years of service, a death benefit equal to 50% of the actuarial value of the employee's pension is paid to the employee's beneficiary. If a vested participant dies prior to completing 10 years of service, the beneficiary will receive a monthly benefit payable at the member's normal retirement date in an amount equal to the survivor annuity that would have been paid had the member separated service on the date of death, survived to his normal retirement date, selected a 50% Qualified Joint and Survivor Annuity and died on the day after attaining the normal retirement date. Disabled participants receive an accrued benefit at the first day of the month on or after they attain normal retirement age, if they have at least five years of service.

Vesting

If employees terminate before rendering five years of service, they forfeit the right to receive their accumulated plan benefits. Eligible employees are fully vested upon completion of five years of vesting service.

NOTE B SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Uses of Estimates

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

Investment Valuation and Income Recognition

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

The Board of Directors or their delegates determine the Plan's valuation policies utilizing information provided by its investment advisers and custodians. See Note E for discussion of fair value measurements.

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

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

NOTES TO FINANCIAL STATEMENTS

Administrative Expenses

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

Accumulated Plan Benefits

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

- (A) Retired or terminated employees or their beneficiaries
- (B) Present employees or their beneficiaries

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

NOTE C PLAN TERMINATION

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

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

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

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

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

NOTES TO FINANCIAL STATEMENTS

NOTE D CERTIFICATION OF PLAN TRUSTEE

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, PNC Bank, National Association, the trustee of the Plan, has certified the following information included in the accompanying financial statements and supplemental schedules is complete and accurate. There are certain additional investments held by the Plan that are not included in the certification provided by the custodian.

	2025	2024
Investments, at Fair Value:		
Money Market Funds	\$ 1,856,725	\$ 1,729,804
U.S. Government Securities	4,546,981	3,591,040
Corporate Debt	54,223,229	53,134,958
Mutual Funds	5,482,498	8,379,900
Accrued Interest and Dividends	729,749	942,038
Investment Income:		
Net Appreciation (Depreciation) in Fair Value of Investments	1,710,034	2,088,574
Interest and Dividends	3,182,957	1,277,629

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

NOTE E DISCLOSURES ABOUT FAIR VALUE PLAN ASSETS AND LIABILITIES

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

- Level 1** Quoted prices in active markets for identical assets or liabilities
- Level 2** Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities
- Level 3** Unobservable inputs supported by little or no market activity and that are significant to the fair value of the assets or liabilities

Recurring Measurements

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2025 and 2024.

Marketable securities are stated at fair value. Securities traded on a national securities exchange are valued at the last reported sales price on the last business day of the plan year; investments traded in the over-the-counter market and listed securities for which no sale was reported on that date are valued at the average of the last reported bid and ask prices.

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

NOTES TO FINANCIAL STATEMENTS

For certain investments consisting of municipal bonds that do not have an established fair value, the Board of Directors has established a fair value based on yields currently available on comparable securities of issuers with similar credit ratings.

Mutual funds are valued at the net asset value (NAV) of shares held by the Plan at year end.

The Plan's investments in the alternative investments (limited partnerships, funds of funds) are valued based on the net asset value per share, without further adjustment. Net asset value is based upon the fair value of the underlying investments. The Plan also collects and reviews the audited financial statements of the alternative investments. The NAV is used as a practical expedient to estimate fair value of the alternative investments.

The following table presents the fair value measurements of assets recognized in the accompanying statements of net assets available for benefits measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at June 30, 2025 and 2024:

		Fair Value Measurement Using		
	Fair Value	Level 1	Level 2	Level 3
June 30, 2025				
Money Market Funds	\$ 1,856,725	\$ 1,856,725	\$ -	\$ -
U.S. Government Securities	4,546,981	4,546,981	-	-
Corporate Debt	54,223,229	-	54,223,229	-
Mutual Funds	5,482,498	5,482,498	-	-
Interest Bearing Cash	24,763	24,763	-	-
Total Assets in the Fair Value Hierarchy	66,134,196	\$ 11,910,967	\$ 54,223,229	\$ -
Investments Measured at Net Asset Value (a)	2,801,146			
Investments at Fair Value	\$ 68,935,342			
		Fair Value Measurement Using		
	Fair Value	Level 1	Level 2	Level 3
June 30, 2024				
Money Market Funds	\$ 1,729,804	\$ 1,729,804	\$ -	\$ -
U.S. Government Securities	3,591,040	3,591,040	-	-
Corporate Debt	53,134,958	-	53,134,958	-
Mutual Funds	8,379,900	8,379,900	-	-
Interest Bearing Cash	3,329	3,329	-	-
Total Assets in the Fair Value Hierarchy	66,839,031	\$ 13,704,073	\$ 53,134,958	\$ -
Investments Measured at Net Asset Value (a)	3,610,414			
Investments at Fair Value	\$ 70,449,445			

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

NOTES TO FINANCIAL STATEMENTS

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

Following is a description of the valuation methodologies and inputs used for assets measured at fair value on a recurring basis and recognized in the accompanying statements of net assets available for benefits, as well as the general classification of such assets pursuant to the valuation hierarchy. There have been no significant changes in the valuation techniques during the years ended June 30, 2025 and 2024. The Plan had no liabilities measured at fair value on a recurring basis. In addition, the Plan had no assets or liabilities measured at fair value on a nonrecurring basis.

Investments

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

The value of certain investments, classified as alternative investments, is determined using net asset value (or its equivalent) as a practical expedient. This practical expedient would not be used if it is determined to be probable that the fund will sell the investment for an amount different from the reported net asset value.

Investments Measured Using the Net Asset Value per Share Practical Expedient

The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of June 30, 2025 and 2024. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan.

June 30, 2025				
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
CommonFund Capital Natural				
Resources Partners IX (a)	\$ 1,577,842	105,000	Not Permitted	N/A
Fundamental Partners III-A (b)	1,223,304	737,236	Not Permitted	N/A
	<u>\$ 2,801,146</u>			
June 30, 2024				
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
CommonFund Capital Natural				
Resources Partners IX (a)	\$ 2,166,400	135,000	Not Permitted	N/A
Fundamental Partners III-A (b)	1,444,014	616,390	Not Permitted	N/A
	<u>\$ 3,610,414</u>			

- (a) This limited partnership invests primarily in unaffiliated investment funds and limited partnerships which make oil, gas, and other natural resource investments on a global basis.

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

NOTES TO FINANCIAL STATEMENTS

- (b) This fund invests in an affiliated Master Fund (Fundamental Partners III LP), which invests primarily in the municipal bond market and equity securities that are related to the functioning and development of communities. The Master Fund engages in swap contracts.

NOTE F ACCUMULATED PLAN BENEFITS

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

The accumulated plan benefit information as of the beginning of the Plan year was as follows:

	<u>2025</u>
Actuarial Present Value of Accumulated Plan Benefits	
Vested Benefits	
Participants Currently Receiving Payments	\$ 57,517,415
Terminated Vested Participants	8,613,438
Active Participants	<u>11,532,150</u>
	77,663,003
Nonvested Benefits	<u>-</u>
Total Actuarial Present Value of Accumulated Plan Benefits	<u><u>\$ 77,663,003</u></u>

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

	<u>2025</u>
Actuarial Present Value of Accumulated Plan Benefits, Beginning of Year	\$ 73,577,233
Increase (Decrease) During the Year Attributable to:	
Benefits Accumulated and Other Plan Experience	382,264
Increase for Interest Due to the Decrease in the Discount Period	4,765,828
Assumption Changes	4,981,100
Benefits Paid	<u>(6,043,422)</u>
Net Increase (Decrease)	<u>4,085,770</u>
Actuarial Present Value of Accumulated Plan Benefits, End of Year	<u><u>\$ 77,663,003</u></u>

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

NOTES TO FINANCIAL STATEMENTS

Significant assumptions underlying the actuarial computations are:

- Assumed rate of return on investments: 6.00%
- Mortality basis: The mortality tables utilized were the Pri-2012 Total Employee and Retiree Mortality Tables (base year 2012) and projected with Mortality Improvement Scale Buck Modified MP-2021, except for current and future beneficiaries of deceased participants. For current and future beneficiaries of deceased participants, mortality is based on the Pri-2012 Contingent Survivor Mortality Tables and projected with Mortality Improvement Scale Buck Modified MP-2021.
- Retirement age: Age-graded, 1% of participants at age 55, increasing each year by varying percentages until reaching 100% at age 70.
- Frequency of optional payment forms: 60% of participants are assumed to elect to receive a life annuity and remaining 40% are assumed to elect 50% joint and survivor annuity.
- Marital percentage: 85% of participants are assumed to be married at death. Husbands are assumed to be four years older than their wives.

Changes were made to the following prior year actuarial assumptions, including:

- The assumed rate of return on investments has been updated from 6.75% to 6.00%

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. The computations of the actuarial present value of accumulated plan benefits were made as of July 1, 2024. Had the valuations been performed as of June 30, 2025, there would be no material differences.

NOTE G RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

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

Certain Plan investments are interest-bearing cash accounts managed by Morgan Stanley and alternative investments managed by various investment companies. These entities are custodians as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for certain investment advisory services are included in net appreciation (depreciation) in fair value of the investment, rather than a direct payment. The Hospital directly pays certain other fees related to the Plan's operations.

Fees for trust and management services paid to PNC Bank were \$41,748 and \$38,594 for the years ended June 30, 2025 and 2024, respectively. PBGC premiums totaled \$308,698 and \$383,104 for the years ended June 30, 2025 and 2024, respectively. Individually nonmaterial expenses paid to other parties in interest for investment advisory fees aggregated \$97,398 and \$111,642 for the years ended June 30, 2025 and 2024, respectively. The Company provides certain administrative services at no cost to the Plan.

NOTE H PLAN AMENDMENT

Effective July 1, 2024, the Plan was amended to allow deferred vested participants who terminated employment before July 1, 2024 (or such deferred vested participant's surviving spouse) and active participants who have attained age 59½ before July 1, 2024 that have not begun receiving their accrued benefit the ability to make a special election to receive their accrued benefit in the form of a single lump sum payment. This special election period is effective from October 1, 2024 through November 15, 2024.

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

NOTES TO FINANCIAL STATEMENTS

NOTE I TAX STATUS

The Internal Revenue Service has determined and informed the Hospital by a letter dated December 28, 2017, that the Plan and related trust are designed in accordance with the applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the plan administrator believes that the Plan is designed, and currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax exempt.

NOTE J SIGNIFICANT ESTIMATES AND CONCENTRATIONS

Accounting principles generally accepted in the United States of America require disclosure of certain significant estimates and current vulnerabilities due to certain concentrations. Those matters include the following:

Possible Decline in Investments

It is reasonably possible that there will be a significant decline in the fair value of investments during the next year, which would change the assumed rates of return used to discount the benefit obligation and, therefore, could significantly affect the present value of accumulated plan benefits.

NOTE K RISKS AND UNCERTAINTIES

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

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the 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.

NOTE L COMMITMENTS

The Plan has committed to funding the CommonFund Capital Natural Resources Partners IX fund for up to \$3,000,000. There were capital calls totaling \$30,000 and \$6,000 during the years ended June 30, 2025 and 2024, respectively. The remaining commitment on June 30, 2025 was \$105,000.

The Plan has committed to funding the Fundamental Partners III-A LP fund for up to \$2,000,000. There were recallable distributions of \$120,846 and \$105,740 during the years ended June 30, 2025 and 2024, respectively. The remaining commitment on June 30, 2025 was \$737,236.

NOTE M SUBSEQUENT EVENT

Subsequent Events

Subsequent events have been evaluated through April 14, 2026, which is the date the financial statements were available to be issued.

SUPPLEMENTARY INFORMATION

Retirement Plan for Employees of Meadville Medical Center

EIN/PN: 25-1512436/ 001

Schedule SB Attachments for the 2024 Plan Year

Line 26a – Schedule of Active Participant Data

Distribution of Active Participants as of July 1, 2024 – Age by Service

Attained Age	Years of Credited Service									
	Under 1	1 - 4	5 - 9	10 - 14	15 - 19	20 - 24	25 - 29	30 - 34	35 - 39	40 & up
Under 25	0	0	0	0	0	0	0	0	0	0
25 - 29	0	0	0	0	0	0	0	0	0	0
30 - 34	0	0	0	0	0	0	0	0	0	0
35 - 39	0	0	1	0	0	0	0	0	0	0
40 - 44	0	1	14	7	0	0	0	0	0	0
45 - 49	0	0	11	12	3	0	0	0	0	0
50 - 54	0	0	15	18	16	5	0	0	0	0
55 - 59	0	0	8	16	8	11	3	0	0	0
60 - 64	0	0	5	21	9	12	11	4	0	0
65 - 69	0	0	1	1	3	1	2	1	2	0
70 & up	0	0	0	0	0	0	0	0	1	0
Total	0	1	55	75	39	29	16	5	3	0

Retirement Plan for Employees of Meadville Medical Center

EIN/PN: 25-1512436/ 001

Schedule SB Attachments for the 2024 Plan Year

Part V– Statement of Actuarial Assumptions and Methods

Funding assumptions selection and rationale

The assumptions for funding purposes were selected by the plan's enrolled actuary. The asset valuation method was selected by the plan sponsor with the actuary's advice and is an acceptable method under the applicable provisions of the Internal Revenue Code and associated regulations. The assumptions for retirement rates, withdrawal rates, and form of payment are appropriate given historic gain and loss experience of the plan. Actual experience is reviewed each year and compared to the assumptions. Changes are made, as appropriate, based on this review.

Actuarial Standard of Practice No. 27 ("ASOP 27") provides guidance to actuaries on economic assumptions for measuring pension obligations. Actuarial Standard of Practice No. 35 ("ASOP 35") provides guidance to actuaries on demographic and other noneconomic assumptions for measuring pension obligations. Under these ASOPs, for each assumption that has a significant effect on the measurement and that the actuary has not selected, the actuary should disclose the information and analysis used to support the actuary's determination that, in the actuary's professional judgment, is reasonable for the purpose of the measurement.

The mortality assumption used for funding in this valuation reflects mortality tables mandated by applicable law and regulation as specified in IRS Regulation 1.430(h)(3)-1, as amended in the Federal Register on October 20, 2023, in TD 9983, 88 FR 72357, applied on a fully generational basis using the IRS 2024 Adjusted Scale MP-2021 Rates mortality improvement scale. The funding interest rates assumptions were updated in accordance with PPA. These rates are constrained in accordance with ARP.

The demographic and other noneconomic assumptions that have a significant effect, and are chosen by the enrolled actuary, are the retirement rates, withdrawal rates, and frequency of optional payment forms. These assumptions were based on an experience study performed in 2022 covering the 2016-2021 plan years. We annually review all the significant assumptions, along with recent experience, to confirm that no changes are needed each valuation cycle. Based on the actuary's gain loss analysis, including consistency with other assumptions used in the valuation, the actuary believes that these assumptions are reasonable for the purpose of the measurement.

The expected rate of return on assets was selected based on a methodology that considers investment real returns for certain asset classes over historic periods of various durations, in conjunction with the long-term outlook for inflation. This methodology is applied to the actual asset allocation, which is in line with the investment policy guidelines of the plan.

Use of Models

Actuarial Standard of Practice No. 56 ("ASOP 56") provides guidance to actuaries when performing actuarial services with respect to designing, developing, selecting, modifying, using, reviewing, or evaluating models. Gallagher uses third-party software in the performance of annual actuarial valuations and projections. The model is intended to calculate the liabilities associated with the provisions of the plan using data and assumptions as of the measurement date under the funding rules specified in this report. Further, the model applies those funding rules to the liabilities derived and other inputs, such as plan assets and contributions, to generate many of the exhibits found in this report. Gallagher has an extensive review process whereby the results of the liability calculations are checked using detailed sample output, changes from year to year are summarized by source, and significant deviations from expectations are investigated. Other funding outputs are similarly reviewed in detail and at a high level for accuracy, reasonability and consistency with prior results. Gallagher also reviews the model when significant changes are made to the software. The review is performed by experts within the company who are familiar with applicable funding rules as well as the manner in which the model generates its output.

Retirement Plan for Employees of Meadville Medical Center

EIN/PN: 25-1512436/ 001

Schedule SB Attachments for the 2024 Plan Year

Part V– Statement of Actuarial Assumptions and Methods (continued)

Future actuarial measurements

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the actuarial assumptions, changes expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions, applicable law or regulations. An analysis of the potential range of such future differences is beyond the scope of this report. However, in accordance with ASOP 51, an assessment of risks for the plan was performed.

Retirement Plan for Employees of Meadville Medical Center
EIN/PN: 25-1512436/ 001

Schedule SB Attachments for the 2024 Plan Year

Part V– Statement of Actuarial Assumptions and Methods (continued)

Prescribed Funding Assumptions and Methods

The following assumptions and methods are prescribed by ERISA, as currently amended.

Funding interest rates

	2024 Plan Year	2023 Plan Year
Funding Rates – Constrained*		
First Segment Rate	4.75%	4.75%
Second Segment Rate	5.12%	5.00%
Third Segment Rate	5.59%	5.74%
Effective Interest Rate	5.24%	5.22%
Funding Rates – Unconstrained**		
First Segment Rate	4.64%	2.50%
Second Segment Rate	5.12%	3.83%
Third Segment Rate	5.10%	4.06%
Effective Interest Rate	5.08%	3.83%

* Used for minimum funding and benefit restriction purposes.

**Used for maximum tax-deduction purposes.

The interest rates used for funding purposes are the Segment Rates with a 4-month lookback, constrained in accordance with relevant legislation.

Mortality

Mortality tables mandated by applicable law and regulation as specified in IRS Regulation 1.430(h)(3)-1, as amended in the Federal Register on October 20, 2023, in TD 9983, 88 FR 72357, applied on a fully generational basis using the IRS 2024 Adjusted Scale MP-2021 Rates mortality improvement scale.

Actuarial cost method

The Funding Target is the present value of accrued benefits based on compensation and service to date. The Target Normal Cost is the present value of benefits expected to be accrued during the current plan year, reflecting the effect of expected compensation increases during the year and including expected plan administrative expenses to be paid from plan assets during the year.

Retirement Plan for Employees of Meadville Medical Center
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Schedule SB Attachments for the 2024 Plan Year

Part V– Statement of Actuarial Assumptions and Methods (continued)

Non-Prescribed Funding Assumptions and Methods

Expenses

Expected plan expenses of \$420,000 were added to the Target Normal Cost. For the prior year, \$450,000 was added to the Target Normal Cost. The expected plan-related expenses are equal to last year’s expenses minus last year’s PBGC premium plus this year’s PBGC premium, rounded up to the next \$10,000. Expected plan administrative expenses reflect the actual PBGC premiums to be paid during the year.

Frequency of optional payment forms

Based on an experience study performed in 2022.

60% of participants are assumed to elect a life annuity and the remaining 40% are assumed to elect a 50% joint and survivor annuity.

Marital percentage

85% of participants are assumed to be married at death. Husbands are assumed to be 4 years older than their wives.

Retirement rates

Based on an experience study performed in 2022.

Age	Assumption
55	1.000%
56	2.000%
57	3.000%
58	4.000%
59	4.000%
60	7.000%
61	11.000%
62	18.000%
63	15.000%
64	14.000%
65	30.000%
66	20.000%
67	20.000%
68	20.000%
69	20.000%
70	100.000%

Terminated vested participants are assumed to commence receiving benefits at age 65.

Retirement Plan for Employees of Meadville Medical Center

EIN/PN: 25-1512436/ 001

Schedule SB Attachments for the 2024 Plan Year

Part V– Statement of Actuarial Assumptions and Methods (continued)

Non-Prescribed Funding Assumptions and Methods (continued)

Disability rates

Age	Male	Female
25	0.043%	0.050%
30	0.071%	0.085%
35	0.099%	0.175%
40	0.162%	0.315%
45	0.270%	0.465%
50	0.493%	0.626%
55	0.914%	0.805%

Withdrawal rates for active participants not eligible for retirement

Based on an experience study performed in 2022. Sample rates as follows:

Age	Assumption
25	11.620%
30	11.210%
35	10.550%
40	8.576%
45	6.520%
50	4.776%
55	3.199%
60	0.160%
64	0.030%

Asset valuation method

The Actuarial Value of Assets is market value as of the valuation date, including the discounted value of accrued contributions, reduced by 2/3 of the gain/(loss) for the immediately preceding plan year and reduced by 1/3 of the gain/(loss) for the plan year before that. The gain/(loss) for each period is determined as the actual return on market value during the period less the expected return on market value based on an assumed earnings rate chosen by the actuary but required by current law and regulation to be not greater than the applicable third Segment Rate. The resulting value is constrained to be within a corridor of 90% to 110% of market value, including discounted receivable contributions.

	Actuary's Assumption	Third Segment Rate	Reflecting Limit
2024 Expected Return	6.00%	5.59%	5.59%
2023 Expected Return	6.75%	5.74%	5.74%
2022 Expected Return	6.75%	5.92%	5.92%

Retirement Plan for Employees of Meadville Medical Center

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Schedule SB Attachments for the 2024 Plan Year

Part V– Statement of Actuarial Assumptions and Methods (continued)

Non-Prescribed Funding Assumptions and Methods (continued)

Summary of Changes from the July 1, 2023 Valuation

The mortality tables were updated based on the current legislation as specified in IRS Regulation 1.430(h)(3)-1, as amended in the Federal Register on October 20, 2023, in TD 9983, 88 FR 72357, applied on a fully generational basis using the IRS 2024 Adjusted Scale MP-2021 Rates mortality improvement scale. Also, the segment interest rate basis was updated to the current rates as specified in IRS Regulations 1.430(h)(2)-1. These rates are constrained in accordance with relevant legislation. These assumption changes decreased the Funding Target by approximately 1.2 million.

The expected plan expenses included in Target Normal Cost were updated from \$450,000 to \$420,000, and the expected return on plan assets was updated from 6.75% to 6.00%, to better reflect future anticipated experience. These changes had no impact on the Funding Target.

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

EIN 25-1512436 PN 001

SCHEDULE H, PART IV, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

YEAR ENDED JUNE 30, 2025

Identity	Description	Purchase Price	Selling Price	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Category (ii) Single Transactions in Excess of 5% of Plan Net Assets						
N/A	Federated Hermes Government Obligations Premium Shares #117	5,248,139	-	5,248,139	5,248,139	-
N/A	Federated Hermes Government Obligations Premium Shares #117	-	5,017,237	5,017,237	5,017,237	-
Category (iii) Series of Transactions in Excess of 5% of Plan Net Assets - Same Security						
N/A	JP Morgan Hedged Equity Fund Class-R6	2,432,484	-	2,432,484	2,432,484	-
N/A	JP Morgan Hedged Equity Fund Class-R6	-	4,550,000	3,627,899	4,550,000	922,101
N/A	Vanguard 500 Index #540 Admiral Fund	51,531	-	51,531	51,531	-
N/A	Vanguard 500 Index #540 Admiral Fund	-	4,953,410	4,373,590	4,953,410	579,820
N/A	Federated Hermes Government Obligations Premium Shares #117	13,254,806	-	13,254,806	13,254,806	-
N/A	Federated Hermes Government Obligations Premium Shares #117	-	13,127,885	13,127,885	13,127,885	-

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 07/01/2024 and ending 06/30/2025

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

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

A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF MEADVILLE MEDICAL CENTER	D Employer Identification Number (EIN) 25-1512436
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I Basic Information			
1 Enter the valuation date: Month 07 Day 01 Year 2024			
2 Assets:			
a Market value	2a	78,360,343	
b Actuarial value	2b	79,504,456	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	729	60,563,018	60,563,018
b For terminated vested participants	218	9,413,123	9,413,123
c For active participants	223	12,557,676	12,557,676
d Total	1,170	82,533,817	82,533,817
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	5.24 %	
6 Target normal cost			
a Present value of current plan year accruals	6a	0	
b Expected plan-related expenses	6b	420,000	
c Target normal cost	6c	420,000	

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

SIGN HERE Signature of actuary Jeffrey Siwik Type or print name of actuary BUCK GLOBAL, LLC Firm name 444 LIBERTY AVENUE SUITE 805 PITTSBURGH PA 15222-1226 Address of the firm	 Date 3/16/2026 2308913 Most recent enrollment number 412-715-3507 Telephone number (including area code)
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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

Retirement Plan for Employees of Meadville Medical Center

EIN/PN: 25-1512436/ 001

Schedule SB Attachments for the 2024 Plan Year

Line 22 – Description of Weighted Average Retirement Age

This table calculates the weighted average retirement age for all active persons in the plan

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
55	82.8136	0.0100	0.8281	45.5475
56	89.1795	0.0200	1.7836	99.8810
57	96.4516	0.0300	2.8935	164.9322
58	98.4477	0.0400	3.9379	228.3986
59	102.2885	0.0400	4.0915	241.4010
60	109.8422	0.0700	7.6890	461.3373
61	109.5934	0.1100	12.0553	735.3714
62	109.8325	0.1800	19.7699	1,225.7308
63	106.2112	0.1500	15.9317	1,003.6961
64	98.3308	0.1400	13.7663	881.0438
65	89.6315	0.3000	26.8895	1,747.8147
66	62.9667	0.2000	12.5933	831.1604
67	52.1077	0.2000	10.4215	698.2433
68	40.6218	0.2000	8.1244	552.4567
69	35.6515	0.2000	7.1303	491.9913
70	27.7569	1.0000	27.7569	1,942.9824
71	0.0000	1.0000	0.0000	0.0000
72	1.0000	1.0000	1.0000	72.0000
Total			176.6627	11,423.9885
Weighted Average Retirement Age = 11,423.9885 / 176.6627				64.67
Rounded Weighted Average Retirement Age				65

Note to Column 2: The Expected Active Headcount for each age includes persons who are eligible to retire and persons who are not eligible to retire at each age.

Note to Column 3: At each age, these retirement rates are a weighted average of the rates shown in Attachment to Part V for active participants eligible to retire at the age and zero for all other active participants.

General note: The table presents values rounded to fewer significant digits than used in the calculation.

Retirement Plan for Employees of Meadville Medical Center

EIN/PN: 25-1512436/ 001

Schedule SB Attachments for the 2024 Plan Year

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	\$ 71,101	\$ 113,376	\$ 6,013,551	\$ 6,198,028
2025	\$ 213,217	\$ 179,473	\$ 5,856,379	\$ 6,249,069
2026	\$ 317,636	\$ 262,259	\$ 5,691,675	\$ 6,271,570
2027	\$ 426,070	\$ 316,051	\$ 5,519,626	\$ 6,261,747
2028	\$ 517,464	\$ 387,600	\$ 5,340,389	\$ 6,245,453
2029	\$ 604,751	\$ 418,462	\$ 5,154,124	\$ 6,177,337
2030	\$ 688,319	\$ 475,526	\$ 4,961,010	\$ 6,124,855
2031	\$ 774,438	\$ 516,544	\$ 4,761,259	\$ 6,052,241
2032	\$ 837,786	\$ 616,100	\$ 4,555,181	\$ 6,009,067
2033	\$ 889,841	\$ 629,704	\$ 4,343,178	\$ 5,862,723
2034	\$ 942,596	\$ 703,998	\$ 4,125,755	\$ 5,772,349
2035	\$ 984,689	\$ 731,400	\$ 3,903,542	\$ 5,619,631
2036	\$ 1,023,989	\$ 767,398	\$ 3,677,317	\$ 5,468,704
2037	\$ 1,062,842	\$ 811,531	\$ 3,448,009	\$ 5,322,382
2038	\$ 1,094,589	\$ 826,679	\$ 3,216,719	\$ 5,137,987
2039	\$ 1,115,941	\$ 830,676	\$ 2,984,694	\$ 4,931,311
2040	\$ 1,131,210	\$ 835,374	\$ 2,753,254	\$ 4,719,838
2041	\$ 1,136,035	\$ 833,039	\$ 2,523,813	\$ 4,492,887
2042	\$ 1,134,676	\$ 827,416	\$ 2,297,869	\$ 4,259,961
2043	\$ 1,124,640	\$ 826,678	\$ 2,076,966	\$ 4,028,284
2044	\$ 1,105,763	\$ 818,173	\$ 1,862,667	\$ 3,786,603
2045	\$ 1,089,458	\$ 805,520	\$ 1,656,526	\$ 3,551,504
2046	\$ 1,064,166	\$ 805,453	\$ 1,460,035	\$ 3,329,654
2047	\$ 1,033,461	\$ 789,910	\$ 1,274,573	\$ 3,097,944
2048	\$ 1,006,116	\$ 761,337	\$ 1,101,377	\$ 2,868,830
2049	\$ 966,618	\$ 735,265	\$ 941,498	\$ 2,643,381
2050	\$ 922,638	\$ 703,529	\$ 795,748	\$ 2,421,915
2051	\$ 877,441	\$ 670,338	\$ 664,632	\$ 2,212,411
2052	\$ 828,857	\$ 635,844	\$ 548,313	\$ 2,013,014
2053	\$ 779,305	\$ 600,248	\$ 446,627	\$ 1,826,180
2054	\$ 728,342	\$ 563,796	\$ 359,071	\$ 1,651,209
2055	\$ 677,010	\$ 526,766	\$ 284,859	\$ 1,488,635
2056	\$ 625,967	\$ 489,458	\$ 222,966	\$ 1,338,391
2057	\$ 575,553	\$ 452,201	\$ 172,184	\$ 1,199,938
2058	\$ 526,255	\$ 415,335	\$ 131,208	\$ 1,072,798
2059	\$ 478,440	\$ 379,189	\$ 98,703	\$ 956,332
2060	\$ 432,427	\$ 344,073	\$ 73,356	\$ 849,856
2061	\$ 388,488	\$ 310,279	\$ 53,933	\$ 752,700
2062	\$ 346,845	\$ 278,057	\$ 39,303	\$ 664,205
2063	\$ 307,684	\$ 247,629	\$ 28,466	\$ 583,779
2064	\$ 271,146	\$ 219,162	\$ 20,568	\$ 510,876
2065	\$ 237,325	\$ 192,759	\$ 14,896	\$ 444,980
2066	\$ 206,276	\$ 168,479	\$ 10,876	\$ 385,631
2067	\$ 178,008	\$ 146,326	\$ 8,058	\$ 332,392
2068	\$ 152,485	\$ 126,264	\$ 6,097	\$ 284,846
2069	\$ 129,636	\$ 108,223	\$ 4,738	\$ 242,597
2070	\$ 109,350	\$ 92,103	\$ 3,796	\$ 205,249
2071	\$ 91,491	\$ 77,790	\$ 3,139	\$ 172,420
2072	\$ 75,901	\$ 65,167	\$ 2,676	\$ 143,744
2073	\$ 62,411	\$ 54,116	\$ 2,343	\$ 118,870

Retirement Plan for Employees of Meadville Medical Center

EIN/PN: 25-1512436/ 001

Schedule SB Attachments for the 2024 Plan Year– Statement by Enrolled Actuary

In preparing this Schedule SB, the actuary relied on other parties for, and applied reasonability tests to, information on assets, contributions, plan provisions and data on people covered by the plan.

Retirement Plan for Employees of Meadville Medical Center

EIN/PN: 25-1512436/ 001

Schedule SB Attachments for the 2024 Plan Year

Part V – Summary of Plan Provisions

Effective date	July 1, 1969, as most recently amended December 31, 2012.
Participation	All non-collectively bargained employees are eligible as of January 1 or July 1 after they reach age 21 and complete a year in which they are credited with at least 1,000 hours of service. No employee hired on or after January 1, 2006 will be eligible to become a participant of this Plan.
Average monthly earnings	Highest 60 consecutive months of average salary over the last 120 months prior to the earlier of December 31, 2012 or retirement age.
Covered compensation	A participant's covered compensation for a plan year is the average of the taxable wage bases in effect for each calendar year during the 35-year period ending with the calendar year in which the participant attains (or will attain) his Social Security retirement age. Covered compensation shall be determined as of December 31, 2012 for all active participants remaining in the plan after December 31, 2012.
Vesting service	One year of vesting service is credited for each year in which a participant is credited with at least 1,000 hours.
Credited service	One year of credited service is credited for each year in which a participant is credited with at least 1,820 hours. Partial service is credited for a participant with less than 1,820 hours but has at least 1,000 hours. No Credited Service will be earned for years after December 31, 2012.
Vesting requirements	5 years of vesting service.
Normal retirement age	First day of the month coincident with or following attainment of age 65.
Early retirement age	Attainment of age 55 with 10 years of service.
Normal retirement benefit	For participants that had attained age 55 and had accrued 20 or more years of service as of January 1, 2011, the monthly benefit is equal to the greater of (1) and (2): (1) 1.125% of the participant's Average Monthly Earnings for each year of credited service plus 0.431% of the participant's Average Monthly Earnings in excess of covered compensation for each year of credited service up to 35 years; or (2) \$8.00 for each year of credited service

Retirement Plan for Employees of Meadville Medical Center

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Schedule SB Attachments for the 2024 Plan Year

Part V – Summary of Plan Provisions (continued)

Normal retirement benefit (continued)	For all other participants, effective January 1, 2011, the monthly benefit is equal to the greater of (3) and (4): (3) Sum of (a) plus (b): (a) For service earned prior to January 1, 2011: Frozen accrued benefit as of January 1, 2011 equal to 1.125% of the participant's Average Monthly Earnings at that date for each year of credited service earned prior to January 1, 2011 plus 0.431% of the participant's Average Monthly Earnings at that date in excess of covered compensation for each year of credited service earned prior to January 1, 2011 up to 35 years; (b) For service earned on or after January 1, 2011: 0.700% of the participant's Average Monthly Earnings for each year of credited service earned on or after January 1, 2011; (4) \$8.00 for each year of credited service Benefit accruals were frozen for all plan participants as of December 31, 2012.
Accrued benefit	The benefit is equal to the benefit developed under the normal retirement formula based on average compensation and credited service until December 31, 2012. The benefit will be payable in full at the normal retirement date or will be reduced if payments begin on an early retirement date.
Early retirement benefit	The benefit is based on average compensation and service at the time of retirement. The benefit is reduced .5% for the first 60 months and .27% for each of the next 60 months from which the benefit commencement date precedes the normal retirement date.
Disability benefit	Disability retirement is available under the plan for those employees who are eligible for benefits under the Medical Center's separate long-term salary continuation plan, providing the participant has 5 years of Service on the date the insurance benefits commence. The benefit from the pension plan is payable at age 65 based on average compensation and credited service at the date insurance benefits commence.
Deferred vested pension	Monthly benefit is accrued benefit, payable at age 65.
Late retirement benefit	The benefit is based on average monthly earnings and credited service to the participant's late retirement date.
Normal form of payments	Single life annuity for single participants, and 50% joint and survivor annuity for married participants.

Retirement Plan for Employees of Meadville Medical Center

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Schedule SB Attachments for the 2024 Plan Year

Part V – Summary of Plan Provisions (continued)

Optional forms of payment	A participant who has rejected the normal form of payment may elect a 50% or 75% joint and survivor annuity, or a life annuity.
Voluntary early retirement benefit	As of July 1, 2016, participants who met the following specific criteria were eligible to participate in the 2016 Meadville Medical Center voluntary early retirement incentive program (VERIP). (1) Exempt employees who had attained at least age 60 with a minimum of 15 years of service or at least age 57 with a minimum of 20 years of service (2) Non-Exempt employees who had attained at least age 60 with a minimum of 20 years of service or at least age 57 with a minimum of 30 years of service The additional benefits under the program were based on attained age as of July 1, 2016 and are as follows: (1) For VERIP participants less than age 62: (a) An additional \$500 per month shall be paid until the earlier of the month he or she attains age 65 or dies (b) Only for purposes of determining the early retirement reduction factors for early retirement, eligible employee will be credited with an additional five years of age but not more than necessary to have an unreduced accrued benefit (2) For VERIP participants greater than age 62 but less than age 65: (a) An additional \$500 per month shall be paid until the earlier of the month he or she attains age 65 or dies (b) Only for purposes of determining the early retirement reduction factors for early retirement, eligible employee will be credited with an additional five years of age but not more than necessary to have an unreduced accrued benefit (c) A 15% increase to the Accrued benefit (d) The one-time option to elect as an optional form of payment an actuarially equivalent annuity which will pay a temporarily increased benefit for the first 36 months of payment. After 36 months, the benefit will be reduced by \$500 and will remain payable for the remainder of the lifetime of the participant and spouse based on the form of payment elected. (3) For VERIP participants equal to or greater than age 65: (a) A 45% increase to the Accrued benefit

Retirement Plan for Employees of Meadville Medical Center

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Schedule SB Attachments for the 2024 Plan Year

Part V – Summary of Plan Provisions (continued)

- (b) The one-time option to elect as an optional form of payment an actuarially equivalent annuity which will pay a temporarily increased benefit for the first 36 months of payment. After 36 months, the benefit will be reduced by \$500 and will remain payable for the remainder of the lifetime of the participant and spouse based on the form of payment elected.

Voluntary early retirement benefit
(continued)

- (4) For all VERIP participants:
 - (a) If his or her Accrued Benefit is determined under Section 4.01(b) of the plan document, their accrued benefit will be calculated as if they had met the age and service requirement described in Section 4.01(a) and their benefit accruals had never been reduced but still subject to the Plan freeze effective December 31, 2012.

Summary of Changes from the July 1, 2023 Valuation

None.

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

EIN 25-1512436 PN 001

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

JUNE 30, 2025

Identity of Issuer	Description of Investment	Cost	Current Value
<u>Money Market Funds</u>			
Federated	Federated Hermes Government Obligations Fund #07	\$ 1,856,725	\$ 1,856,725
<u>U.S. Government Securities</u>			
U.S. Treasury	02.750% DUE 08/31/2025, 175,000 Shares	170,440	174,482
U.S. Treasury	03.000% DUE 07/15/2025, 174,000 Shares	170,377	173,908
U.S. Treasury	03.500% DUE 09/15/2025, 174,000 Shares	170,901	173,810
U.S. Treasury	03.750% DUE 04/15/2026, 286,000 Shares	282,130	285,256
U.S. Treasury	04.000% DUE 02/15/2026, 282,000 Shares	279,355	281,645
U.S. Treasury	04.000% DUE 12/15/2025, 1,986,000 Shares	1,980,431	1,984,511
U.S. Treasury	04.125% DUE 06/15/2026, 286,000 Shares	283,732	286,352
U.S. Treasury	04.250% DUE 01/31/2026, 280,000 Shares	278,338	279,989
U.S. Treasury	04.250% DUE 10/15/2025, 172,000 Shares	170,435	171,952
U.S. Treasury	04.500% DUE 11/15/2025, 172,000 Shares	171,006	172,086
U.S. Treasury	04.625% DUE 03/15/2026, 280,000 Shares	279,843	280,988
U.S. Treasury	04.875% DUE 05/31/2026, 280,000 Shares	281,167	282,002
<u>Corporate Debt</u>			
Abbott Laboratories	04.750% DUE 11/30/2036, 218,000 Shares	213,782	216,971
Abbvie Inc	04.250% DUE 11/21/2049, 152,000 Shares	130,022	125,219
AerCap Ireland	03.850% DUE 10/29/2041, 208,000 Shares	165,085	166,317
Aetna Inc	06.625% DUE 06/15/2036, 216,000 Shares	232,208	231,811
Air Lease Corp	05.300% DUE 02/01/2028, 188,000 Shares	188,100	192,127
Air Lease Corp	02.875% DUE 01/15/2032, 203,000 Shares	171,334	180,189
Air Lease Corp	05.850% DUE 12/15/2027, 191,000 Shares	193,859	197,543
Air Products & Chemicals	02.700% DUE 05/15/2040, 210,000 Shares	153,080	152,777
Alabama Power Co	03.125% DUE 07/15/2051, 133,000 Shares	90,479	88,823
Allstate Corp	03.850% DUE 08/10/2049, 150,000 Shares	117,000	114,749
Allstate Corp	03.280% DUE 12/15/2026, 303,000 Shares	292,287	298,828
Allstate Corp	01.450% DUE 12/15/2030, 207,000 Shares	165,821	176,213
Allstate Corp	05.550% DUE 05/09/2035, 209,000 Shares	214,235	217,013
Altria Group Inc	03.875% DUE 09/16/2046, 176,000 Shares	129,833	130,168
Altria Group Inc	03.400% DUE 02/04/2041, 201,000 Shares	147,415	149,106
Altria Group Inc	03.700% DUE 02/04/2051, 129,000 Shares	89,016	89,276
Altria Group Inc	05.800% DUE 02/14/2039, 209,000 Shares	211,743	211,753
Altria Group Inc	02.450% DUE 02/04/2032, 203,000 Shares	165,620	175,083
Amazon.com Inc	03.100% DUE 05/12/2051, 129,000 Shares	90,868	86,964
American Express Co	VAR% DUE 07/28/2027, 183,000 Shares	183,320	184,821
American Express Co	VAR% DUE 08/03/2033, 208,000 Shares	197,739	202,975
American Honda Finance	05.850% DUE 10/04/2030, 201,000 Shares	210,815	212,379
American Honda Finance	01.300% DUE 09/09/2026, 181,000 Shares	166,786	174,580
Amgen Inc	03.000% DUE 01/15/2052, 121,000 Shares	81,548	77,688
Amphenol Corp	02.800% DUE 02/15/2030, 197,000 Shares	176,230	184,823
Anheuser-Busch Inbev	04.700% DUE 02/01/2036, 208,000 Shares	199,647	202,956
Anheuser-Busch Inbev	04.439% DUE 10/06/2048, 158,000 Shares	138,356	134,357
Aon Corp/Aon Global Holdings	02.600% DUE 12/02/2031, 208,000 Shares	174,695	184,342
Aon Corp/Aon Global Holdings	05.350% DUE 02/28/2033, 201,000 Shares	201,066	206,915
Aon Corp/Aon Global Holdings	05.000% DUE 09/12/2032, 205,000 Shares	202,030	207,907
Aon North America Inc	05.750% DUE 03/01/2054, 109,000 Shares	109,421	107,413
Appalachian Power Co	07.000% DUE 04/01/2038, 213,000 Shares	236,021	236,994
Apple Inc	04.250% DUE 02/09/2047, 163,000 Shares	145,729	139,720

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

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

JUNE 30, 2025

Identity of Issuer	Description of Investment	Cost	Current Value
Aptiv PLC / Aptiv Corp	03.250% DUE 03/01/2032, 202,000 Shares	176,855	180,794
Aptiv PLC / Aptiv Corp	04.150% DUE 05/01/2052, 120,000 Shares	92,066	85,985
Archer-Daniels-Midland Co	02.700% DUE 09/15/2051, 132,000 Shares	83,328	80,271
Astrazeneca PLC	04.400% DUE 08/17/2048, 159,000 Shares	140,074	135,837
AT&T Inc	03.500% DUE 09/15/2053, 117,000 Shares	81,647	79,193
AT&T Inc	04.300% DUE 12/15/2042, 204,000 Shares	173,192	171,874
AT&T Inc	05.150% DUE 11/15/2046, 173,000 Shares	164,416	159,624
AT&T Inc	05.550% DUE 08/15/2041, 205,000 Shares	204,490	201,946
Autozone Inc	06.550% DUE 11/01/2033, 206,000 Shares	223,638	227,426
Avalonbay Communities	02.450% DUE 01/15/2031, 202,000 Shares	173,310	181,354
Baker Hughes Holdings LLC	05.125% DUE 09/15/2040, 218,000 Shares	211,329	209,675
Baker Hughes LLC/Co	04.080% DUE 12/15/2047, 170,000 Shares	139,223	132,690
Bank of America Corp	VAR% DUE 09/15/2034, 211,000 Shares	219,087	222,660
Bank of America Corp	VAR% DUE 01/20/2048, 154,000 Shares	134,374	131,645
Bank of America Corp	VAR% DUE 06/19/2041, 209,000 Shares	148,432	149,071
Bank of Montreal	05.717% DUE 09/25/2028, 193,000 Shares	197,373	201,174
Bank of Nova Scotia	05.650% DUE 02/01/2034, 206,000 Shares	211,193	216,141
Bank of NY Mellon	01.800% DUE 07/28/2031, 203,000 Shares	165,776	176,452
Barclays PLC	04.950% DUE 01/10/2047, 200,000 Shares	182,392	181,618
Barclays PLC	VAR% DUE 11/24/2042, 216,000 Shares	157,611	160,344
Barclays PLC	05.746% DUE 08/09/2033, 206,000 Shares	206,847	213,529
BAT Capital Corp	07.079% DUE 08/02/2043, 193,000 Shares	207,599	212,566
BAT Capital Corp	05.282% DUE 04/02/2050, 138,000 Shares	118,944	121,840
BAT Capital Corp	06.343% DUE 08/02/2030, 198,000 Shares	207,928	213,361
Becton Dickinson And Co	04.669% DUE 06/06/2047, 167,000 Shares	148,769	143,216
BHP Billiton Fin Usa Ltd	05.000% DUE 09/30/2043, 192,000 Shares	183,366	181,947
BP Cap Markets America	02.939% DUE 06/04/2051, 133,000 Shares	86,571	83,465
Bristol-Myers Squibb Co	06.250% DUE 11/15/2053, 116,000 Shares	127,631	124,306
Brookfield Finance Inc	03.500% DUE 03/30/2051, 130,000 Shares	92,401	88,187
Brookfield Finance Inc	04.700% DUE 09/20/2047, 167,000 Shares	144,794	141,922
BurlingtN North Santa Fe	04.150% DUE 12/15/2048, 162,000 Shares	135,333	133,870
BurlingtN North Santa Fe	04.450% DUE 01/15/2053, 113,000 Shares	98,583	95,407
Camden Property Trust	02.800% DUE 05/15/2030, 200,000 Shares	177,720	185,956
Campbell Soup Co	05.200% DUE 03/21/2029, 193,000 Shares	193,766	197,626
Campbell Soup Co	04.800% DUE 03/15/2048, 156,000 Shares	139,319	135,832
Canadian Imperial Bank	05.986% DUE 10/03/2028, 194,000 Shares	200,245	203,622
Capital One Financial Co	VAR% DUE 02/01/2035, 213,000 Shares	216,659	222,027
Capital One Financial Co	VAR% DUE 05/10/2033, 201,000 Shares	195,613	202,755
Caterpillar Inc	06.050% DUE 08/15/2036, 216,000 Shares	237,885	236,002
Caterpillar Inc	05.200% DUE 05/27/2041, 209,000 Shares	208,014	207,088
Charles Schwab Corp	VAR% DUE 08/24/2034, 212,000 Shares	222,129	229,380
Chubb Corp	06.000% DUE 05/11/2037, 212,000 Shares	228,901	230,119
Chubb Ina Holdings Inc	04.150% DUE 03/13/2043, 188,000 Shares	164,079	160,631
Cisco Systems Inc	05.500% DUE 01/15/2040, 208,000 Shares	214,908	214,849
Citigroup Inc	04.650% DUE 07/23/2048, 160,000 Shares	142,746	138,360
Citigroup Inc	05.875% DUE 01/30/2042, 197,000 Shares	205,999	203,666
Citigroup Inc	VAR% DUE 04/23/2029, 195,000 Shares	187,403	193,068
Colgate-Palmolive Co	04.000% DUE 08/15/2045, 180,000 Shares	154,327	151,256
Comcast Corp	07.050% DUE 03/15/2033, 199,000 Shares	224,665	226,376

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

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

JUNE 30, 2025

Identity of Issuer	Description of Investment	Cost	Current Value
Comcast Corp	04.600% DUE 10/15/2038, 223,000 Shares	206,728	206,520
Comcast Corp	03.250% DUE 11/01/2039, 219,000 Shares	171,409	171,573
Comcast Corp	05.350% DUE 05/15/2053, 113,000 Shares	110,907	104,707
Comcast Corp	04.650% DUE 07/15/2042, 199,000 Shares	182,023	176,782
Consolidated Edison Co of NY Inc	03.850% DUE 06/15/2046, 175,000 Shares	137,324	135,200
Consolidated Edison Co of NY Inc	05.500% DUE 12/01/2039, 222,000 Shares	222,724	224,429
Consolidated Edison Co of NY Inc	04.625% DUE 12/01/2054, 115,000 Shares	99,890	96,914
Consumers Energy Co	04.050% DUE 05/15/2048, 155,000 Shares	129,154	124,302
CSX Corp	04.500% DUE 11/15/2052, 124,000 Shares	108,432	104,578
CSX Corp	04.750% DUE 05/30/2042, 204,000 Shares	188,882	186,731
Cummins Inc	04.875% DUE 10/01/2043, 202,000 Shares	189,173	188,795
CVS Health Corp	05.125% DUE 07/20/2045, 179,000 Shares	161,548	158,524
CVS Health Corp	03.625% DUE 04/01/2027, 184,000 Shares	176,783	181,685
CVS Health Corp	04.780% DUE 03/25/2038, 212,000 Shares	192,528	194,559
CVS Health Corp	05.875% DUE 06/01/2053, 116,000 Shares	114,359	110,836
Dell Int LLC / EMC Corp	08.100% DUE 07/15/2036, 213,000 Shares	257,159	256,727
Dell Int LLC / EMC Corp	08.350% DUE 07/15/2046, 172,000 Shares	223,120	219,388
Dell Int LLC / EMC Corp	03.450% DUE 12/15/2051, 135,000 Shares	93,359	92,518
Diageo Capital PLC	03.875% DUE 04/29/2043, 191,000 Shares	160,291	153,621
Discover Financial Svs	VAR% DUE 11/02/2034, 210,000 Shares	238,237	244,102
Dominion Energy Inc	04.250% DUE 06/01/2028, 193,000 Shares	187,227	192,720
Dominion Resources Inc	05.950% DUE 06/15/2035, 214,000 Shares	220,304	224,957
Dowdupont Inc	05.319% DUE 11/15/2038, 210,000 Shares	219,511	217,379
Dowdupont Inc	05.419% DUE 11/15/2048, 148,000 Shares	156,433	149,042
DTE Electric Co	03.700% DUE 03/15/2045, 175,000 Shares	138,457	135,469
DTE Energy Co	02.850% DUE 10/01/2026, 298,000 Shares	284,550	292,767
Duke Energy Carolinas	04.250% DUE 12/15/2041, 214,000 Shares	181,299	183,017
Duke Energy Florida LLC	06.200% DUE 11/15/2053, 117,000 Shares	127,163	124,507
Duke Energy Indiana LLC	06.350% DUE 08/15/2038, 221,000 Shares	239,071	241,069
Ecolab Inc	02.125% DUE 08/15/2050, 141,000 Shares	80,924	77,009
Elevance Health Inc	06.100% DUE 10/15/2052, 122,000 Shares	130,841	124,327
Enbridge Inc	05.900% DUE 11/15/2026, 292,000 Shares	296,069	297,192
Enbridge Inc	04.500% DUE 06/10/2044, 191,000 Shares	161,540	156,547
Enbridge Inc	05.500% DUE 12/01/2046, 175,000 Shares	171,852	166,695
Enbridge Inc	03.400% DUE 08/01/2051, 132,000 Shares	91,266	87,235
Entergy Louisiana LLC	02.350% DUE 06/15/2032, 208,000 Shares	170,454	179,352
Entergy Louisiana LLC	05.700% DUE 03/15/2054, 108,000 Shares	108,927	106,574
Enterprise Products Oper	03.700% DUE 01/31/2051, 130,000 Shares	98,569	93,867
Enterprise Products Oper	04.800% DUE 02/01/2049, 147,000 Shares	133,098	128,155
Enterprise Products Oper	05.700% DUE 02/15/2042, 200,000 Shares	204,418	201,520
EOG Resources Inc	03.900% DUE 04/01/2035, 212,000 Shares	192,721	193,931
Equinix Inc	03.900% DUE 04/15/2032, 203,000 Shares	186,013	192,265
Equinix Inc	02.150% DUE 07/15/2030, 202,000 Shares	170,040	179,772
Equinix Inc	03.400% DUE 02/15/2052, 120,000 Shares	84,668	80,276
Equinix Inc	03.200% DUE 11/18/2029, 203,000 Shares	183,841	192,639
Equinor ASA	04.800% DUE 11/08/2043, 195,000 Shares	184,150	180,188
ERP Operating LP	04.500% DUE 07/01/2044, 187,000 Shares	161,353	162,290
Essex Portfolio LP	03.000% DUE 01/15/2030, 196,000 Shares	175,183	183,280
Everygy Inc	02.900% DUE 09/15/2029, 198,000 Shares	177,834	185,924

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

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

JUNE 30, 2025

Identity of Issuer	Description of Investment	Cost	Current Value
Exelon Corp	02.750% DUE 03/15/2027, 182,000 Shares	170,962	177,576
Exelon Corp	04.100% DUE 03/15/2052, 120,000 Shares	94,547	91,999
Exelon Corp	04.450% DUE 04/15/2046, 171,000 Shares	144,346	141,408
Exelon Corp	05.100% DUE 06/15/2045, 181,000 Shares	168,119	164,419
Expedia Group Inc	04.625% DUE 08/01/2027, 183,000 Shares	180,132	183,743
Expedia Group Inc	02.950% DUE 03/15/2031, 201,000 Shares	175,067	183,199
Exxon Mobil Corporation	04.227% DUE 03/19/2040, 211,000 Shares	188,794	188,702
FedEx Corp	05.250% DUE 05/15/2050, 140,000 Shares	132,313	123,645
FedEx Corp	05.100% DUE 01/15/2044, 182,000 Shares	168,754	160,138
Fidelity Natl Info Serv	03.100% DUE 03/01/2041, 202,000 Shares	147,983	148,415
Fifth Third Bancorp	VAR% DUE 04/25/2033, 202,000 Shares	185,468	192,829
Fiserv Inc	04.400% DUE 07/01/2049, 151,000 Shares	125,404	123,622
Florida Power & Light Co	05.950% DUE 02/01/2038, 211,000 Shares	225,280	226,703
Florida Power & Light Co	04.050% DUE 10/01/2044, 187,000 Shares	157,811	154,319
Florida Power & Light Co	03.150% DUE 10/01/2049, 148,000 Shares	103,499	100,002
Ford Motor Credit Co LLC	07.200% DUE 06/10/2030, 204,000 Shares	215,359	214,690
Ford Motor Credit Co LLC	04.271% DUE 01/09/2027, 200,000 Shares	192,876	197,126
Fox Corp	05.476% DUE 01/25/2039, 208,000 Shares	200,861	203,574
Fox Corp	05.576% DUE 01/25/2049, 147,000 Shares	137,601	137,929
GE Capital Intl Funding	04.418% DUE 11/15/2035, 216,000 Shares	201,556	207,289
General Dynamics Corp Co	03.600% DUE 11/15/2042, 201,000 Shares	161,771	160,511
General Elec Cap Corp	05.875% DUE 01/14/2038, 213,000 Shares	221,878	227,245
General Mills Inc	02.250% DUE 10/14/2031, 205,000 Shares	170,330	178,543
General Motors Co	06.600% DUE 04/01/2036, 210,000 Shares	222,233	222,413
General Motors Co	05.950% DUE 04/01/2049, 146,000 Shares	144,400	136,475
General Motors Co	05.200% DUE 04/01/2045, 175,000 Shares	156,956	149,952
General Motors Finl Co	06.400% DUE 01/09/2033, 200,000 Shares	209,342	210,432
General Motors Finl Co	05.750% DUE 02/08/2031, 198,000 Shares	199,682	203,449
Georgia Power Co	04.700% DUE 05/15/2032, 203,000 Shares	198,053	202,961
Georgia Power Co	03.700% DUE 01/30/2050, 141,000 Shares	106,975	105,090
Gilead Sciences Inc	04.000% DUE 09/01/2036, 217,000 Shares	193,594	197,932
Gilead Sciences Inc	05.550% DUE 10/15/2053, 116,000 Shares	118,466	114,511
Gilead Sciences Inc	04.800% DUE 04/01/2044, 183,000 Shares	168,305	167,172
Gilead Sciences Inc	04.600% DUE 09/01/2035, 215,000 Shares	205,256	208,851
Goldman Sachs Group Inc	VAR% DUE 02/24/2043, 191,000 Shares	147,164	145,622
Goldman Sachs Group Inc	04.750% DUE 10/21/2045, 182,000 Shares	166,661	161,793
Goldman Sachs Group Inc	VAR% DUE 04/23/2039, 214,000 Shares	191,949	192,921
Goldman Sachs Group Inc	VAR% DUE 07/21/2032, 207,000 Shares	171,473	180,783
Halliburton Co	05.000% DUE 11/15/2045, 178,000 Shares	165,001	157,489
Halliburton Co	07.450% DUE 09/15/2039, 214,000 Shares	257,344	250,521
HCA Inc	04.125% DUE 06/15/2029, 200,000 Shares	190,136	196,506
Home Depot Inc	03.125% DUE 12/15/2049, 152,000 Shares	106,161	102,576
Honeywell International	05.700% DUE 03/15/2037, 212,000 Shares	222,725	221,896
HSBC Holdings PLC	VAR% DUE 11/22/2032, 213,000 Shares	178,601	188,420
HSBC Holdings PLC	VAR% DUE 03/09/2044, 200,000 Shares	212,168	214,686
HSBC Holdings PLC	VAR% DUE 08/18/2031, 204,000 Shares	170,968	181,176
IBM Corp	04.150% DUE 05/15/2039, 213,000 Shares	185,868	187,619
IBM Corp	04.250% DUE 05/15/2049, 146,000 Shares	121,409	117,606
IBM Internat Capital	05.250% DUE 02/05/2044, 184,000 Shares	177,975	176,410

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER**EIN 25-1512436 PN 001****SCHEDULE H, PART IV, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)****JUNE 30, 2025**

Identity of Issuer	Description of Investment	Cost	Current Value
Illinois Tool Works Inc	03.900% DUE 09/01/2042, 201,000 Shares	171,131	166,490
Indiana Michigan Power	05.625% DUE 04/01/2053, 114,000 Shares	113,763	111,894
Intel Corp	04.750% DUE 03/25/2050, 138,000 Shares	121,821	112,583
Intel Corp	04.100% DUE 05/19/2046, 175,000 Shares	142,790	131,231
Jefferies Group Inc	06.250% DUE 01/15/2036, 211,000 Shares	214,690	218,655
Johnson & Johnson	04.500% DUE 12/05/2043, 200,000 Shares	189,918	184,218
Johnson & Johnson	03.625% DUE 03/03/2037, 212,000 Shares	187,262	189,723
JP Morgan Chase & Co	05.600% DUE 07/15/2041, 207,000 Shares	213,837	212,552
JP Morgan Chase & Co	VAR% DUE 02/22/2048, 156,000 Shares	133,158	131,436
Keurig Dr Pepper Inc	04.500% DUE 04/15/2052, 120,000 Shares	102,364	98,860
Keycorp	VAR% DUE 03/06/2035, 210,000 Shares	213,963	224,009
Kinder Morgan Inc	05.450% DUE 08/01/2052, 122,000 Shares	114,440	112,372
Kinder Morgan Inc/Delawa	05.050% DUE 02/15/2046, 337,000 Shares	300,975	297,460
Kraft Foods Group Inc	05.000% DUE 06/04/2042, 202,000 Shares	186,577	182,200
Kraft Heinz Foods Co	05.000% DUE 07/15/2035, 216,000 Shares	211,950	213,360
Kraft Heinz Foods Co	05.500% DUE 06/01/2050, 142,000 Shares	139,207	132,862
Lincoln National Corp	07.000% DUE 06/15/2040, 221,000 Shares	243,884	244,119
Lloyds Banking Group PLC	VAR% DUE 03/06/2029, 200,000 Shares	203,282	206,748
Lockheed Martin Corp	05.700% DUE 11/15/2054, 222,000 Shares	233,238	223,940
Lockheed Martin Corp	04.500% DUE 05/15/2036, 210,000 Shares	199,435	201,863
Lowes Companies Inc	04.650% DUE 04/15/2042, 199,000 Shares	177,297	174,746
Lowes Cos Inc	05.750% DUE 07/01/2053, 117,000 Shares	117,999	114,383
Lowes Cos Inc	01.300% DUE 04/15/2028, 192,000 Shares	167,860	177,635
LYB Int Finance III	03.625% DUE 04/01/2051, 129,000 Shares	90,951	86,273
LYB Int Finance III	05.250% DUE 07/15/2043, 196,000 Shares	181,361	174,626
Marathon Petroleum Corp	04.500% DUE 04/01/2048, 150,000 Shares	123,848	116,360
Marriott International	05.300% DUE 05/15/2034, 206,000 Shares	204,239	208,495
Marriott International	05.000% DUE 10/15/2027, 186,000 Shares	185,890	189,050
Marriott International	03.500% DUE 10/15/2032, 208,000 Shares	182,366	189,089
Marriott International	02.850% DUE 04/15/2031, 201,000 Shares	173,590	182,512
Marsh & McLennan Cos Inc	06.250% DUE 11/01/2052, 120,000 Shares	132,632	128,764
Mastercard Inc	03.650% DUE 06/01/2049, 151,000 Shares	118,342	115,545
McDonalds Corp	05.150% DUE 09/09/2052, 126,000 Shares	119,172	115,381
McDonalds Corp	06.300% DUE 10/15/2037, 219,000 Shares	238,079	239,818
Merck & Co Inc	03.700% DUE 02/10/2045, 176,000 Shares	141,398	138,706
Metlife Inc	05.000% DUE 07/15/2052, 124,000 Shares	115,434	112,371
Metlife Inc	04.721% DUE 12/15/2044, 189,000 Shares	170,784	167,964
Midamerican Energy Co	05.850% DUE 09/15/2054, 221,000 Shares	232,237	227,451
Mondelez International	02.625% DUE 09/04/2050, 142,000 Shares	87,696	83,865
National Rural Util Coop	04.300% DUE 03/15/2049, 148,000 Shares	124,848	123,277
Natwest Group PLC	05.778% DUE 03/01/2035, 207,000 Shares	208,981	214,959
Newmont Corp	04.875% DUE 03/15/2042, 195,000 Shares	182,955	180,753
Newmont Mining Corp	06.250% DUE 10/01/2039, 218,000 Shares	234,346	235,466
Northrop Grumman Corp	05.200% DUE 06/01/2054, 220,000 Shares	210,885	204,983
Nucor Corp	06.400% DUE 12/01/2037, 225,000 Shares	247,307	248,027
Nutrien LTD	04.900% DUE 06/01/2043, 192,000 Shares	174,157	171,821
Nutrien LTD	05.250% DUE 01/15/2045, 175,000 Shares	165,569	161,145
Oracle Corp	05.550% DUE 02/06/2053, 113,000 Shares	109,653	106,262
Oracle Corp	04.125% DUE 05/15/2045, 180,000 Shares	144,331	143,041

RETIREMENT PLAN FOR EMPLOYEES OF MEADVILLE MEDICAL CENTER

EIN 25-1512436 PN 001

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

JUNE 30, 2025

Identity of Issuer	Description of Investment	Cost	Current Value
Oracle Corp	05.375% DUE 07/19/2040, 214,000 Shares	207,351	209,010
Oracle Corp	06.125% DUE 07/08/2039, 216,000 Shares	226,835	226,858
Pepsico Inc	03.450% DUE 10/06/2046, 175,000 Shares	135,034	129,798
Pfizer Inc	04.100% DUE 09/15/2038, 218,000 Shares	195,860	195,450
Pfizer Investment Enter	05.110% DUE 05/19/2043, 195,000 Shares	189,263	185,956
Philip Morris Intl Inc	05.500% DUE 09/07/2030, 199,000 Shares	202,743	208,017
Philip Morris Intl Inc	06.375% DUE 05/16/2038, 217,000 Shares	236,630	240,894
Philip Morris Intl Inc	04.250% DUE 11/10/2044, 188,000 Shares	155,185	159,636
* PNC Financial Services	VAR% DUE 10/20/2034, 212,000 Shares	232,687	236,995
Potomac Electric Power	06.500% DUE 11/15/2037, 219,000 Shares	243,486	244,514
Principal Financial Group	06.050% DUE 10/15/2036, 213,000 Shares	226,751	226,643
Prologis LP	04.750% DUE 06/15/2033, 207,000 Shares	201,469	206,311
Prologis LP	02.125% DUE 10/15/2050, 143,000 Shares	77,726	76,032
Prudential Financial Inc	05.700% DUE 12/14/2036, 222,000 Shares	229,941	233,104
Prudential Financial Inc	04.600% DUE 05/15/2044, 185,000 Shares	164,576	163,013
Raytheon Tech Corp	04.875% DUE 10/15/2040, 215,000 Shares	199,675	202,177
Realty Income Corp	04.900% DUE 07/15/2033, 207,000 Shares	199,728	206,352
Realty Income Corp	02.850% DUE 12/15/2032, 212,000 Shares	176,346	185,540
Realty Income Corp	04.650% DUE 03/15/2047, 165,000 Shares	145,459	143,327
Realty Income Corp	03.650% DUE 01/15/2028, 190,000 Shares	181,359	187,661
Republic Services Inc	05.000% DUE 12/15/2033, 213,000 Shares	210,029	217,256
Republic Services Inc	02.300% DUE 03/01/2030, 198,000 Shares	171,900	181,134
Reynolds American Inc	05.700% DUE 08/15/2035, 215,000 Shares	212,768	219,476
Rio Tinto Fin Usa PLC	04.125% DUE 08/21/2042, 199,000 Shares	171,269	167,550
Royal Bank of Canada	03.625% DUE 05/04/2027, 184,000 Shares	176,933	182,228
RTX Corp	06.400% DUE 03/15/2054, 108,000 Shares	120,546	118,382
RTX Corporation	03.125% DUE 07/01/2050, 142,000 Shares	95,643	94,137
RTX Corporation	06.125% DUE 07/15/2038, 220,000 Shares	233,930	237,505
Santander Uk Group Holdings	VAR% DUE 06/14/2027, 200,000 Shares	185,054	194,270
Shell International Fin BV	03.000% DUE 11/26/2051, 133,000 Shares	89,235	85,617
Shell International Fin BV	06.375% DUE 12/15/2038, 225,000 Shares	251,091	249,599
Sherwin-Williams Co	02.950% DUE 08/15/2029, 198,000 Shares	179,186	187,043
Simon Property Group LP	05.850% DUE 03/08/2053, 113,000 Shares	114,890	113,018
Simon Property Group LP	06.750% DUE 02/01/2040, 207,000 Shares	228,563	233,927
Sprint Cap Corp	06.875% DUE 11/15/2028, 193,000 Shares	205,387	207,193
Starbucks Corp	03.500% DUE 11/15/2050, 280,000 Shares	202,247	194,936
State Street Corp	VAR% DUE 01/26/2034, 207,000 Shares	201,808	206,244
Stryker Corp	04.625% DUE 03/15/2046, 171,000 Shares	153,755	151,277
Sumitomo Mitsui Finl Grp	02.296% DUE 01/12/2041, 207,000 Shares	141,410	141,234
Sumitomo Mitsui Finl Grp	05.808% DUE 09/14/2033, 206,000 Shares	215,523	218,609
Sysco Corporation	03.300% DUE 07/15/2026, 293,000 Shares	283,850	289,631
Sysco Corporation	03.300% DUE 02/15/2050, 139,000 Shares	97,913	93,040
Target Corp	03.900% DUE 11/15/2047, 163,000 Shares	132,377	125,632
Thermo Fisher Scientific	04.100% DUE 08/15/2047, 167,000 Shares	140,549	137,045
T-Mobile USA Inc	02.250% DUE 11/15/2031, 204,000 Shares	168,149	176,884
T-Mobile USA Inc	04.375% DUE 04/15/2040, 209,000 Shares	184,775	185,193
Travelers Cos Inc	04.000% DUE 05/30/2047, 167,000 Shares	137,894	133,633
Travelers Cos Inc	05.350% DUE 11/01/2040, 206,000 Shares	208,272	207,139
Truist Financial Corp	VAR% DUE 06/08/2034, 213,000 Shares	215,758	222,519

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

JUNE 30, 2025

Identity of Issuer	Description of Investment	Cost	Current Value
UBS AG London	04.500% DUE 06/26/2048, 200,000 Shares	179,012	172,050
Union Pacific Corp	03.600% DUE 09/15/2037, 221,000 Shares	188,639	191,958
Union Pacific Corp	04.000% DUE 04/15/2047, 162,000 Shares	132,119	128,976
Union Pacific Corp	03.550% DUE 08/15/2039, 219,000 Shares	180,879	183,148
United Parcel Service	03.400% DUE 09/01/2049, 148,000 Shares	109,313	103,406
Unitedhealth Group Inc	03.950% DUE 10/15/2042, 201,000 Shares	168,545	162,758
Unitedhealth Group Inc	03.750% DUE 10/15/2047, 167,000 Shares	130,516	124,318
Unitedhealth Group Inc	05.375% DUE 04/15/2054, 108,000 Shares	107,809	100,961
US Bancorp	VAR% DUE 01/23/2035, 209,000 Shares	211,374	216,980
US Bancorp	VAR% DUE 10/21/2033, 206,000 Shares	210,952	216,720
Valero Energy Corp	06.625% DUE 06/15/2037, 218,000 Shares	235,828	234,620
Valero Energy Corp	02.150% DUE 09/15/2027, 185,000 Shares	168,892	176,359
Valero Energy Corp	04.000% DUE 06/01/2052, 124,000 Shares	93,291	87,830
Verizon Communications	02.850% DUE 09/03/2041, 209,000 Shares	149,301	148,054
Verizon Communications	02.650% DUE 11/20/2040, 220,000 Shares	154,504	155,203
Verizon Communications	04.812% DUE 03/15/2039, 211,000 Shares	198,635	197,986
Verizon Communications	05.012% DUE 08/21/2054, 113,000 Shares	105,263	100,414
Virginia Elec & Power Co	05.700% DUE 08/15/2053, 117,000 Shares	119,173	115,206
Virginia Elec & Power Co	04.000% DUE 01/15/2043, 188,000 Shares	155,151	151,451
Visa Inc	04.300% DUE 12/14/2045, 185,000 Shares	163,438	160,817
Walt Disney Company	04.750% DUE 09/15/2044, 187,000 Shares	173,050	169,022
Walt Disney Company	06.200% DUE 12/15/2034, 220,000 Shares	241,996	245,513
Wellpoint Inc	04.650% DUE 08/15/2044, 187,000 Shares	166,546	162,507
Wells Fargo & Co	VAR% DUE 04/30/2041, 206,000 Shares	153,779	155,668
Wells Fargo & Company	VAR% DUE 04/24/2034, 207,000 Shares	206,338	211,813
Wells Fargo & Company	VAR% DUE 07/25/2034, 212,000 Shares	213,794	218,790
Wells Fargo & Company	VAR% DUE 10/23/2029, 197,000 Shares	204,967	208,207
Welltower Inc	02.800% DUE 06/01/2031, 205,000 Shares	176,368	186,214
Welltower Inc	02.700% DUE 02/15/2027, 182,000 Shares	171,894	177,874
Welltower Inc	04.950% DUE 09/01/2048, 157,000 Shares	146,070	144,184
Weyerhaeuser Co	04.000% DUE 04/15/2030, 200,000 Shares	187,902	195,072
Williams Companies Inc	03.500% DUE 10/15/2051, 131,000 Shares	93,112	89,790
Williams Companies Inc	05.300% DUE 08/15/2028, 192,000 Shares	193,148	197,219
Williams Companies Inc	03.500% DUE 11/15/2030, 204,000 Shares	185,791	192,851
Williams Partners LP	05.100% DUE 09/15/2045, 180,000 Shares	166,140	163,033
Wyeth	05.950% DUE 04/01/2037, 212,000 Shares	226,537	226,128
<u>Mutual Funds</u>			
First Eagle	First Eagle Global Fund Class R6	2,050,000	2,229,566
JP Morgan	JPMorgan Hedged Equity Fund Class R6	1,053,509	1,325,658
T. Rowe Price Associates, Inc.	T. Rowe Price Equity Index 500 Fund I Class	1,805,808	1,927,274
<u>Interest Bearing Cash</u>			
* Morgan Stanley	Interest Bearing Cash	24,763	24,763
<u>Alternative Investments</u>			
* Commonfund Capital, Inc.	Commonfund Capital Natural Resources	1,074,709	1,577,842
* Fundamental Advisors LP	Fundamental Partners III-A LP	1,171,707	1,223,304
		<u>\$ 67,665,664</u>	<u>\$ 68,935,342</u>

* Party-in-interest

Retirement Plan for Employees of Meadville Medical Center
EIN/PN: 25-1512436/ 001

Schedule SB Attachments for the 2024 Plan Year

Line 32 – Schedule of Amortization Bases

Date Established	Type Of Base	Years Remaining	Shortfall Amortization Installment	Present Value of Remaining Installments as of July 1, 2024
July 1, 2019	Shortfall	10	1,489,138	12,062,828
July 1, 2020	Shortfall	11	(84,927)	(739,501)
July 1, 2021	Shortfall	12	(29,194)	(271,062)
July 1, 2022	Shortfall	13	(13,502)	(132,780)
July 1, 2023	Shortfall	14	165,790	1,717,025
July 1, 2024	Shortfall	15	<u>204,056</u>	<u>2,214,760</u>
Total			\$ 1,731,361	\$ 14,851,270

Retirement Plan for Employees of Meadville Medical Center
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Schedule SB Attachments for the 2024 Plan Year

Line 24 – Change in Non-Prescribed Funding Assumptions and Methods

The expected plan expenses included in Target Normal Cost were changed from \$450,000 to \$420,000.

The expected return on plan assets was updated from 6.75% to 6.00%, to better reflect future anticipated experience.