The Protecting Local Government Retirement and Benefits Act (PA 202 of 2017) Health Care (OPEB) Report

| Enter Local Unit Name | Meridian Charter Township | Instructions: For a list of detailed instructions on how to |
|---|-------------------------------------|---|
| Enter Six-Digit Municode | 331100 | complete and submit this form, visit |
| Unit Type | Township | michigan.gov/LocalRetirementReporting. |
| Fiscal Year End Month | December | |
| Fiscal Year (four-digit year only, e.g. 2019) | 2019 | |
| Contact Name (Chief Administrative Officer) | Miriam Mattison | Questions: For questions, please email |
| Title if not CAO | Finance Director | LocalRetirementReporting@michigan.gov. Return this |
| CAO (or designee) Email Address | mattison@meridian.mi.us | original Excel file. Do not submit a scanned image or PDF. |
| Contact Telephone Number | 517.853.4104 | |
| | | |
| OPEB System Name (not division) 1 | Other Post Employment Benefit Plans | If your OPEB system is separated by divisions, you would |
| OPEB System Name (not division) 2 | | only enter one system. For example, one could have |
| OPEB System Name (not division) 3 | | different divisions of the same system for union and non- |
| OPEB System Name (not division) 4 | | union employees. However, these would be only one system |
| OPEB System Name (not division) 5 | | and should be reported as such on this form. |

| Line | Descriptive Information | Source of Data | System 1 | System 2 | System 3 | System 4 | System 5 |
|------|--|---|--------------------|----------|----------|----------|----------|
| 1 | Is this unit a primary unit (County, Township, City, Village)? | Calculated | YES | YES | YES | YES | YES |
| | Provide the name of your retirement health care system | | Other Post | | | | |
| 2 | Provide the name of your retirement health care system | Calculated from above | Employment Benefit | | | | |
| 3 | Financial Information | | | | | | |
| 4 | Enter retirement health care system's assets (system fiduciary net position ending) | Most Recent Audit Report | 6,024,276 | | | | |
| 5 | Enter retirement health care system's liabilities (total OPEB liability) | Most Recent Audit Report | 6,800,809 | | | | |
| 6 | Funded ratio | Calculated | 88.6% | | | | |
| 7 | Actuarially determined contribution (ADC) | Most Recent Audit Report | 207,005 | | | | |
| 7a | Do the financial statements include an ADC calculated in compliance with Numbered Letter 2018-3? | Most Recent Audit Report | YES | | | | |
| 8 | Governmental Fund Revenues | Most Recent Audit Report | 29,024,935 | | | | |
| 9 | All systems combined ADC/Governmental fund revenues | Calculated | 0.7% | | | | |
| 10 | Membership | | | | | | |
| 11 | Indicate number of active members | Most Recent Actuarial Funding Valuation | 73 | | | | |
| 12 | Indicate number of inactive members | Most Recent Actuarial Funding Valuation | 34 | | | | |
| 13 | Indicate number of retirees and beneficiaries | Most Recent Actuarial Funding Valuation | 29 | | | | |
| 14 | Provide the amount of premiums paid on behalf of the retirants | Most Recent Audit Report or Accounting Records | 136,274 | | | | |
| 15 | Investment Performance | | | | | | |
| 16 | Enter actual rate of return - prior 1-year period | Most Recent Actuarial Funding Valuation or System | | | | | |
| 10 | Enter decadrate of return prior 1 year period | Investment Provider | 14.10% | | | | |
| 17 | Enter actual rate of return - prior 5-year period | Most Recent Actuarial Funding Valuation or System | | | | | |
| 1, | ancer decade rate of return prior 5 year period | Investment Provider | | | | | |
| 18 | Enter actual rate of return - prior 10-year period | Most Recent Actuarial Funding Valuation or System | | | | | |
| | | Investment Provider | | | | | |
| 19 | Actuarial Assumptions | | | | | | |
| 20 | Assumed Rate of Investment Return | Most Recent Actuarial Funding Valuation | 5.00% | | | | |
| 21 | Enter discount rate | Most Recent Actuarial Funding Valuation | 5.00% | | | | |
| 22 | Amortization method utilized for funding the system's unfunded actuarial accrued liability, if any | Most Recent Actuarial Funding Valuation | Level Dollar | | | | |
| 23 | Amortization period utilized for funding the system's unfunded actuarial accrued liability, if any | Most Recent Actuarial Funding Valuation | 30 | | | | |
| 24 | Is each division within the system closed to new employees? | Most Recent Actuarial Funding Valuation | No | | | | |
| 25 | Health care inflation assumption for the next year | Most Recent Actuarial Funding Valuation | 8.50% | | | | |
| 26 | Health care inflation assumption - Long-Term Trend Rate | Most Recent Actuarial Funding Valuation | 4.50% | | | | |
| | Uniform Assumptions | | | | | | |
| 28 | Enter retirement health care system's actuarial value of assets using uniform assumptions | Most Recent Actuarial Funding Valuation | 6,024,276 | | | | |
| 29 | Enter retirement health care system's actuarial accrued liabilities using uniform assumptions | Most Recent Actuarial Funding Valuation | 6,925,292 | | | | |
| 30 | Funded ratio using uniform assumptions | Calculated | 87.0% | | | | |
| 31 | Actuarially Determined Contribution (ADC) using uniform assumptions | Most Recent Actuarial Funding Valuation | 207,005 | | | | |
| | All systems combined ADC/Governmental fund revenues | Calculated | 0.7% | | | | |
| | Summary Report | | | | | | |
| 34 | Did the local government pay the retiree insurance premiums for the year? | Accounting Records | YES | | | | |
| 35 | Did the local government pay the normal cost for employees hired after June 30, 2018? | Accounting Records | YES | | | | |
| | | Primary unit triggers: Less than 40% funded AND greater | | | | | |
| 36 | Does this system trigger "underfunded status" as defined by PA 202 of 2017? | than 12% ARC/Governmental fund revenues. Non-Primary | | | | | |
| | | unit triggers: Less than 40% funded | NO | NO | NO | NO | NO |

| Require | ements (For your information, the following are requirements of P.A. 202 of 2017) |
|---------|---|
| Local u | nits must post the current year report on their website or in a public place |
| The loc | al unit of government must electronically submit the form to its governing body. |
| | nits must have had an actuarial experience study conducted by the plan actuary for each retirement at least every 5 years |
| | nits must have had a peer actuarial audit conducted by an actuary that is not the plan actuary OR |

By emailing this report to the Michigan Department of Treasury, the local unit of government acknowledges that this report is complete and accurate in all known respects.