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

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

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.)
- [X] a single-employer plan
- [ ] a DFE (specify) _____

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

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

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
VIRTUA PENSION EQUITY PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1961

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)
VIRTUA HEALTH

303 LIPPINCOTT DRIVE
4TH FLOOR
MARLTON, NJ 08053

2b Employer Identification Number (EIN)
22-3524939

2c Plan Sponsor's telephone number
856-761-3900

2d Business code (see instructions)
622000

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2026	MARIA VOLARICH
	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 [X] 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:	**4b**	EIN
a	Sponsor's name	**4d**	PN
c	Plan Name		

5	Total number of participants at the beginning of the plan year	**5**	2526
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	891
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	813
b	Retired or separated participants receiving benefits	**6b**	331
c	Other retired or separated participants entitled to future benefits	**6c**	1155
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	2299
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	108
f	Total. Add lines **6d** and **6e**.	**6f**	2407
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

1A 1C

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	**(1)**	[X] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(4)**	[ ] General assets of the sponsor

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

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [X] **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)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached 0
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **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 2025 Form M-1 annual report. If the plan was not required to file the 2025 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

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **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
VIRTUA PENSION EQUITY PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
VIRTUA HEALTH

D Employer Identification Number (EIN)
22-3524939

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

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

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	103002859
b Actuarial value	**2b**	102307335

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	343	44023636	44023636
b For terminated vested participants	1292	36487485	36487485
c For active participants	891	28206031	28206031
d Total	2526	108717152	108717152

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**	5.32 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	1170908
c Target normal cost	**6c**	1170908

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

09/12/2026
Date

JASON ROHRER, FSA, EA
Type or print name of actuary

26-07974
Most recent enrollment number

WILLIS TOWERS WATSON US LLC
Firm name

215-246-6000
Telephone number (including area code)

1735 MARKET STREET
FLOOR 4
PHILADELPHIA, PA 19103-7501
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	13929593
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	4259562
9	Amount remaining (line 7 minus line 8)	0	9670031
10	Interest on line 9 using prior year's actual return of 5.46 %	0	527984
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		12862145
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.13 %		441313
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		232572
c	Total available at beginning of current plan year to add to prefunding balance		13536030
d	Portion of (c) to be added to prefunding balance		5135598
12	Other reductions in balances due to elections or deemed elections	0	4462881
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	10870732

Part III Funding Percentages

14	Funding target attainment percentage	14	84.10 %
15	Adjusted funding target attainment percentage	15	90.00 %
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	80.00 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ► 18(b)	0	18(c) 0

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

20 Quarterly contributions and liquidity shortfalls:

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

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] 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: %	2nd segment: %	3rd segment: %	[X] N/A, full yield curve used
b Applicable month (enter code)			**21b**	
22 Weighted average retirement age			**22**	63

23 Mortality table(s) (see instructions) [ ] Prescribed - combined [X] 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 [X] No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. [ ] Yes [X] 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. [X] Yes [ ] No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment [X] 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**	1170908
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	17280549	1810354
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**	2981262

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	4259564	4259564

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	0
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
VIRTUA PENSION EQUITY PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
VIRTUA HEALTH

D Employer Identification Number (EIN)
22-3524939

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

WILLIS TOWERS WATSON US LLC

53-0181291

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 17 50 70	NONE	393190	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

RUSSELL INVESTMENTS TRUST COMPANY

91-1116938

(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?
14 28 50 51	NONE	180981	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
VIRTUA PENSION EQUITY PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
VIRTUA HEALTH

D Employer Identification Number (EIN)
22-3524939

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: 10-15 YEAR STRIPS FIXED INCOME FUND

b Name of sponsor of entity listed in (a): RUSSELL INVESTMENTS TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6609096-010	C	13461139

a Name of MTIA, CCT, PSA, or 103-12 IE: 15-20 YEAR STRIPS FIXED INCOME FUND

b Name of sponsor of entity listed in (a): RUSSELL INVESTMENTS TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6609096-011	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: 25+ YEAR STRIPS FIXED INC FD

b Name of sponsor of entity listed in (a): RUSSELL INVESTMENTS TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6609096-001	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL INV RUSS 1000 IND FD SR I

b Name of sponsor of entity listed in (a): RUSSELL INVESTMENTS TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
91-1117282-033	C	4264968

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 14 YR LDI FIXED

b Name of sponsor of entity listed in (a): RUSSELL INVESTMENTS TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6609096-008	C	24450451

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 8 YR LDI FIXED

b Name of sponsor of entity listed in (a): RUSSELL INVESTMENTS TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6609096-005	C	54708749

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL ALL INTERNATIONAL MKTS FUND

b Name of sponsor of entity listed in (a): RUSSELL INVESTMENTS TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
91-1117282-020	C	1891017

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL EQUITY II FUND

b Name of sponsor of entity listed in (a): RUSSELL INVESTMENTS TRUST COMPANY

c EIN-PN 91-1117282-006	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL LG CAP DEF EQUITY FUND

b Name of sponsor of entity listed in (a): RUSSELL INVESTMENTS TRUST COMPANY0

c EIN-PN 91-1117282-032	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL LONG DUR FIXED INCOME FUND

b Name of sponsor of entity listed in (a): RUSSELL INVESTMENTS TRUST COMPANY

c EIN-PN 26-6609096-003	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL REAL ESTATE EQUITY FUND

b Name of sponsor of entity listed in (a): RUSSELL INVESTMENTS TRUST COMPANY

c EIN-PN 91-1117282-008	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II **Information on Participating Plans (to be completed by DFEs, other than DCGs)**
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
VIRTUA PENSION EQUITY PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
VIRTUA HEALTH

D Employer Identification Number (EIN)
22-3524939

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)	14000000	0
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	1263596	4894981
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(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)	88217290	98776324
(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)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	103480886	103671305
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j	125760	95065
1k Total liabilities (add all amounts in lines 1g through1j)	1k	125760	95065
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	103355126	103576240

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)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		0
(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)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		11226529
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		11226529
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	9879015	
(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)		9879015
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)	-14400	
(5) Investment advisory and investment management fees	2i(5)	171473	
(6) Bank or trust company trustee/custodial fees	2i(6)	9509	
(7) Actuarial fees	2i(7)	393190	
(8) Legal fees	2i(8)	1692	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	564936	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		1126400
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		11005415
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		221114
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

(1) [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: MAILLIE LLP **(2)** EIN: 23-1518888

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.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		3000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] 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.) ..... [X] Yes [ ] No [ ] Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 584053.

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

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
VIRTUA PENSION EQUITY PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
VIRTUA HEALTH

D Employer Identification Number (EIN)
22-3524939

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): 22-3524939

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** 113

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

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

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
Public Equity: 6.0 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 85.0 %
High-Yield Debt: 1.0 % Real Assets: 0.0 % Cash or Cash Equivalents: 8.0 % Other: 0.0 %

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

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

VIRTUA PENSION EQUITY PLAN

FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULES

Years Ended December 31, 2025 and 2024

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ACCOUNTANTS • ADVISORS

VIRTUA PENSION EQUITY PLAN
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YEARS ENDED DECEMBER 31, 2025 AND 2024

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Independent Auditors' Report

To the Virtua Audit and Compliance Committee of the
Board of Trustees and the Participants
Virtua Pension Equity Plan
Marlton, New Jersey

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

We have performed audits of the financial statements of Virtua Pension Equity Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement 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 Virtua Pension Equity Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the years ended December 31, 2025 and 2024, stating that the certified investment information, as described in Note E to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Virtua Pension Equity Plan's ability to continue as a going concern for one year after the date that the financial statements are issued.

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

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users made on the basis of these 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 Virtua Pension Equity Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Virtua Pension Equity Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter - Supplemental Schedules Required by ERISA

The supplemental schedules of Schedule of Assets (Held at End of Year) and Schedule of Reportable Transactions are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

To the Virtua Audit and Compliance Committee of the
Board of Trustees and the Participants
Virtua Pension Equity Plan
Marlton, New Jersey

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).

Maillie LLP

West Chester, Pennsylvania
October 7, 2026

VIRTUA PENSION EQUITY PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2025 AND 2024

	2025	2024
ASSETS		
Investments at net asset value		
Common/collective trust funds	$ 98,776,324	$ 88,217,290
Receivables		
Receivables for securities sold	4,894,981	1,263,596
Contribution receivable	-	14,000,000
TOTAL RECEIVABLES	4,894,981	15,263,596
TOTAL ASSETS	103,671,305	103,480,886
LIABILITIES		
Accrued administrative expenses	95,065	125,760
NET ASSETS AVAILABLE FOR BENEFITS	$ 103,576,240	$ 103,355,126

See independent auditors' report and accompanying notes.

VIRTUA PENSION EQUITY PLAN

STATEMENTS OF CHANGES IN NET ASSETS
AVAILABLE FOR BENEFITS
YEARS ENDED DECEMBER 31, 2025 AND 2024

	2025	2024
ADDITIONS TO NET ASSETS		
Employer contributions	$ -	$ 14,000,000
INVESTMENT INCOME		
Net appreciation in fair value of investments	11,226,529	3,471,031
DEDUCTIONS FROM NET ASSETS		
Benefits paid to participants	9,879,015	8,905,327
Administrative expenses	1,126,400	1,833,179
TOTAL DEDUCTIONS	11,005,415	10,738,506
NET INCREASE	221,114	6,732,525
NET ASSETS AVAILABLE FOR BENEFITS BEGINNING OF YEAR	103,355,126	96,622,601
END OF YEAR	$ 103,576,240	$ 103,355,126

See independent auditors' report and accompanying notes.

NOTE A - DESCRIPTION OF THE PLAN

The following description of the Virtua Pension Equity Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan Agreement for more complete information.

General

The Plan is a noncontributory defined benefit pension plan and trust covering substantially all eligible employees of the Memorial Health Alliance, Inc. ("Alliance"), Virtua-Memorial Hospital of Burlington County, Virtua Health and Rehab at Mt. Holly, Inc., Virtua Health and Rehab at Berlin, Inc., Virtua Community Nursing Services, Inc., Virtua-West Jersey Health System (WJHS) and Helene Fuld School of Nursing.

Virtua Health, Inc. ("Virtua"), the Plan Sponsor, is a nonprofit corporation incorporated in New Jersey in 1997 to establish, operate, maintain and conduct a regional health network serving Burlington, Camden, Mercer, Ocean and Gloucester Counties in New Jersey and Philadelphia, Pennsylvania. Virtua functions as a community-based and governed regional integrated health care network for local area networks, initially consisting of WJHS and Alliance, a nonprofit corporation.

The Human Resources Department (the "Plan Administrator") controls and manages the operation and administration of the Plan. As fiduciary the Virtua Health Finance and Investment Committee ("the Committee") is charged with the responsibility for the investment of the assets of the Plan. To fulfill its fiduciary obligations with respect to the Plan, the Committee employs a logical and diligent process to meet investment objectives and risk tolerances for the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). Russell Investments serves in a fiduciary role under ERISA and Department of Labor Fiduciary Rule guidelines to provide certain investment services for the Plan. Russell Investments also serves as the trustee of the Plan.

Effective June 1, 1999, West Jersey Health System Retirement Plan merged into the pension plan of Memorial Health Alliance, Inc., and the name of the Plan was changed to the Pension Plan of Virtua Health, Inc. Participants previously covered under the West Jersey Health System Retirement Plan will remain covered under those provisions. Similarly, participants previously covered under the Memorial Health Alliance Pension Plan remain covered under those provisions.

Effective January 1, 2000, employees of West Jersey Physicians Associates became eligible to participate in the Plan. These employees may be covered under the provisions of West Jersey Health System Retirement Plan or the Pension Plan of Memorial Health Alliance, Inc.

The Plan was amended and restated effective January 1, 2003, and the name was changed from the Pension Plan of Virtua Health, Inc. to the Virtua Pension Equity Plan.

Also, effective January 1, 2003, the Plan's benefit formulas were frozen and future benefits are accrued under a pension equity formula. Effective August 31, 2003, JNESO union participants ceased accruing benefits under the Plan.

NOTE A - DESCRIPTION OF THE PLAN (Continued)

Effective December 31, 2019, non-union participants ceased accruing benefits under the Plan.

Effective January 1, 2004, all participants who had not attained age 50 with at least ten years of benefit service no longer accrued benefits under this Plan. Non-bargaining units' employees who had attained the age of 50 as of January 1, 2004, with ten years or more of benefit service continue to participate in the Plan and receive benefits under the pension equity formula. Health Professionals and Allied Employees union employees who attained age 50 with at least ten years of benefit service by January 1, 2004, were able to choose between accruing benefits in this Plan under the legacy formula for Memorial Health Alliance participants or continuing to accrue benefits under the pension equity formula and earning additional employer-provided benefits from a defined contribution plan.

Virtua has agreed to voluntarily contribute such additional amounts as necessary to provide assets sufficient to meet the benefits to be paid to Plan members. Virtua's present intention is to make annual contributions in amounts sufficient to fund the Plan's current-year service cost and the initial past service cost plus interest over a period of 30 years. The Plan has met the ERISA's minimum funding requirements.

In 2012, Virtua amended the Plan to temporarily allow vested participants who are no longer employed by Virtua to receive a lump-sum payment of their pension benefit based on the present value of the benefit due under the Plan. Acceptances amounted to approximately $34 million of $66 million eligible. Lump-sum payments were paid in December 2012. As a result, the Plan recognized a portion of the past losses that would have been amortized in future years. The benefits of this initiative to Virtua are a reduction in the size of the Plan and the associated market volatility risks, as well as a reduction to future Plan expenses.

In 2015, Virtua restated and amended the Plan to incorporate prior amendments, to provide an in-service distribution option for certain participants, to provide an unlimited lump sum payment option and to modify provisions relating to missing participants and to reflect the requirements of the 2013 Cumulative list of Changes in Plan Qualification Requirements.

Information about the Plan Agreement, the vesting and benefit provisions and the PBGC's benefit guarantee is contained in the Plan document. A copy of this Plan document is available from the Plan Administrator.

See independent auditors' report.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Use of Estimates

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

Investments Valuation and Income Recognition

Investments in common/collective trusts are measured at net asset value, as a practical expedient. Net asset value of a financial instrument is the amount that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

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

Expenses

Administrative expenses of the Plan are paid by the Plan as provided in the Plan document. Virtua provides accounting and other administrative services to the Plan at no charge.

Date of Management's Review

Management has evaluated subsequent events through October 7, 2026, the data which the financial statements were available to be issued.

See independent auditors' report.

NOTE C - FUNDING POLICY

Contributions to provide benefits under the Plan are made solely by Virtua. Virtua's funding policy is to make cash contributions to the Plan in amounts as determined by Virtua in consultation with an independent actuary. Virtua met the minimum funding requirements of ERISA for the years ended December 31, 2025 and 2024. To the extent that these requirements are fully covered by assets in the trust, the sponsors may elect not to make any contribution in a particular year. As of January 1, 2025, the amount of this funding balance was $10,870,732. Virtua did not make a contribution to the Plan for the year ended December 31, 2025. For the year ended December 31, 2024, Virtua elected to make a contribution to the plan in the amount of $14,000,000.

NOTE D - ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to services rendered by the employees to their freeze date or the valuation date, whichever is applicable. Accumulated plan benefits include benefits expected to be paid to (1) retired or terminated employees or their beneficiaries; (2) beneficiaries of employees who have died; and (3) present employees or their beneficiaries. Benefits to be provided via annuity contracts excluded from plan assets are excluded from accumulated plan benefits. The actuarial present value of accumulated plan benefits is determined by an independent actuary and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements, such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

Effective January 1, 2003, the Plan's current benefit formulas were frozen and future benefits are accrued under a pension equity formula.

The frozen benefits for retired or terminated employees or their beneficiaries that were covered under the Memorial Health Alliance Pension Plan were based on 1% of the participant's final average compensation up to the participant's covered compensation plus 1.5% of the participant's final average compensation in excess of the participant's covered compensation for each year of credited service as of December 31, 2002, not to exceed 35 years.

The frozen benefits for retired or terminated employees or their beneficiaries that were covered under the West Jersey Health System Retirement Plan prior to January 1, 1994, were based on accrued benefits through 1985 plus a career average plan for subsequent services. The benefit formula changed effective January 1, 1994, incorporating both a past service update and a change in the future service formula. Subsequent benefits under the Plan are based on a formula that considered the greater of accrued benefits as of December 31, 1993, or a benefit determined using the highest five-year average compensation.

See independent auditors' report.

NOTE D - ACCUMULATED PLAN BENEFITS (Continued)

The pension equity formula credits 1% for each year of service after January 1, 2003, while the participant is under age 50 or has fewer than 15 years of service and 2% for each year of service after January 1, 2003, while the participant has attained age 50 and has at least 15 years of service. A participant's account equals the sum of pension equity benefit percentages times the participant's average compensation. The total accrued benefit equals the pension equity accrued benefit plus the frozen accrued benefit.

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 their freeze date or the valuation date, whichever is applicable.

The actuarial present value of accumulated plan benefits was determined by independent actuaries, and it is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the participants 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 is determined as of the beginning of the Plan year and is as follows at January 1, 2025:

ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS		
Vested benefits		
Participants and/or beneficiaries currently receiving benefits	$	38,880,479
Other participants		53,985,980
TOTAL VESTED BENEFITS		92,866,459
Nonvested benefits		-
TOTAL ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS	$	92,866,459

The accumulated plan benefit information is determined as of the beginning of the Plan year and is stated as follows at January 1, 2024:

ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS		
Vested benefits		
Participants and/or beneficiaries currently receiving benefits	$	38,348,867
Other participants		58,713,554
TOTAL VESTED BENEFITS		97,062,421
Nonvested benefits		-
TOTAL ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS	$	97,062,421

See independent auditors' report.

NOTE D - ACCUMULATED PLAN BENEFITS (Continued)

The changes in the actuarial present value of the Plan's accumulated plan benefits for the year ended January 1, 2025, are stated as follows:

ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS JANUARY 1, 2024	$ 97,062,421
Changes during the year due to:	
Actuarial losses	380,165
Actual benefits paid	(8,905,327)
Decrease in the discount period	6,487,955
Assumption changes	(2,158,755)
ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS JANUARY 1, 2025	$ 92,866,459

The changes in the actuarial present value of the Plan's accumulated plan benefits for the year ended January 1, 2024, are stated as follows:

ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS JANUARY 1, 2023	$ 183,456,555
Changes during the year due to:	
Actuarial losses	2,090,393
Actual benefits paid	(86,494,328)
Decrease in the discount period	8,167,498
Assumption changes	(10,157,697)
ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS JANUARY 1, 2024	$ 97,062,421

The significant actuarial assumptions used in the January 1, 2025 valuations were as follows:

- Interest rate: A rate of 7.30% was used to compute the Plan's present value of accumulated plan benefits. (7.00% rate for January 1, 2024 valuation)
- Mortality: Pri-2012 with Scale MP-2021. This is consistent with the mortality tables used in the prior year.
- Retirement age: Rates varying by age; average age 63.
- Investment return: 7.30%. (7.00% return for January 1, 2024 valuation)

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that certain changes in these estimates and assumptions could be material to the financial statements.

See independent auditors' report.

NOTE E - INFORMATION CERTIFIED BY TRUSTEE

Following is a summary of investment information included in the Plan's statements of net assets available for benefits as of December 31, 2025 and 2024, and statements of changes in net assets available for benefits for the years ended December 31, 2025 and 2024, that was provided by or derived from information prepared by the trustee and furnished to the Plan Administrator. The Plan Administrator has obtained certifications from the trustee that such information is complete and accurate.

	2025	2024
COMMON/COLLECTIVE TRUST FUNDS		
Equity		
Russell All International Markets Fund	$ 1,891,017	$ 18,293,095
Russell Equity II Fund	-	4,252,351
Russell LG Cap Defensive Equity Fund	-	7,811,125
Russell 1000 Index Fund	4,264,968	12,014,064
TOTAL EQUITY	6,155,985	42,370,635
Real Estate		
Russell Real Estate Equity Fund	-	4,508,863
Fixed income		
Russell Long Duration Fixed Income	-	8,621,224
Russell 8 Yr LDI Fixed Income	54,708,749	5,215,144
Russell 14 Yr LDI Fixed Income	24,450,451	13,947,695
Russell 10-15 Yr Strips Fixed Income	13,461,139	3,447,785
Russell 15-20 Yr Strips Fixed Income	-	6,833,189
Russell 25 Yr Plus Strips Fixed Income	-	3,272,755
TOTAL FIXED INCOME	92,620,339	41,337,792
TOTAL INVESTMENTS, at net asset value	$ 98,776,324	$ 88,217,290
RECEIVABLES FOR SECURITIES SOLD	$ 4,894,981	$ 1,263,596

	2025	2024
Net appreciation in fair value of investments		
Common/collective trust funds	$ 11,226,529	$ 3,471,031

Supplemental Schedules

All investment balances and information are included in the supplemental schedule of assets (held at end of year) as of December 31, 2025 and the supplemental schedule of reportable transactions for the year ended December 31, 2025.

See independent auditors' report.

NOTE F - EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are investment funds managed by Russell Investments Trust Company Commingled Employee Benefit Funds Trust. Russell Investments Trust Company is the trustee as defined by the Plan and, therefore, these transactions qualify as exempt party-in-interest transactions. Fees paid by the Plan for the investment management services were $171,473 and $175,352 for the years ended December 31, 2025 and 2024, respectively.

NOTE G - FEDERAL INCOME TAX STATUS

The Internal Revenue Service has determined and informed Virtua by a letter dated November 2, 2011, that the Plan was designed in accordance with the applicable regulations of the Internal Revenue Code requirements. The Plan submitted a request to the Internal Revenue Service in July 2021 requesting a determination letter on the qualification of the plan. The Plan received a favorable determination letter on August 2, 2021. The plan has been amended since receiving the determination letter. The Plan sponsor believes the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code, therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. There were no penalties or interest for the year ended December 31, 2025.

NOTE H - PLAN TERMINATION

Virtua has the right under the Plan, in certain circumstances, to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event that the Plan is terminated, the net assets of the Plan will be allocated for payment of plan benefits to the participants in an order of priority determined in accordance with ERISA, applicable regulations thereunder and the Plan document.

See independent auditors' report.

NOTE H - PLAN TERMINATION (Continued)

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, subject to a statutory ceiling on the amount of an individual's monthly benefit.

Whether all participants receive their benefits should the Plan be terminated at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits, the priority of those benefits to be paid and the level and type of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then-existing assets and the PBGC guaranty, while other benefits may not be provided for at all.

Consistent with regulation, Virtua intends to proceed with terminating the plan through the purchase of a group annuity contract, which will assume full responsibility for providing all accrued benefits to plan participants and beneficiaries. Management is currently exploring the steps necessary to facilitate the termination of the Plan; however, no formal termination plan has been approved or adopted as of the date of these financial statements.

NOTE I - RISKS AND UNCERTAINTIES

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

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

ASC 820 establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under ASC 820 are described below:

NOTE J - FAIR VALUE MEASUREMENT (Continued)

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets, quoted prices for identical or similar assets or liabilities in inactive markets, inputs other than quoted prices that are observable for the asset or liability, and inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value (these are often based on internal models and there is rarely a two-way market). The asset's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. The valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Investments held in the Plan primarily consist of investment funds under the common/collective trust. These assets are recorded at fair value on a recurring basis. These are measured at fair value using the net asset value ("NAV") per share (or its equivalent) as a practical expedient and are excluded from the fair value hierarchy. These investments under the common/collective trust are typically valued using the NAV provided by the issuer of the fund. The NAV is based on the value of the underlying assets owned by the fund, minus liabilities and divided by the number of shares or units outstanding. The following is a description of the valuation methodologies used for investments measured at fair value. There have been no changes in the methodologies used as of December 31, 2025 and 2024.

Common/collective trusts: Valued by the issuer of the common/collective trust funds based on the NAV of its underlying investments. The underlying investments are valued by the issuer using quoted market prices on active markets and provide for daily redemptions. As of December 31, 2025 and 2024, the Plan's investments in common/collective trust funds have no unfunded commitments.

See independent auditors' report.

SUPPLEMENTAL SCHEDULES

VIRTUA PENSION EQUITY PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)
DECEMBER 31, 2025

Plan EIN #22-3524939, Plan 001

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
*	Russell All International Markets Fund	Common/collective trust fund - equity	$ 1,327,583	$ 1,891,017
*	Russell 1000 Index Fund	Common/collective trust fund - equity	3,123,804	4,264,968
*	Russell 10-15 Yr Strips Fixed Income	Common/collective trust fund - fixed income	13,304,454	13,461,139
*	Russell 14 Yr LDI Fixed Income	Common/collective trust fund - fixed income	24,290,066	24,450,451
*	Russell 8 Yr LDI Fixed Income	Common/collective trust fund - fixed income	53,404,023	54,708,749
			$ 95,449,930	$ 98,776,324

*Indicates party-in-interest

See independent auditors' report.

VIRTUA PENSION EQUITY PLAN

SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

YEAR ENDED DECEMBER 31, 2025

Plan EIN #22-3524939, Plan 001

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	Number of Transactions	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
SINGLE TRANSACTIONS								
Russell Trust Company	RITC 10 TO 15 Yr Strips Fixed In Fd	$ 9,400,000	$ -	$ 1	$ -	$ 9,400,000	$ 9,400,000	$ -
Russell Trust Company	RITC 14 Yr Ldi Fixed Income Fd	9,000,000	-	1	-	9,000,000	9,000,000	-
Russell Trust Company	RITC 8 Yr Ldi Fixed Income Fd	30,000,000	-	1	-	30,000,000	30,000,000	-
Russell Trust Company	RITC 8 Yr Ldi Fixed Income Fd	18,492,309	-	1	-	18,492,309	18,492,309	-
Russell Trust Company	RITC All Int Market Fund	-	20,900,000	1	-	15,292,898	20,900,000	5,607,102
Russell Trust Company	RITC Equity II Fund	-	5,519,252	1	-	4,051,260	5,519,252	1,467,992
Russell Trust Company	RITC LG Cap Defensive Eq Fd	-	8,833,060	1	-	5,978,448	8,833,060	2,854,612
Russell Trust Company	RITC Russ Inv Russ 1000 omd Fd Sr I	-	16,600,000	1	-	12,428,865	16,600,000	4,171,135
Russell Trust Company	RITC 15 TO 20 Yr Strips Fixed In Fd	-	8,615,866	1	-	8,817,296	8,615,866	(201,430)
		$ 66,892,309	$ 60,468,178	$ 9	$ -	$ 113,461,076	$ 127,360,487	$ 13,899,411
SERIES IN SAME SECURITY								
Russell Trust Company	RITC Russ Inv Russ 1000 omd Fd Sr I	$ 6,241,248	$ -	$ 4	$ -	$ 6,241,248	$ 6,241,248	$ -
Russell Trust Company	RITC 10 TO 15 Yr Strips Fixed In Fd	10,440,425	-	14	-	10,440,425	10,440,425	-
Russell Trust Company	RITC 14 Yr Ldi Fixed Income Fd	12,398,977	-	15	-	12,398,977	12,398,977	-
Russell Trust Company	RITC 8 Yr Ldi Fixed Income Fd	51,011,960	-	16	-	51,011,960	51,011,960	-
Russell Trust Company	RITC All Int Market Fund	-	25,358,351	32	-	18,654,086	25,358,351	6,704,265
Russell Trust Company	RITC Equity II Fund	-	6,060,363	13	-	4,439,395	6,060,363	1,620,968
Russell Trust Company	RITC LG Cap Defensive Eq Fd	-	10,686,495	15	-	7,188,414	10,686,495	3,498,081
Russell Trust Company	RITC Long Dur Fixed Inc Fd	-	9,326,044	16	-	8,489,789	9,326,044	836,255
Russell Trust Company	RITC 15 TO 20 Yr Strips Fixed In Fd	-	9,394,211	15	-	9,635,377	9,394,211	(241,166)
		$ 80,092,610	$ 60,825,464	140	$ -	$ 128,499,671	$ 140,918,074	$ 12,418,403

NOTE: "Number of Transactions" is required when presenting series of transactions on a single line instead of listing each transaction in the series. This schedule presents the Form 5500 - “Schedule H, Line 4j - Schedule of Reportable Transactions,” for the year ended December 31, 2025. This represents a transaction or series of transactions in the same security that in total exceeds 5% of the current value of the Plan's assets at the beginning of the year.

See independent auditors' report.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a
Schedule of Active Participant Data as of January 1, 2025

Attained Age	Attained Years of Credited Service[1] 0	1	2	3	4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	Total
Under 25	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35-39	0	0	0	0	0	0	0	0	0	0	0	0	0	0
40-44	0	0	0	0	0	0	0	0	16	5	0	0	0	21
45-49	0	0	0	0	0	0	0	4	39	29	4	0	0	76
50-54	0	0	0	0	0	1	2	5	52	64	34	3	0	161
55-59	0	0	0	0	0	0	4	1	53	52	44	46	0	200
60-64	0	0	0	0	0	0	1	0	60	68	51	101	0	281
65-69	0	0	0	0	0	0	0	1	24	44	25	37	0	131
70 & over	0	0	0	0	0	0	0	0	8	6	3	4	0	21
Total	0	0	0	0	0	1	7	11	252	268	161	191	0	891

Average:	Age	59	Number of Participants:	Fully vested	891	Males	161
	Service	29		Partially vested	0	Females	730

Census data as of January 1, 2025

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

Plan Name: Virtua Pension Equity Plan
EIN / PN: 22-3524939/001
Plan Sponsor: Virtua Health
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

• Applicable month	December 2024
• Interest rate basis	Full Yield Curve
• Effective interest rate	5.32%

Annual rates of increase

• Compensation:	N/A
• Future Social Security wage bases	N/A
• Statutory limits on compensation	3.00%

Demographic Assumptions

Mortality

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

SCHEDULE SB ATTACHMENTS

Termination

Rates varying by age and service

Representative Termination Rates

Percentage leaving during the year	
Attained Age	Rate
35 & Below	0.075
36 – 40	0.055
41 – 46	0.050
47 - 55	0.040

Disability

None.

Retirement

Rates varying by age, average age 63

Representative Retirement Rates

Percentage retiring during the year	
Attained Age	Rate
55 - 59	0.05
60 – 61	0.07
62	0.12
63	0.08
64	0.10
65	0.45
66	0.30
67	0.25
68	0.15
69	0.20
70+	1.00

Benefits commencing after age 65 reflect late retirement increases based on the UP84 Unisex mortality table and 7.50% interest

SCHEDULE SB ATTACHMENTS

Form of payment

Pension Equity Benefit

Assumption	Single	Married
Lump sum	100%	100%

Legacy Pension

Assumption	Single	Married
Life annuity	50%	30%
Lump Sum	50%	50%
Joint and 50% Survivor	0%	20%
Joint and 75% Survivor	0%	0%
Joint and 100% Survivor	0%	0%
10-year certain and continuous	0%	0%

Percent married

80%

Spouse age

Wife three years younger than husband

Covered pay

Prior year's pensionable earnings increased with salary assumptions.

Plan-related expenses

The amount included this year for plan-related expenses is $1,170,908.

Loads

None assumed.

Methods

Valuation date

First day of plan year

Funding target

Present value of accrued benefits as required by regulations under IRC §430

Target normal cost

Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.

SCHEDULE SB ATTACHMENTS

Decrement timing

The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.

Actuarial value of assets

Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22) . The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2023 plan year.)

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Funding policy

The company's funding policy is to contribute an amount at least equal to the minimum required contribution under ERISA. Virtua may increase its contribution above the minimum, if appropriate to its cash position and the plan's funded status.

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Virtua and, based on that review, is not aware of any significant benefits required to be valued that were not.

SCHEDULE SB ATTACHMENTS

Sources of Data and Other Information

Virtua and its third-party administrator furnished participant data as of January 1, 2025 and information on plan provisions. Information on assets and contributions was supplied by the trustee. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data was not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. In consultation with Virtua, the following assumptions were made for missing or apparently inconsistent data elements:

- Missing forms of payment for retirees were assumed to be a single life annuity.
- Where applicable, the following items were updated from the administrator's data based on information in the payment register: valuation status, pension amount, retirement date.

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

Assumptions Rationale - Significant Economic Assumptions

Discount rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
Rates of increase in:	
Compensation	Assumed compensation increases were selected by the plan sponsor and reflect the current market environment on the measurement date.
National average wages (NAW) (e.g., Social Security wage bases)	The assumed NAW was selected by the plan sponsor and reflects the current market environment on the measurement date.
Increases in statutory limits (CPI)	The assumed CPI is selected by the plan sponsor and reflects the current market environment on the measurement date.
Plan-related expenses	Plan-related expenses are estimated by determining the expected actual expenses for the coming year, reflecting items like PBGC premiums.

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).

SCHEDULE SB ATTACHMENTS

Termination	Termination rates are based on an experience study conducted in 2021.
Retirement	Retirement rates are based on an experience study conducted in 2021.

Source of Prescribed Methods

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

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation	• The interest rates used to calculate the funding target and target normal cost were updated to use the Full Yield Curve as of the month preceding the valuation date.

Plan Name	**Virtua Pension Equity Plan**
Plan Sponsor EIN	**22-3524939**
ERISA Plan #	**001**
Plan Year Ending	**December 31, 2025**

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

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

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

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **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
VIRTUA PENSION EQUITY PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
VIRTUA HEALTH

D Employer Identification Number (EIN)
22-3524939

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

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

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	103,002,859
b Actuarial value	**2b**	102,307,335

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	343	44,023,636	44,023,636
b For terminated vested participants	1,292	36,487,485	36,487,485
c For active participants	891	28,206,031	28,206,031
d Total	2,526	108,717,152	108,717,152

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**	5.32%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	1,170,908
c Target normal cost	**6c**	1,170,908

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 Jason Rohrer, FSA, EA JDR — 9/12/2026

Signature of actuary — Date

Jason Rohrer, FSA, EA — 2607974

Type or print name of actuary — Most recent enrollment number

Willis Towers Watson US LLC — 215-246-6000

Firm name — Telephone number (including area code)

1735 Market Street
Floor 4
Philadelphia PA 19103-7501

Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	13,929,593
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	4,259,562
9	Amount remaining (line 7 minus line 8)	0	9,670,031
10	Interest on line 9 using prior year's actual return of 5.46 %	0	527,984
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		12,862,145
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.13 %		441,313
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		232,572
	c Total available at beginning of current plan year to add to prefunding balance		13,536,030
	d Portion of (c) to be added to prefunding balance		5,135,598
12	Other reductions in balances due to elections or deemed elections	0	4,462,881
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	10,870,732

Part III Funding Percentages

14	Funding target attainment percentage	14	84.10 %
15	Adjusted funding target attainment percentage	15	90.00 %
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	80.00 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ► 18(b)	0	18(c) 0

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

20 Quarterly contributions and liquidity shortfalls:

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

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] 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: %	2nd segment: %	3rd segment: %	[X] N/A, full yield curve used

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

22 Weighted average retirement age	**22**	63

23 Mortality table(s) (see instructions) [ ] Prescribed - combined [X] 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 [X] No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. [ ] Yes [X] 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. [X] Yes [ ] No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment [X] 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**	1,170,908
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	17,280,549	1,810,354
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**	2,981,262

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	4,259,564	4,259,564

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	0

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

a Total (excess, if any, of line 37 over line 36)	**38a**	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of January 1, 2025

See Statement of Actuarial Assumptions/Methods for retirement rates. The average retirement age for Line 22 was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table, as illustrated below.

(1)	(2)		(3)	(4)
Age	Retirement Rates		Percentage Expected to Retire	(1) * (3)
55	0.05	1.000	5.0%	2.750
56	0.05	0.950	4.8%	2.660
57	0.05	0.903	4.5%	2.572
58	0.05	0.857	4.3%	2.486
59	0.05	0.815	4.1%	2.403
60	0.07	0.774	5.4%	3.250
61	0.07	0.720	5.0%	3.073
62	0.12	0.669	8.0%	4.979
63	0.08	0.589	4.7%	2.968
64	0.10	0.542	5.4%	3.468
65	0.45	0.488	21.9%	14.263
66	0.30	0.268	8.0%	5.310
67	0.25	0.188	4.7%	3.145
68	0.15	0.141	2.1%	1.436
69	0.20	0.120	2.4%	1.652
70	1.00	0.096	9.6%	6.702
			100.0%	63.118

Average Retirement Age: **63**

Plan Name: Virtua Pension Equity Plan
EIN / PN: 22-3524939/001
Plan Sponsor: Virtua Health
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

• Applicable month	December 2024
• Interest rate basis	Full Yield Curve
• Effective interest rate	5.32%

Annual rates of increase

• Compensation:	N/A
• Future Social Security wage bases	N/A
• Statutory limits on compensation	3.00%

Demographic Assumptions

Mortality

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

SCHEDULE SB ATTACHMENTS

Termination

Rates varying by age and service

Representative Termination Rates

Percentage leaving during the year	
Attained Age	Rate
35 & Below	0.075
36 – 40	0.055
41 – 46	0.050
47 - 55	0.040

Disability

None.

Retirement

Rates varying by age, average age 63

Representative Retirement Rates

Percentage retiring during the year	
Attained Age	Rate
55 - 59	0.05
60 – 61	0.07
62	0.12
63	0.08
64	0.10
65	0.45
66	0.30
67	0.25
68	0.15
69	0.20
70+	1.00

Benefits commencing after age 65 reflect late retirement increases based on the UP84 Unisex mortality table and 7.50% interest

SCHEDULE SB ATTACHMENTS

Form of payment

Pension Equity Benefit

Assumption	Single	Married
Lump sum	100%	100%

Legacy Pension

Assumption	Single	Married
Life annuity	50%	30%
Lump Sum	50%	50%
Joint and 50% Survivor	0%	20%
Joint and 75% Survivor	0%	0%
Joint and 100% Survivor	0%	0%
10-year certain and continuous	0%	0%

Percent married

80%

Spouse age

Wife three years younger than husband

Covered pay

Prior year's pensionable earnings increased with salary assumptions.

Plan-related expenses

The amount included this year for plan-related expenses is $1,170,908.

Loads

None assumed.

Methods

Valuation date

First day of plan year

Funding target

Present value of accrued benefits as required by regulations under IRC §430

Target normal cost

Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.

SCHEDULE SB ATTACHMENTS

Decrement timing

The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.

Actuarial value of assets

Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22) . The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2023 plan year.)

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Funding policy

The company's funding policy is to contribute an amount at least equal to the minimum required contribution under ERISA. Virtua may increase its contribution above the minimum, if appropriate to its cash position and the plan's funded status.

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Virtua and, based on that review, is not aware of any significant benefits required to be valued that were not.

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Sources of Data and Other Information

Virtua and its third-party administrator furnished participant data as of January 1, 2025 and information on plan provisions. Information on assets and contributions was supplied by the trustee. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data was not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. In consultation with Virtua, the following assumptions were made for missing or apparently inconsistent data elements:

- Missing forms of payment for retirees were assumed to be a single life annuity.
- Where applicable, the following items were updated from the administrator's data based on information in the payment register: valuation status, pension amount, retirement date.

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

Assumptions Rationale - Significant Economic Assumptions

Discount rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
Rates of increase in:	
Compensation	Assumed compensation increases were selected by the plan sponsor and reflect the current market environment on the measurement date.
National average wages (NAW) (e.g., Social Security wage bases)	The assumed NAW was selected by the plan sponsor and reflects the current market environment on the measurement date.
Increases in statutory limits (CPI)	The assumed CPI is selected by the plan sponsor and reflects the current market environment on the measurement date.
Plan-related expenses	Plan-related expenses are estimated by determining the expected actual expenses for the coming year, reflecting items like PBGC premiums.

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).

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Termination	Termination rates are based on an experience study conducted in 2021.
Retirement	Retirement rates are based on an experience study conducted in 2021.

Source of Prescribed Methods

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

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation	• The interest rates used to calculate the funding target and target normal cost were updated to use the Full Yield Curve as of the month preceding the valuation date.

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Schedule SB, Part V
Summary of Plan Provisions

Plan Provisions

Effective date	January 1, 2003
Eligibility for Participation	Participants as of December 31, 2003 shall continue to participate in the plan. No new employees will become eligible for the plan after December 31, 2003. Effective August 31, 2003, JNESO union employees no longer accrue benefits under the plan. Effective December 31, 2003, HPAE union employees who have not attained age 50 with 10 years of benefit service no longer accrue benefits under the plan. Effective January 1, 2004, nonunion employees who have not attained age 50 with 10 years of benefit service as of December 31, 2003 no longer accrue benefits under the plan. Nonunion employees who have attained age 50 with 10 years of benefit service as of December 31, 2003 continue to accrue benefits under the pension equity formula. Effective January 1, 2004, HPAE union employees who attained age 50 with 10 years of benefit service as of December 31, 2003 and have chosen so, continue accruing benefits under the pension equity formula. Effective December 31, 2019 non-union employees no longer accrue benefits under the plan.

Definitions

Plan year	Twelve-month period beginning on January 1.
Year of Service	A 12-consecutive-month period coincident with the Plan Year during which not less than 880 hours of service have been worked. For service prior to January 1, 2003, as determined under the plan provisions in effect prior to that date.

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Year of Benefit Service

All service during Plan Years after December 31, 2002 for which the Participant is eligible for pension equity benefit accruals and completes the following Hours of Service:

Hours of Service	Years of Benefit Service
Less than 441	0
441 to 879	0.5 year
880 or more	1 year

For purposes of determining a participant's Pension Equity Benefit Percentage, all Years of Credited Service earned under the prior provisions in effect as of December 31, 2002 are included as Benefit Service.

Compensation

W-2 wages received from a participating employer, excluding PTO sellback. Compensation considered shall be limited to the dollar limitation described in Code Section 401(a)(17), as indexed by the cost-of-living adjustment factor prescribed under Code Section 415(d).

Average Compensation

The average Compensation of a Participant for the 60 full consecutive months out of the last 180 (or fewer) for which the average is the highest.

Applicable Interest Rate

The annual rate of interest as required under Code Section 417(e) determined as of the second calendar month preceding the first day of the Plan Year during which the annuity commencement date occurs.

Applicable Mortality Table

1994 Group Annuity Reserving Table, or such other mortality table specified by the Internal Revenue Service pursuant to Code Section 417(e)(3)(a)(ii)(I).

For annuity commencement date on or after January 1, 2008, the applicable mortality table specified under Code Section 417(e)(3)(b).

Interest Credits

Interest Credits on the balance of the participant's account shall be added to a participant's account beginning with the participant's date of termination, and shall continue to be added to the participant's account until the participant's annuity commencement

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	date. Interest Credits shall be based on an annual interest rate of the lesser of three percent (3%) or the Applicable Interest Rate.
Pension Equity Benefit Percentages	1% for each Year of Benefit of Service after January 1, 2003 while the participant is under age 50 or has fewer than 15 Years of Benefit Service; and 2% for each Year of Benefit Service after January 1, 2003 while the participant has attained age 50 and has at least 15 Years of Benefit Service. Percentage is based on age and Benefit Service as of the end of the Plan Year and is granted only if the participant is eligible for pension equity benefit accruals.
Account Balance	As of any determination date, the Account Balance of a participant shall equal the lump sum that is the product of the sum of the Participant's Pension Equity Benefit Percentages, and the Participant's Average Compensation.
Frozen Accrued Benefit	Accrued benefit as of December 31, 2002 under the provisions then in effect.
Pension Equity Accrued Benefit	The product of (1) and (2), divided by (3) where: (1) is the projected Account Balance at Normal Retirement Date (based on Average Compensation at determination date and assuming the participant continues to be an employee until Normal Retirement Date, if employee's benefit is not frozen; based on Average Compensation and benefit accruals ceasing at the freeze date, if employee's benefit is frozen) (2) is a fraction, the numerator of which is the participant's number of Years of Benefit Service from January 1, 2003 to the participant's termination of employment and the denominator of which is the participant's number of Years of Benefit Service from January 1, 2003 to the participant's Normal Retirement Date; and (3) is the single life annuity factor at Normal Retirement Date based on the Applicable Interest Rate and the Applicable Mortality Table.

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Accrued Benefit	The total Accrued Benefit equals the Pension Equity Accrued Benefit plus the Frozen Accrued Benefit.

Eligibility for Benefits

Normal retirement	For West Jersey participants employed prior to January 1, 2003, the first of the month following or coinciding with attainment of age 65. For all other participants, the first of the month following or coinciding with the later of the date on which the participant attains age 65 or the fifth anniversary of employment.
Early retirement	The first of the month following or coincident with the date on which the Participant attains age 55 and completes five Years of Service.
Postponed retirement	The first of any month after Normal Retirement Date.
Vested termination	Five Years of Service.
Disability	Participant is totally and permanently disabled.
Preretirement death benefit	A married participant who dies with at least five Years of Service.

Benefits Paid Upon the Following Events

Normal retirement	The greater of the actuarial equivalent of the participant's Pension Equity Accrued Benefit or the Account Balance with applicable Interest Credits, plus the Frozen Accrued Benefit.
Early retirement	The greater of the actuarial equivalent of the participant's Pension Equity Accrued Benefit or the Account Balance with applicable Interest Credits, both determined as of the Early Retirement Date, plus the Frozen Accrued Benefit, reduced for early retirement under the provisions in effect on December 31, 2002.
Postponed retirement	The greater of the actuarial equivalent of the participant's Pension Equity Accrued Benefit or the Account Balance with applicable Interest Credits, both determined as of the Delayed Retirement Date, plus the Frozen Accrued Benefit.

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Vested termination	The accrued Normal Retirement Benefit commencing at age 65. The greater of the actuarial equivalent of the participant's Pension Equity Accrued Benefit or the Account Balance with applicable Interest Credits, both determined as of an earlier date, may be paid, plus the Frozen Accrued Benefit payable as a deferred vested benefit reduced for early payment under the plan provisions in effect on December 31, 2002.
Disablement	Benefit accrued as if service retained without pay increased during period of disability; payable as Early Retirement Benefit or Termination Benefit at commencement as described above.
Preretirement death	The accrued Normal Retirement Benefit commencing at age 65. The greater of the actuarial equivalent of the participant's Pension Equity Accrued Benefit or the Account Balance with applicable Interest Credits may be paid, plus the Frozen Accrued Benefit payable as a preretirement spouse's benefit under the plan provisions in effect on December 31, 2002.

Other Plan Provisions

Forms of payment	A Participant may elect to receive the Pension Equity Accrued Benefit in the following optional forms: Single Life Annuity 50%, 75% and 100% Joint and Survivor Annuity Single Life Annuity with 120 months certain Lump sum Terms in effect on December 31, 2002 apply to the Frozen Accrued Benefit.
Annuity conversion factors	The conversion factors for optional forms of payment are determined using the 417(e)(3) Applicable Mortality Table and interest rates.

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Memorial Health Alliance Provisions

Plan Provisions

Effective date	January 1, 1968. Most recent amendment effective January 1, 2004.
Eligibility for Participation	The first day of the month coincident with or next following attainment of age 21 and completion of one year of service. Effective January 1, 1990, employees of Community Nursing Services and Burlington Geriatric Centers are eligible to participate in the plan. Effective January 1, 2003, benefits accrued under this formula were frozen. Effective January 1, 2004, HPAE union employees who had attained age 50 with 10 years of Benefit Service by December 31, 2003 and have so chosen, receive benefits under this formula retroactive to January 1, 2003.

Definitions

Plan year	Twelve-month period beginning on January 1.
Year of Service	A 12-consecutive-month period coincident with the Plan Year during which not less than 1,000 hours of service have been worked.
Credited Service	All service during Plan Years in which the Participant is credited with 1,000 or more hours of service with Partial Years of Service during the first and final Plan Years of employment for each calendar month in which the Participant completes one hour of service. Each such month shall count as 1/12 of a year. Credited service was frozen as of December 31, 2002, except for certain active HPAE union employees who attained both age 50 and 10 years of Benefit Service by December 31, 2003 and elected to receive benefits under this formula.
Vesting Service	All Years of Service for which the Participant is credited with 1,000 or more hours of service except those prior to the Plan Year during which the Participant attains age 18.
Break in Service	A 12-consecutive-month period during which a Participant completes less than 500 hours.

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Cancellation and Restoration of Service	Fewer than 500 hours of service in a Plan Year constitutes a one-year Break in Service for purposes of vesting and benefit accrual. Vesting and Credited Service and the accrued benefit will be restored if (a) the Participant completes one Vesting Year following re-employment and (b) the number of the consecutive Breaks in Service is less than the greater of the Participant's previous period of service or five years.
Compensation	W-2 wages received from a participating employer. Compensation considered shall be limited to the dollar limitation described in Code Section 401(a)(17), as indexed by the cost-of-living adjustment factor prescribed under Code Section 415(d).
Average Final Compensation	The average Compensation of a Participant for the 60 consecutive months out of the last 120 (or fewer) for which the average is the highest. No Compensation received after December 31, 2002 will be recognized in the calculation of Average Final Compensation for participants whose benefit is frozen as of that date.
Covered Compensation	The 35-year average of the taxable wage bases ending in the year in which the Participant attains Social Security Normal Retirement Age. Covered Compensation was frozen as of December 31, 2002 for participants whose benefit is frozen as of that date.

Eligibility for Benefits

Normal retirement	The first of the month following or coinciding with the later of the date on which the Participant attains age 65 or the fifth anniversary of employment.
Early retirement	The first of the month following or coincident with the date on which the Participant attains age 55 and completes five Years of Service.
Postponed retirement	The first of any month after Normal Retirement Date.
Vested termination	Five Years of Service.
Social Security Make-up Benefit (ESP)	Eligible Participants are those who were Participants as of December 31, 1983.

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Preretirement spouse benefit	A benefit payable to the spouse of a deceased Participant who had completed five Years of Service prior to the death.

Benefits Paid Upon the Following Events

Normal retirement	A monthly benefit equal to the sum of: 1% of Average Final Compensation up to Covered Compensation amount multiplied by Credited Service, up to 35 years. 1.5% of Average Final Compensation over the Covered Compensation amount multiplied by Credited Service, up to 35 years. 1.5% of Average Final Compensation multiplied by Credited Service above 35 years, up to 5 additional years.
Early retirement	The accrued Normal Retirement Benefit reduced ½% for each month by which the actual benefit commencement date precedes the Normal Retirement Date.
Postponed retirement	The benefit based on Average Final Compensation and Credited Service up to the date of actual retirement.
Vested termination	The accrued Normal Retirement Benefit commencing at age 65. Reduced benefits may be paid as early as age 55. The reduction is ½% for each month by which commencement precedes the Normal Retirement Date.
Social Security Make-up Benefit (ESP)	The benefit is payable on the first of the month following or coincident with the earlier of (i) age 65 or (ii) age 62 with five Years of Service. The amount of the benefit is the family Social Security benefit due to a one-year withdrawal from the Social Security system in 1983. The amount is reduced by 5/9% for each month that commencement of payments precedes the Participant's Normal Retirement Date.

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Preretirement spouse benefit	The benefit is 50% of the benefit that would have been otherwise payable to the Participant had the Participant survived to the earliest retirement age, elected a 50% Joint and Survivor Annuity form, and died the next day. The benefit is payable to the spouse on the first of the month following or coincident with the date upon which the Participant would have reached the earliest retirement age. In the case of death after attainment of the earliest retirement age, the benefit would become payable as of the first day of the month following death.
Postretirement spouse benefit	None, except as provided by the election of a joint and survivor option, with the spouse designated as beneficiary.
Disability benefit	Same as benefit payable at Early Retirement Date, except that years of disability are counted toward Credited Service (unless rendered after benefit was frozen) and Compensation is deemed to remain at the same rate in effect at the Participant's disability date (unless benefit frozen prior to disability).

Other Plan Provisions

Forms of payment	Single Life Annuity if unmarried, 50% Joint and Survivor Annuity if married.
Optional payment forms	A Participant may elect to receive the benefit in the following optional forms: (i) Single Life Annuity (ii) 50%, 75% and 100% Joint and Survivor Annuity (iii) Single Life Annuity with 120 months certain (iv) Lump sum
Annuity conversion factors	The conversion factors for optional forms of payment are determined using the greater of WTW 1971 Unisex mortality table set back 3 years for participants and beneficiaries, and an interest rate of 8%, and the 417(e)(3) Applicable Mortality Table and interest rates.

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West Jersey Health System Provisions in Effect Prior to January 1, 2003

Plan Provisions

Effective date

July 1, 1961. Most recent amendment effective December 31, 2002.

Eligibility for Participation

All employees on the first of the month coincident with or next following attainment of age 21 and completion of 880 hours of service subsequent to their date of hire. If the employee does not meet these requirements within the first 12-month period, the period for determining eligibility is the Plan Year. No employees become eligible after December 31, 2002. Effective December 31, 2002 benefits accrued under this formula were frozen.

Definitions

Plan year

Twelve-month period beginning on January 1.

Credited Service

Credited Service is granted for each Plan Year ending on or before December 31, 2002, according to the following schedule:

Hours of Service	Years of Benefit Service
Less than 441	0
441 to 879	0.5 year
880 or more	1 year

Compensation

W-2 earnings plus amounts contributed by plan participants to Tax Sheltered Annuities. Compensation considered shall be limited to the dollar limitation described in Code Section 401(a)(17), as indexed by the cost-of-living adjustment factor prescribed under Code Section 415(d). No compensation is considered after December 31, 2002.

Normal Retirement Date (NRD)

First of the month coincident with or next following attainment of age 65.

Covered Compensation

Thirty five-year average of the Social Security wage bases assuming that the participant is age 65 in the current year. Covered Compensation is frozen as of December 31, 2002.

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Normal Retirement Allowance	The benefit as of December 31, 1993 based upon the greater of the accrued benefit on that date and the benefit determined based upon the formula below using highest five-year average compensation, aggregate Credited Service as of December 31, 1993 and Covered Compensation of $22,716, plus For each Plan Year after December 31, 1993, and ending on or before December 31, 2002, in which the Participant's aggregate Credited Service is less than 35, 0.95% of Compensation not in excess of Covered Compensation plus 1.4% of Compensation in excess of Covered Compensation. For each Plan Year after December 31, 1993, and ending on or before December 31, 2002, in which the Participant's aggregate Credited Service is greater than 35, 1.1% of Compensation. Accruals for Plan Years after December 31, 1993, and ending on or before December 31, 2002, will be granted only if the Participant's Credited Service is greater than zero. The accruals under the formula were frozen as of December 31, 2002.
Preretirement Death Benefit	50% of the Normal Retirement Allowance appropriately reduced for early commencement of benefits and the 50% joint and survivor option that would have been paid to the Participant: from the first of the month following death if eligible for early retirement at death, assuming the Participant had retired and commenced payments on the first of the month of death under the 50% joint and survivor option with his spouse as the survivor; or from the earliest retirement age if not eligible for early retirement at death, assuming termination on the date of death, survival to the earliest retirement age and retirement having elected a 50% joint and survivor option with the spouse as the survivor.

Eligibility for Benefits

Normal retirement	Retire on NRD.
Early retirement	Retire before NRD and on or after both attaining age 55 and completing ten years of Credited Service.

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Postponed retirement	Retire after NRD.
Vested termination	Terminate for reasons other than death or retirement after completing five years of Credited Service.
Disability Retirement	Retire on or after NRD after receiving disability payments from an employer sponsored plan.
Preretirement death benefit	Die while employed and while otherwise eligible for deferred vested, early, normal, or delayed retirement benefits, with a surviving spouse.

Benefits Paid Upon the Following Events

Normal retirement	Monthly Normal Retirement Allowance determined as of NRD.
Early retirement	Monthly Normal Retirement Allowance determined as of early retirement date, reduced 5/9% for each of the first 60 months and 5/18% for each of the next 60 months that commencement of payments precedes the Participant's NRD.
Postponed retirement	Monthly Normal Retirement Allowance determined as of NRD, increased to be the actuarial equivalent as of the Participant's delayed retirement date, of the monthly Normal Retirement Allowance the Participant would have received on NRD or the monthly Normal Retirement Allowance determined as of delayed retirement date, if greater.
Vested termination	Monthly Normal Retirement Allowance determined as of termination date, reduced and payable as defined under Early Retirement if Participant terminates with ten or more years of Credited Service and elects early commencement.
Disability Retirement	Monthly Normal Retirement Allowance determined as of NRD, assuming Credited Service and Compensation remained level from the Plan Year preceding date of disability until NRD, but not beyond December 31, 2002.
Preretirement spouse benefit	Monthly Preretirement Death Benefit.

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Other Plan Provisions

Forms of payment	The normal form of benefit payment is a life annuity for single participants and an actuarially equivalent 50% joint and last survivor annuity for married participants. Optional forms are a three, five, ten or fifteen year certain and continuous annuity, a 50%, 66 2/3%, 75%, and 100% joint and last survivor annuity or lump sum.
Annuity Conversion Factors	The conversion factors for optional forms of payment are determined using the greater of WTW 1971 Unisex mortality table set back 3 years for participants and beneficiaries, and an interest rate of 8%, and the 417(e)(3) Applicable Mortality Table and interest rates.

Benefits Not Valued

All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Virtua and, based on that review, is not aware of any significant benefits required to be valued that were not.

The plan pays small benefits (with a present value up to $5,000 in a single lump sum payment. Such lumps sums are not explicitly valued as such; rather such participants benefits are valued using the benefit choice assumptions described above.

Maximum on Benefits and Pay

All benefits and compensation for any calendar year may not exceed the maximum limitations for that year as defined in the Code. The plan provides for increasing the statutory maximum limits automatically.

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum contributions. WTW is not aware of any future plan changes which are required to be reflected.

Changes in Plan Provisions Since Prior Year

Increases in the statutory limits on pay and benefits were reflected.

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Schedule SB, Line 26a
Schedule of Active Participant Data as of January 1, 2025

Attained Age	Attained Years of Credited Service[1] 0	1	2	3	4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	Total
Under 25	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35-39	0	0	0	0	0	0	0	0	0	0	0	0	0	0
40-44	0	0	0	0	0	0	0	0	16	5	0	0	0	21
45-49	0	0	0	0	0	0	0	4	39	29	4	0	0	76
50-54	0	0	0	0	0	1	2	5	52	64	34	3	0	161
55-59	0	0	0	0	0	0	4	1	53	52	44	46	0	200
60-64	0	0	0	0	0	0	1	0	60	68	51	101	0	281
65-69	0	0	0	0	0	0	0	1	24	44	25	37	0	131
70 & over	0	0	0	0	0	0	0	0	8	6	3	4	0	21
Total	0	0	0	0	0	1	7	11	252	268	161	191	0	891

Average:	Age	59	Number of Participants:	Fully vested	891	Males	161
	Service	29		Partially vested	0	Females	730

Census data as of January 1, 2025

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

Plan Name: Virtua Pension Equity Plan
EIN / PN: 22-3524939/001
Plan Sponsor: Virtua Health
Valuation Date: January 1, 2025

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2025	3,582,782	934,681	4,946,688	9,464,151
2026	2,473,242	1,757,847	4,766,902	8,997,991
2027	2,714,181	1,993,397	4,583,379	9,290,957
2028	2,791,556	2,228,103	4,399,765	9,419,424
2029	2,179,571	2,424,411	4,207,910	8,811,892
2030	2,126,287	2,586,674	4,006,710	8,719,671
2031	2,069,495	2,700,256	3,797,514	8,567,265
2032	1,915,777	2,781,559	3,578,491	8,275,827
2033	1,844,006	2,857,400	3,353,299	8,054,705
2034	1,733,589	2,923,203	3,126,539	7,783,331
2035	1,664,932	2,941,453	2,898,114	7,504,499
2036	1,605,297	2,932,478	2,671,684	7,209,459
2037	1,474,076	2,920,926	2,447,243	6,842,245
2038	1,434,121	2,887,676	2,226,789	6,548,586
2039	1,373,129	2,834,005	2,011,018	6,218,152
2040	1,339,686	2,768,698	1,802,808	5,911,192
2041	1,267,858	2,695,505	1,605,123	5,568,486
2042	1,198,622	2,609,109	1,418,207	5,225,938
2043	1,152,861	2,513,892	1,243,250	4,910,003
2044	1,098,002	2,412,580	1,081,170	4,591,752
2045	1,043,995	2,300,904	932,588	4,277,487
2046	987,277	2,183,488	797,798	3,968,563
2047	931,723	2,064,546	676,787	3,673,056
2048	872,612	1,941,216	569,272	3,383,100
2049	816,428	1,814,305	474,753	3,105,486
2050	760,917	1,686,540	392,566	2,840,023
2051	703,660	1,558,795	321,912	2,584,367
2052	646,780	1,431,992	261,871	2,340,643
2053	589,654	1,307,122	211,456	2,108,232

Plan Name: Virtua Pension Equity Plan
EIN / PN: 22-3524939/001
Plan Sponsor: Virtua Health
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2054	534,326	1,185,199	169,633	1,889,158
2055	480,434	1,067,216	135,355	1,683,005
2056	428,527	954,105	107,593	1,490,225
2057	379,104	846,700	85,355	1,311,159
2058	332,582	745,706	67,716	1,146,004
2059	289,297	651,683	53,849	994,829
2060	249,489	565,034	43,027	857,550
2061	213,293	485,981	34,627	733,901
2062	180,756	414,591	28,124	623,471
2063	151,833	350,781	23,082	525,696
2064	126,404	294,327	19,150	439,881
2065	104,291	244,887	16,050	365,228
2066	85,269	202,028	13,572	300,869
2067	69,081	165,242	11,553	245,876
2068	55,450	133,978	9,872	199,300
2069	44,090	107,668	8,443	160,201
2070	34,720	85,745	7,207	127,672
2071	27,071	67,653	6,127	100,851
2072	20,892	52,868	5,179	78,939
2073	15,953	40,905	4,346	61,204
2074	12,047	31,322	3,619	46,988

Plan Name: Virtua Pension Equity Plan
EIN / PN: 22-3524939/001
Plan Sponsor: Virtua Health
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32
Schedule of Amortization Bases
as of January 1, 2025

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1. Shortfall	01/01/2025	(4,309,046)	15.00000	(4,309,046)	(397,159)
2. Shortfall	01/01/2024	(3,914,158)	14.00000	(3,735,444)	(360,189)
3. Shortfall	01/01/2023	27,866,375	13.00000	25,325,039	2,567,702
Total				17,280,549	1,810,354

Plan Name: Virtua Pension Equity Plan
EIN / PN: 22-3524939/001
Plan Sponsor: Virtua Health
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of January 1, 2025

See Statement of Actuarial Assumptions/Methods for retirement rates. The average retirement age for Line 22 was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table, as illustrated below.

(1)	(2)		(3)	(4)
Age	Retirement Rates		Percentage Expected to Retire	(1) * (3)
55	0.05	1.000	5.0%	2.750
56	0.05	0.950	4.8%	2.660
57	0.05	0.903	4.5%	2.572
58	0.05	0.857	4.3%	2.486
59	0.05	0.815	4.1%	2.403
60	0.07	0.774	5.4%	3.250
61	0.07	0.720	5.0%	3.073
62	0.12	0.669	8.0%	4.979
63	0.08	0.589	4.7%	2.968
64	0.10	0.542	5.4%	3.468
65	0.45	0.488	21.9%	14.263
66	0.30	0.268	8.0%	5.310
67	0.25	0.188	4.7%	3.145
68	0.15	0.141	2.1%	1.436
69	0.20	0.120	2.4%	1.652
70	1.00	0.096	9.6%	6.702
			100.0%	63.118

Average Retirement Age: **63**

Plan Name: Virtua Pension Equity Plan
EIN / PN: 22-3524939/001
Plan Sponsor: Virtua Health
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

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
2025	3,582,782	934,681	4,946,688	9,464,151
2026	2,473,242	1,757,847	4,766,902	8,997,991
2027	2,714,181	1,993,397	4,583,379	9,290,957
2028	2,791,556	2,228,103	4,399,765	9,419,424
2029	2,179,571	2,424,411	4,207,910	8,811,892
2030	2,126,287	2,586,674	4,006,710	8,719,671
2031	2,069,495	2,700,256	3,797,514	8,567,265
2032	1,915,777	2,781,559	3,578,491	8,275,827
2033	1,844,006	2,857,400	3,353,299	8,054,705
2034	1,733,589	2,923,203	3,126,539	7,783,331
2035	1,664,932	2,941,453	2,898,114	7,504,499
2036	1,605,297	2,932,478	2,671,684	7,209,459
2037	1,474,076	2,920,926	2,447,243	6,842,245
2038	1,434,121	2,887,676	2,226,789	6,548,586
2039	1,373,129	2,834,005	2,011,018	6,218,152
2040	1,339,686	2,768,698	1,802,808	5,911,192
2041	1,267,858	2,695,505	1,605,123	5,568,486
2042	1,198,622	2,609,109	1,418,207	5,225,938
2043	1,152,861	2,513,892	1,243,250	4,910,003
2044	1,098,002	2,412,580	1,081,170	4,591,752
2045	1,043,995	2,300,904	932,588	4,277,487
2046	987,277	2,183,488	797,798	3,968,563
2047	931,723	2,064,546	676,787	3,673,056
2048	872,612	1,941,216	569,272	3,383,100
2049	816,428	1,814,305	474,753	3,105,486
2050	760,917	1,686,540	392,566	2,840,023
2051	703,660	1,558,795	321,912	2,584,367
2052	646,780	1,431,992	261,871	2,340,643
2053	589,654	1,307,122	211,456	2,108,232

Plan Name: Virtua Pension Equity Plan
EIN / PN: 22-3524939/001
Plan Sponsor: Virtua Health
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2054	534,326	1,185,199	169,633	1,889,158
2055	480,434	1,067,216	135,355	1,683,005
2056	428,527	954,105	107,593	1,490,225
2057	379,104	846,700	85,355	1,311,159
2058	332,582	745,706	67,716	1,146,004
2059	289,297	651,683	53,849	994,829
2060	249,489	565,034	43,027	857,550
2061	213,293	485,981	34,627	733,901
2062	180,756	414,591	28,124	623,471
2063	151,833	350,781	23,082	525,696
2064	126,404	294,327	19,150	439,881
2065	104,291	244,887	16,050	365,228
2066	85,269	202,028	13,572	300,869
2067	69,081	165,242	11,553	245,876
2068	55,450	133,978	9,872	199,300
2069	44,090	107,668	8,443	160,201
2070	34,720	85,745	7,207	127,672
2071	27,071	67,653	6,127	100,851
2072	20,892	52,868	5,179	78,939
2073	15,953	40,905	4,346	61,204
2074	12,047	31,322	3,619	46,988

Plan Name: Virtua Pension Equity Plan
EIN / PN: 22-3524939/001
Plan Sponsor: Virtua Health
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Summary of Plan Provisions

Plan Provisions

Effective date	January 1, 2003
Eligibility for Participation	Participants as of December 31, 2003 shall continue to participate in the plan. No new employees will become eligible for the plan after December 31, 2003. Effective August 31, 2003, JNESO union employees no longer accrue benefits under the plan. Effective December 31, 2003, HPAE union employees who have not attained age 50 with 10 years of benefit service no longer accrue benefits under the plan. Effective January 1, 2004, nonunion employees who have not attained age 50 with 10 years of benefit service as of December 31, 2003 no longer accrue benefits under the plan. Nonunion employees who have attained age 50 with 10 years of benefit service as of December 31, 2003 continue to accrue benefits under the pension equity formula. Effective January 1, 2004, HPAE union employees who attained age 50 with 10 years of benefit service as of December 31, 2003 and have chosen so, continue accruing benefits under the pension equity formula. Effective December 31, 2019 non-union employees no longer accrue benefits under the plan.

Definitions

Plan year	Twelve-month period beginning on January 1.
Year of Service	A 12-consecutive-month period coincident with the Plan Year during which not less than 880 hours of service have been worked. For service prior to January 1, 2003, as determined under the plan provisions in effect prior to that date.

SCHEDULE SB ATTACHMENTS

Year of Benefit Service

All service during Plan Years after December 31, 2002 for which the Participant is eligible for pension equity benefit accruals and completes the following Hours of Service:

Hours of Service	Years of Benefit Service
Less than 441	0
441 to 879	0.5 year
880 or more	1 year

For purposes of determining a participant's Pension Equity Benefit Percentage, all Years of Credited Service earned under the prior provisions in effect as of December 31, 2002 are included as Benefit Service.

Compensation

W-2 wages received from a participating employer, excluding PTO sellback. Compensation considered shall be limited to the dollar limitation described in Code Section 401(a)(17), as indexed by the cost-of-living adjustment factor prescribed under Code Section 415(d).

Average Compensation

The average Compensation of a Participant for the 60 full consecutive months out of the last 180 (or fewer) for which the average is the highest.

Applicable Interest Rate

The annual rate of interest as required under Code Section 417(e) determined as of the second calendar month preceding the first day of the Plan Year during which the annuity commencement date occurs.

Applicable Mortality Table

1994 Group Annuity Reserving Table, or such other mortality table specified by the Internal Revenue Service pursuant to Code Section 417(e)(3)(a)(ii)(I).

For annuity commencement date on or after January 1, 2008, the applicable mortality table specified under Code Section 417(e)(3)(b).

Interest Credits

Interest Credits on the balance of the participant's account shall be added to a participant's account beginning with the participant's date of termination, and shall continue to be added to the participant's account until the participant's annuity commencement

SCHEDULE SB ATTACHMENTS

	date. Interest Credits shall be based on an annual interest rate of the lesser of three percent (3%) or the Applicable Interest Rate.
Pension Equity Benefit Percentages	1% for each Year of Benefit of Service after January 1, 2003 while the participant is under age 50 or has fewer than 15 Years of Benefit Service; and 2% for each Year of Benefit Service after January 1, 2003 while the participant has attained age 50 and has at least 15 Years of Benefit Service. Percentage is based on age and Benefit Service as of the end of the Plan Year and is granted only if the participant is eligible for pension equity benefit accruals.
Account Balance	As of any determination date, the Account Balance of a participant shall equal the lump sum that is the product of the sum of the Participant's Pension Equity Benefit Percentages, and the Participant's Average Compensation.
Frozen Accrued Benefit	Accrued benefit as of December 31, 2002 under the provisions then in effect.
Pension Equity Accrued Benefit	The product of (1) and (2), divided by (3) where: (1) is the projected Account Balance at Normal Retirement Date (based on Average Compensation at determination date and assuming the participant continues to be an employee until Normal Retirement Date, if employee's benefit is not frozen; based on Average Compensation and benefit accruals ceasing at the freeze date, if employee's benefit is frozen) (2) is a fraction, the numerator of which is the participant's number of Years of Benefit Service from January 1, 2003 to the participant's termination of employment and the denominator of which is the participant's number of Years of Benefit Service from January 1, 2003 to the participant's Normal Retirement Date; and (3) is the single life annuity factor at Normal Retirement Date based on the Applicable Interest Rate and the Applicable Mortality Table.

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Accrued Benefit	The total Accrued Benefit equals the Pension Equity Accrued Benefit plus the Frozen Accrued Benefit.

Eligibility for Benefits

Normal retirement	For West Jersey participants employed prior to January 1, 2003, the first of the month following or coinciding with attainment of age 65. For all other participants, the first of the month following or coinciding with the later of the date on which the participant attains age 65 or the fifth anniversary of employment.
Early retirement	The first of the month following or coincident with the date on which the Participant attains age 55 and completes five Years of Service.
Postponed retirement	The first of any month after Normal Retirement Date.
Vested termination	Five Years of Service.
Disability	Participant is totally and permanently disabled.
Preretirement death benefit	A married participant who dies with at least five Years of Service.

Benefits Paid Upon the Following Events

Normal retirement	The greater of the actuarial equivalent of the participant's Pension Equity Accrued Benefit or the Account Balance with applicable Interest Credits, plus the Frozen Accrued Benefit.
Early retirement	The greater of the actuarial equivalent of the participant's Pension Equity Accrued Benefit or the Account Balance with applicable Interest Credits, both determined as of the Early Retirement Date, plus the Frozen Accrued Benefit, reduced for early retirement under the provisions in effect on December 31, 2002.
Postponed retirement	The greater of the actuarial equivalent of the participant's Pension Equity Accrued Benefit or the Account Balance with applicable Interest Credits, both determined as of the Delayed Retirement Date, plus the Frozen Accrued Benefit.

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Vested termination	The accrued Normal Retirement Benefit commencing at age 65. The greater of the actuarial equivalent of the participant's Pension Equity Accrued Benefit or the Account Balance with applicable Interest Credits, both determined as of an earlier date, may be paid, plus the Frozen Accrued Benefit payable as a deferred vested benefit reduced for early payment under the plan provisions in effect on December 31, 2002.
Disablement	Benefit accrued as if service retained without pay increased during period of disability; payable as Early Retirement Benefit or Termination Benefit at commencement as described above.
Preretirement death	The accrued Normal Retirement Benefit commencing at age 65. The greater of the actuarial equivalent of the participant's Pension Equity Accrued Benefit or the Account Balance with applicable Interest Credits may be paid, plus the Frozen Accrued Benefit payable as a preretirement spouse's benefit under the plan provisions in effect on December 31, 2002.

Other Plan Provisions

Forms of payment	A Participant may elect to receive the Pension Equity Accrued Benefit in the following optional forms: Single Life Annuity 50%, 75% and 100% Joint and Survivor Annuity Single Life Annuity with 120 months certain Lump sum Terms in effect on December 31, 2002 apply to the Frozen Accrued Benefit.
Annuity conversion factors	The conversion factors for optional forms of payment are determined using the 417(e)(3) Applicable Mortality Table and interest rates.

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Memorial Health Alliance Provisions

Plan Provisions

Effective date	January 1, 1968. Most recent amendment effective January 1, 2004.
Eligibility for Participation	The first day of the month coincident with or next following attainment of age 21 and completion of one year of service. Effective January 1, 1990, employees of Community Nursing Services and Burlington Geriatric Centers are eligible to participate in the plan. Effective January 1, 2003, benefits accrued under this formula were frozen. Effective January 1, 2004, HPAE union employees who had attained age 50 with 10 years of Benefit Service by December 31, 2003 and have so chosen, receive benefits under this formula retroactive to January 1, 2003.

Definitions

Plan year	Twelve-month period beginning on January 1.
Year of Service	A 12-consecutive-month period coincident with the Plan Year during which not less than 1,000 hours of service have been worked.
Credited Service	All service during Plan Years in which the Participant is credited with 1,000 or more hours of service with Partial Years of Service during the first and final Plan Years of employment for each calendar month in which the Participant completes one hour of service. Each such month shall count as 1/12 of a year. Credited service was frozen as of December 31, 2002, except for certain active HPAE union employees who attained both age 50 and 10 years of Benefit Service by December 31, 2003 and elected to receive benefits under this formula.
Vesting Service	All Years of Service for which the Participant is credited with 1,000 or more hours of service except those prior to the Plan Year during which the Participant attains age 18.
Break in Service	A 12-consecutive-month period during which a Participant completes less than 500 hours.

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Cancellation and Restoration of Service	Fewer than 500 hours of service in a Plan Year constitutes a one-year Break in Service for purposes of vesting and benefit accrual. Vesting and Credited Service and the accrued benefit will be restored if (a) the Participant completes one Vesting Year following re-employment and (b) the number of the consecutive Breaks in Service is less than the greater of the Participant's previous period of service or five years.
Compensation	W-2 wages received from a participating employer. Compensation considered shall be limited to the dollar limitation described in Code Section 401(a)(17), as indexed by the cost-of-living adjustment factor prescribed under Code Section 415(d).
Average Final Compensation	The average Compensation of a Participant for the 60 consecutive months out of the last 120 (or fewer) for which the average is the highest. No Compensation received after December 31, 2002 will be recognized in the calculation of Average Final Compensation for participants whose benefit is frozen as of that date.
Covered Compensation	The 35-year average of the taxable wage bases ending in the year in which the Participant attains Social Security Normal Retirement Age. Covered Compensation was frozen as of December 31, 2002 for participants whose benefit is frozen as of that date.

Eligibility for Benefits

Normal retirement	The first of the month following or coinciding with the later of the date on which the Participant attains age 65 or the fifth anniversary of employment.
Early retirement	The first of the month following or coincident with the date on which the Participant attains age 55 and completes five Years of Service.
Postponed retirement	The first of any month after Normal Retirement Date.
Vested termination	Five Years of Service.
Social Security Make-up Benefit (ESP)	Eligible Participants are those who were Participants as of December 31, 1983.

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Preretirement spouse benefit	A benefit payable to the spouse of a deceased Participant who had completed five Years of Service prior to the death.

Benefits Paid Upon the Following Events

Normal retirement	A monthly benefit equal to the sum of: 1% of Average Final Compensation up to Covered Compensation amount multiplied by Credited Service, up to 35 years. 1.5% of Average Final Compensation over the Covered Compensation amount multiplied by Credited Service, up to 35 years. 1.5% of Average Final Compensation multiplied by Credited Service above 35 years, up to 5 additional years.
Early retirement	The accrued Normal Retirement Benefit reduced ½% for each month by which the actual benefit commencement date precedes the Normal Retirement Date.
Postponed retirement	The benefit based on Average Final Compensation and Credited Service up to the date of actual retirement.
Vested termination	The accrued Normal Retirement Benefit commencing at age 65. Reduced benefits may be paid as early as age 55. The reduction is ½% for each month by which commencement precedes the Normal Retirement Date.
Social Security Make-up Benefit (ESP)	The benefit is payable on the first of the month following or coincident with the earlier of (i) age 65 or (ii) age 62 with five Years of Service. The amount of the benefit is the family Social Security benefit due to a one-year withdrawal from the Social Security system in 1983. The amount is reduced by 5/9% for each month that commencement of payments precedes the Participant's Normal Retirement Date.

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Preretirement spouse benefit	The benefit is 50% of the benefit that would have been otherwise payable to the Participant had the Participant survived to the earliest retirement age, elected a 50% Joint and Survivor Annuity form, and died the next day. The benefit is payable to the spouse on the first of the month following or coincident with the date upon which the Participant would have reached the earliest retirement age. In the case of death after attainment of the earliest retirement age, the benefit would become payable as of the first day of the month following death.
Postretirement spouse benefit	None, except as provided by the election of a joint and survivor option, with the spouse designated as beneficiary.
Disability benefit	Same as benefit payable at Early Retirement Date, except that years of disability are counted toward Credited Service (unless rendered after benefit was frozen) and Compensation is deemed to remain at the same rate in effect at the Participant's disability date (unless benefit frozen prior to disability).

Other Plan Provisions

Forms of payment	Single Life Annuity if unmarried, 50% Joint and Survivor Annuity if married.
Optional payment forms	A Participant may elect to receive the benefit in the following optional forms: (i) Single Life Annuity (ii) 50%, 75% and 100% Joint and Survivor Annuity (iii) Single Life Annuity with 120 months certain (iv) Lump sum
Annuity conversion factors	The conversion factors for optional forms of payment are determined using the greater of WTW 1971 Unisex mortality table set back 3 years for participants and beneficiaries, and an interest rate of 8%, and the 417(e)(3) Applicable Mortality Table and interest rates.

SCHEDULE SB ATTACHMENTS

West Jersey Health System Provisions in Effect Prior to January 1, 2003

Plan Provisions

Effective date

July 1, 1961. Most recent amendment effective December 31, 2002.

Eligibility for Participation

All employees on the first of the month coincident with or next following attainment of age 21 and completion of 880 hours of service subsequent to their date of hire. If the employee does not meet these requirements within the first 12-month period, the period for determining eligibility is the Plan Year. No employees become eligible after December 31, 2002. Effective December 31, 2002 benefits accrued under this formula were frozen.

Definitions

Plan year

Twelve-month period beginning on January 1.

Credited Service

Credited Service is granted for each Plan Year ending on or before December 31, 2002, according to the following schedule:

Hours of Service	Years of Benefit Service
Less than 441	0
441 to 879	0.5 year
880 or more	1 year

Compensation

W-2 earnings plus amounts contributed by plan participants to Tax Sheltered Annuities. Compensation considered shall be limited to the dollar limitation described in Code Section 401(a)(17), as indexed by the cost-of-living adjustment factor prescribed under Code Section 415(d). No compensation is considered after December 31, 2002.

Normal Retirement Date (NRD)

First of the month coincident with or next following attainment of age 65.

Covered Compensation

Thirty five-year average of the Social Security wage bases assuming that the participant is age 65 in the current year. Covered Compensation is frozen as of December 31, 2002.

SCHEDULE SB ATTACHMENTS

Normal Retirement Allowance	The benefit as of December 31, 1993 based upon the greater of the accrued benefit on that date and the benefit determined based upon the formula below using highest five-year average compensation, aggregate Credited Service as of December 31, 1993 and Covered Compensation of $22,716, plus For each Plan Year after December 31, 1993, and ending on or before December 31, 2002, in which the Participant's aggregate Credited Service is less than 35, 0.95% of Compensation not in excess of Covered Compensation plus 1.4% of Compensation in excess of Covered Compensation. For each Plan Year after December 31, 1993, and ending on or before December 31, 2002, in which the Participant's aggregate Credited Service is greater than 35, 1.1% of Compensation. Accruals for Plan Years after December 31, 1993, and ending on or before December 31, 2002, will be granted only if the Participant's Credited Service is greater than zero. The accruals under the formula were frozen as of December 31, 2002.
Preretirement Death Benefit	50% of the Normal Retirement Allowance appropriately reduced for early commencement of benefits and the 50% joint and survivor option that would have been paid to the Participant: from the first of the month following death if eligible for early retirement at death, assuming the Participant had retired and commenced payments on the first of the month of death under the 50% joint and survivor option with his spouse as the survivor; or from the earliest retirement age if not eligible for early retirement at death, assuming termination on the date of death, survival to the earliest retirement age and retirement having elected a 50% joint and survivor option with the spouse as the survivor.

Eligibility for Benefits

Normal retirement	Retire on NRD.
Early retirement	Retire before NRD and on or after both attaining age 55 and completing ten years of Credited Service.

SCHEDULE SB ATTACHMENTS

Postponed retirement	Retire after NRD.
Vested termination	Terminate for reasons other than death or retirement after completing five years of Credited Service.
Disability Retirement	Retire on or after NRD after receiving disability payments from an employer sponsored plan.
Preretirement death benefit	Die while employed and while otherwise eligible for deferred vested, early, normal, or delayed retirement benefits, with a surviving spouse.

Benefits Paid Upon the Following Events

Normal retirement	Monthly Normal Retirement Allowance determined as of NRD.
Early retirement	Monthly Normal Retirement Allowance determined as of early retirement date, reduced 5/9% for each of the first 60 months and 5/18% for each of the next 60 months that commencement of payments precedes the Participant's NRD.
Postponed retirement	Monthly Normal Retirement Allowance determined as of NRD, increased to be the actuarial equivalent as of the Participant's delayed retirement date, of the monthly Normal Retirement Allowance the Participant would have received on NRD or the monthly Normal Retirement Allowance determined as of delayed retirement date, if greater.
Vested termination	Monthly Normal Retirement Allowance determined as of termination date, reduced and payable as defined under Early Retirement if Participant terminates with ten or more years of Credited Service and elects early commencement.
Disability Retirement	Monthly Normal Retirement Allowance determined as of NRD, assuming Credited Service and Compensation remained level from the Plan Year preceding date of disability until NRD, but not beyond December 31, 2002.
Preretirement spouse benefit	Monthly Preretirement Death Benefit.

SCHEDULE SB ATTACHMENTS

Other Plan Provisions

Forms of payment	The normal form of benefit payment is a life annuity for single participants and an actuarially equivalent 50% joint and last survivor annuity for married participants. Optional forms are a three, five, ten or fifteen year certain and continuous annuity, a 50%, 66 2/3%, 75%, and 100% joint and last survivor annuity or lump sum.
Annuity Conversion Factors	The conversion factors for optional forms of payment are determined using the greater of WTW 1971 Unisex mortality table set back 3 years for participants and beneficiaries, and an interest rate of 8%, and the 417(e)(3) Applicable Mortality Table and interest rates.

Benefits Not Valued

All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Virtua and, based on that review, is not aware of any significant benefits required to be valued that were not.

The plan pays small benefits (with a present value up to $5,000 in a single lump sum payment. Such lumps sums are not explicitly valued as such; rather such participants benefits are valued using the benefit choice assumptions described above.

Maximum on Benefits and Pay

All benefits and compensation for any calendar year may not exceed the maximum limitations for that year as defined in the Code. The plan provides for increasing the statutory maximum limits automatically.

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum contributions. WTW is not aware of any future plan changes which are required to be reflected.

Changes in Plan Provisions Since Prior Year

Increases in the statutory limits on pay and benefits were reflected.

Plan Name	**Virtua Pension Equity Plan**
Plan Sponsor EIN	**22-3524939**
ERISA Plan #	**001**
Plan Year Ending	**December 31, 2025**

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

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

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32
Schedule of Amortization Bases
as of January 1, 2025

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1. Shortfall	01/01/2025	(4,309,046)	15.00000	(4,309,046)	(397,159)
2. Shortfall	01/01/2024	(3,914,158)	14.00000	(3,735,444)	(360,189)
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