Michigan Department of Treasury
Form 5572 (7-20)

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

Enter Local Government Name	Laketon Township
Enter Six-Digit Municode	611090
Unit Type	Township
Fiscal Year End Month	March
Fiscal Year (four-digit year only, e.g. 2019)	2025
Contact Name (Chief Administrative Officer)	Kim Arter
Title if not CAO	Township Supervisor
CAO (or designee) Email Address	karter@laketontwpmi.gov
Contact Telephone Number	231-744-2454

Instructions: For a list of detailed instructions on how to complete and submit this form, visit michigan.gov/LocalRetirementReporting.

Questions: For questions, please email LocalRetirementReporting@michigan.gov. Return this original Excel file. Do not submit a scanned image or PDF.

OPEB System Name (not division) 1	Township of Laketon Retiree Health Care Trust
OPEB System Name (not division) 2	
OPEB System Name (not division) 3	
OPEB System Name (not division) 4	
OPEB System Name (not division) 5	

If your OPEB system is separated by divisions, you would only enter one system. For example, one could have different divisions of the same system for union and non-union employees. However, these would be only one system 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 government (County, Township, City, Village)?	Calculated	YES	YES	YES	YES	YES
2	Provide the name of your retirement health care system	Calculated from above	Township of Laketon Retiree Health Care				
3	**Financial Information**						
4	Enter retirement health care system's assets (system fiduciary net position ending)	Most Recent Audit Report	172,315				
5	Enter retirement health care system's liabilities (total OPEB liability)	Most Recent Audit Report	847,395				
6	Funded ratio	Calculated	20.3%				
7	Actuarially determined contribution (ADC)	Most Recent Audit Report	122,832				
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	2,850,661				
9	All systems combined ADC/Governmental fund revenues	Calculated	4.3%				
10	**Membership**						
11	Indicate number of active members	Actuarial Funding Valuation used in Most Recent Audit Report	10				
12	Indicate number of inactive members	Actuarial Funding Valuation used in Most Recent Audit Report	-				
13	Indicate number of retirees and beneficiaries	Actuarial Funding Valuation used in Most Recent Audit Report	3				
14	Provide the amount of premiums paid on behalf of the retirants	Most Recent Audit Report or Accounting Records	11,471				
15	**Investment Performance**						
16	Enter actual rate of return - prior 1-year period	Actuarial Funding Valuation used in Most Recent Audit Report or System Investment Provider	11.21%				
17	Enter actual rate of return - prior 5-year period	Actuarial Funding Valuation used in Most Recent Audit Report or System Investment Provider					
18	Enter actual rate of return - prior 10-year period	Actuarial Funding Valuation used in Most Recent Audit Report or System Investment Provider					
19	**Actuarial Assumptions**						
20	Assumed Rate of Investment Return	Actuarial Funding Valuation used in Most Recent Audit Report	6.28%				
21	Enter discount rate	Actuarial Funding Valuation used in Most Recent Audit Report	5.32%				
22	Amortization method utilized for funding the system's unfunded actuarial accrued liability, if any	Actuarial Funding Valuation used in Most Recent Audit Report	Level Percent				
23	Amortization period utilized for funding the system's unfunded actuarial accrued liability, if any	Actuarial Funding Valuation used in Most Recent Audit Report	9				
24	Is each division within the system closed to new employees?	Actuarial Funding Valuation used in Most Recent Audit Report	No				
25	Health care inflation assumption for the next year	Actuarial Funding Valuation used in Most Recent Audit Report	5.75%				
26	Health care inflation assumption - Long-Term Trend Rate	Actuarial Funding Valuation used in Most Recent Audit Report	4.50%				
27	**Uniform Assumptions**						
28	Enter retirement health care system's actuarial value of assets using uniform assumptions	Actuarial Funding Valuation used in Most Recent Audit Report	172,315				
29	Enter retirement health care system's actuarial accrued liabilities using uniform assumptions	Actuarial Funding Valuation used in Most Recent Audit Report	896,905				
30	Funded ratio using uniform assumptions	Calculated	19.2%				
31	Actuarially Determined Contribution (ADC) using uniform assumptions	Actuarial Funding Valuation used in Most Recent Audit Report	143,945				
32	All systems combined ADC/Governmental fund revenues	Calculated	5.0%				
33	**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				
36	Does this system trigger "underfunded status" as defined by PA 202 of 2017?	**Primary government triggers:** Less than 40% funded AND greater than 12% ARC/Governmental fund revenues. **Non-Primary government** triggers: Less than 40% funded	NO	NO	NO	NO	NO

Requirements (For your information, the following are requirements of P.A. 202 of 2017)
Local governments must post the current year report on their website or in a public place
The local government must electronically submit the form to its governing body.
Local governments must have had an actuarial experience study conducted by the plan actuary for each retirement system at least every 5 years
Local governments must have had a peer actuarial audit conducted by an actuary that is not the plan actuary OR replace the plan actuary at least every 8 years.

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

Instructions for Michigan Form No. 5572

Local Government Retirement System Annual Report (Form No. 5572)

GENERAL INFORMATION

A. Report

This report must be filed for any local government that offers a retirement pension benefit plan and or a retirement health benefit plan. A "retirement pension benefit plan" means an allowance, right, accrued right, or other pension benefit payable under a defined benefit pension plan to a participant in the plan or a beneficiary of the participant. Defined contribution plans, such as a 401(k) or 403(b) plan, do not need to be reported.

As used in this document, a "retirement health benefit plan" means other postemployment benefits (OPEB) such as an annuity, allowance, payment, or contribution to, for, or on behalf of a former employee or a dependent of a former employee to pay for medical, dental, hearing, vision, healthcare premiums, or premiums for life, disability, long-term care, or similar welfare benefits for a former employee.

As used in this document, a "retirement system" means a retirement system, trust, plan, or reserve fund that a local government establishes, maintains, or participates in and that, by its express terms or as a result of surrounding circumstances, provides retirement pension benefits or retirement health benefits, or both.

Biennial filers are required to annually file this report using information from the most recent audit on record with the Department of Treasury (Treasury).

Discretely presented component unit (e.g. DDA, LDFA, etc.) information should not be presented with the primary government information and should be reported separately. Blended component units should be reported as part of the local government. As used in this document, "primary government" means a city, village, township, or county. A non-primary government includes a district, authority, commission, or a public body created by a primary government or a combination of primary governments.

NOTE:

- DO NOT alter the official report being provided. Altered reports will not be considered an acceptable submission.
- DO NOT place more than one amount in a box.
- DO NOT submit a scanned image or PDF.
- If applicable, complete both the "Pension Report" tab and the "Health Care (OPEB) Report" tab before submitting.

B. Filing

This report must be submitted electronically. Return the original Excel file. Chief Administrative Officers, or their designee, should send a single email to LocalRetirementReporting@michigan.gov and attach the completed report. The subject line of the email should be in the following format: **Retirement System Annual Report-2019, Local Government** (e.g. Retirement System Annual Report-2019, City of Lansing). Treasury will send a reply acknowledging receipt of the email.

The local government shall also electronically submit the report to the governing body (e.g. Board/Council) of the local government. Formal vote of approval or governing body resolution is not required for this report.

C. Due Date – September 30th

This report is due no later than six months after the end of your fiscal year. Failure to file within six months after the end of your fiscal year may result in a determination of underfunded status.

D. Public Inspection

Once available, this report must also be posted to the local government's website, or in a public place if the local government does not have a website.

E. Source(s) of Information

This report will be completed utilizing information from audit reports, actuarial funding valuations, system investment provider reports, and accounting records. Local governments that utilize the alternative method allowed by the GASB may continue to do so; however, these local governments must adjust the calculation of their retirement assets, liabilities, funded ratio, and ARC using Treasury's uniform assumptions if necessary.

REPORT INSTRUCTIONS

F. Local Government Identification

- **Local government name:** Enter the name of the local government filing.
- **Municode:** Enter your six-digit municipal code. **Note:** You can find your local municode by visiting the Treasury website at the following link: <u>Local Government Municodes</u>. Please enter the municode as a continuous six-digit string without dashes or spaces.
- **Fiscal Year:** Enter the four-digit year of the most recently completed fiscal year (20xx). Biennial filers are required to file each year.
- **Contact name:** Enter the contact name of your Chief Administrative Officer.