Form 5500

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

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

2018

Pension Benefit Guaranty Corporation			This Form is Open to Public Inspection					
Part I Annual Report Ide	ntification Information							
For calendar plan year 2018 or fiscal	plan year beginning 01/01/2018	and ending 12/31/20	18					
A This return/report is for:	a multiemployer plan	a multiemployer plan a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instruc						
	🛚 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	2 months)					
C If the plan is a collectively-bargain	ned plan, check here							
D Check box if filing under:	Form 5558	automatic extension	the DFVC program					
	special extension (enter description	n)						
Part II Basic Plan Informa	ation—enter all requested informati	ion						
1a Name of plan MOODY BIBLE INSTITUTE PENSION			1b Three-digit plan number (PN) ▶ 001					
			1c Effective date of plan 01/01/1964					
City or town, state or province, c	apt., suite no. and street, or P.O. Box country, and ZIP or foreign postal cod		2b Employer Identification Number (EIN) 36-2167792					
MOODY BIBLE INSTITUTE OF CHIC	CAGO		2c Plan Sponsor's telephone number 312-329-4297					
820 N LA SALLE DR CHICAGO, IL 60610-3214		SALLE DR D, IL 60610-3214	2d Business code (see instructions) 611000					
Caution: A penalty for the late or in	ncomplete filing of this return/repo	ort will be assessed unless reasonable cause is	s established.					
		I declare that I have examined this return/report, in/report, and to the best of my knowledge and bel						

SIGN HERE	Filed with authorized/valid electronic signature. Signature of plan administrator	10/10/2019 Date	PETER MILLER 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

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

Form 5500 (2018) v. 171027

Form 5500 (2018) Page 2 3b Administrator's EIN **3a** Plan administrator's name and address Same as Plan Sponsor 51-0184347 BENEFIT PLAN ADMINISTRATIVE COMMITTEE **3c** Administrator's telephone number 820 N LA SALLE DR CHICAGO, IL 60610-3214 312-329-4231 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, 4b EIN enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: 4d PN Sponsor's name Plan Name Total number of participants at the beginning of the plan year 1039 5 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). 219 a(1) Total number of active participants at the beginning of the plan year 6a(1)190 a(2) Total number of active participants at the end of the plan year 6a(2)464 Retired or separated participants receiving benefits..... 6b 295 Other retired or separated participants entitled to future benefits...... 6c 949 6d Subtotal. Add lines 6a(2), 6b, and 6c. Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. 6e 67 1016 Total. Add lines 6d and 6e. 6f Number of participants with account balances as of the end of the plan year (only defined contribution plans 6g complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested 6h Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)...... 8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions: 9a Plan funding arrangement (check all that apply) Plan benefit arrangement (check all that apply) (1) Insurance (1) Insurance (2) Code section 412(e)(3) insurance contracts (2) Code section 412(e)(3) insurance contracts (3) Trust (3) Trust (4) General assets of the sponsor (4) General assets of the sponsor Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions) a Pension Schedules **b** General Schedules

R (Retirement Plan Information) (1) (1) H (Financial Information) (2) I (Financial Information – Small Plan) MB (Multiemployer Defined Benefit Plan and Certain Money (2) (3) A (Insurance Information) Purchase Plan Actuarial Information) - signed by the plan actuary (4) C (Service Provider Information) X **D** (DFE/Participating Plan Information) (5) (3)SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary **G** (Financial Transaction Schedules) (6)

Form 5500 (2018)

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

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.)							
11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.)							
11c Enter the Receipt Confirmation Code for the 2018 Form M-1 annual report. If the plan was not required to file the 2018 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

2018

This Form is Open to Public Inspection

Fo	r calendar plan year 2018 or fiscal plan year beginning 01/01/2018		and endin	g 12/3	31/2018		
•	Round off amounts to nearest dollar.						
<u> </u>	Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonal	ble cause	is established	d.			
	Name of plan	l l	3 Three-dig	git			
	MOODY BIBLE INSTITUTE PENSION PLAN	L	plan num	ber (PN) •	001	
С	Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF	I	D Employer	Identific	ation Number (E	EIN)	
	MOODY BIBLE INSTITUTE OF CHICAGO			36-216	67792		
E .	Type of plan: X Single Multiple-A Multiple-B F Prior year plan	size:	100 or fewer	101-	500 X More th	an 500	
F	Part I Basic Information						
1	Enter the valuation date: Month 01 Day 01 Year 201	8					
2	Assets:						
	a Market value			. 2a		73535916	
	b Actuarial value			. 2b		68626610	
3	Funding target/participant count breakdown	` '	imber of cipants		sted Funding Target	(3) Total Funding Target	
	a For retired participants and beneficiaries receiving payment		525		34569711	34569711	
	b For terminated vested participants		297		9067569	9067569	
	C For active participants		219 19371633			19384486	
	d Total		1041	63008913		63021766	
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 at-risk status for fewer than five consecutive years and disregarding loading factor			4b			
5	Effective interest rate			5		5.64%	
6	Target normal cost			6		500000	
Sta	tement by Enrolled Actuary			•			
	To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into accou combination, offer my best estimate of anticipated experience under the plan.						
	SIGN						
	HERE				10/01/201	9	
	Signature of actuary				Date		
E	BRIAN DONOHUE		-		17-05482	2	
	Type or print name of actuary			Most	recent enrollme	nt number	
	OCTOBER THREE CONSULTING, LLC	312-878-2440					
2	Firm name 33 SOUTH WACKER DR		Te	lephone	number (includ	ing area code)	
S	SUITE 8350 CHICAGO, IL 60606						
	7.1107.00, 12.00000						
	Address of the firm						
	e actuary has not fully reflected any regulation or ruling promulgated under the statute in c	completing	g this schedule	e, check	the box and see	• <u> </u>	

Pa	art II	Begin	ning of Year	Carryov	er and Prefunding Ba	alances	i						_	
								(a) Carryover balance				(b) Prefunding balance		
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)								1505351 68389				6838905		
8			r use to offset prio	•	678666			0						
9	Amount r	emaining	(line 7 minus line	8)				8266	85			6838905		
10	Interest o	າn line 9 ເ	using prior year's	actual retur	rn of <u>16.84</u> %			. 139214					1151672	
11	11 Prior year's excess contributions to be added to prefunding balance:													
	a Presen	t value o	f excess contribut	ions (line 3	88a from prior year)							1991512		
	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												76933	
				-	dule SB, using prior year's								444007	
					r to add to prefunding balanc								114287	
	_				ance								2182732	
			•	.,									0	
12					or deemed elections		-			0			0	
					ine 10 + line 11d – line 12).				9658	99			7990577	
	art III		ding Percenta											
14	Funding t	target att	ainment percenta	ge								14	94.68%	
												15	108.89%	
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	95.24%				
17	17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage													
Р	art IV	Con	tributions and	d Liquid	ity Shortfalls								_	
18					ar by employer(s) and employer			1						
(1)	(a) Date MM-DD-YY		(b) Amount p employer		(c) Amount paid by employees	(a) Date (MM-DD-YYYY)						(c) Amount paid by employees		
0	2/01/2019)		160000	0	07/26/2019			140000				0	
0	2/26/2019)		160000	0	08/22/2019			700000		00		0	
0	3/26/2019)		160000	0)								
	4/26/2019			160000	0									
	5/21/2109			160000	0									
0	06/28/2019			160000	0	Tatala		40/h)			10(0)			
40	5.					Totals		18(b)		18000	00 18(c)		0	
19					uctions for small plan with a					- 1				
					num required contributions f				ŀ	19a 19b			0	
				•	usted to valuation date				ŀ	19b			0	
20			tions and liquidity		red contribution for current ye	ai aujuste	u to va	aluation u	ale	190			1663430	
20					e prior year?					l		X	Yes No	
	b If line 2	20a is "Ye	es," were required	l quarterly i	installments for the current y	ear made	in a	timely ma	nner?			X	Yes No	
	C If line 2	20a is "Ye	es," see instruction	ns and com	nplete the following table as	applicabl	e:						<u> </u>	
					Liquidity shortfall as of en			his plan y	rear ear					
		(1) 1st			(2) 2nd			(3)	3rd			(4) 4th		
			0		0				0				0	

-	art V	Assumnti	ione Head to	Determine	Funding 1	Target and Targ	net Norms	ol Cost				
21	Discount	-	ons osea to	Determine	i unung i	raiget and Tai	Jet Horring	11 0031				
	a Segment rates: 1st segment: 2nd segment: 3.92% 5.52%									N/A, full yield curve used		
	h Applie	eable month (or						6.29 %	21b	4		
22	b Applicable month (enter code)Weighted average retirement age									67		
									22			
	Current regulation: Prescribed - combined Prescribed - separate Substitute											
Pa	Part VI Miscellaneous Items											
24	24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required											
	attachme	ent								X Yes No		
25	Has a m	ethod change l	been made for tl	he current plan	year? If "Yes	s," see instructions r	egarding req	uired attach	ment	Yes X No		
26	Is the pla	an required to p	provide a Sched	ule of Active Pa	articipants? If	"Yes," see instructi	ons regardin	g required a	ttachmen	tX Yes No		
27		•	alternative fundi	-		de and see instructi	ons regardin	g	27			
P	art VII					d Contribution	s For Pri	or Years				
28	Unpaid r				-				28	0		
29					•	m required contribu	•	-	29	0		
30	`	,				28 minus line 29)			30	0		
	art VIII		Required Co						l			
31			d excess assets									
				`					31a	500000		
	b Exces	s assets, if app	olicable, but not	greater than line	e 31a				31b	0		
32	Amortiza	ation installmen	nts:				Outsta	anding Bala	nce	Installment		
	a Net sh	ortfall amortiza	ation installment.						0	0		
	b Waive	r amortization	installment						0	0		
33	If a waive (Month _					ne ruling letter grant waived amount			33			
34	Total fun	nding requireme	ent before reflec	ting carryover/p	orefunding bal	ances (lines 31a - 3	31b + 32a + 3	32b - 33)	34	500000		
					Carryo	ver balance	Prefu	nding balar	ice	Total balance		
35			se to offset fundi	•		588345			0	588345		
36	Additiona	al cash require	ment (line 34 mi	inus line 35)					36	0		
37	 36 Additional cash requirement (line 34 minus line 35)							`	37	1663430		
38	Present	value of exces	s contributions f	or current year	(see instruction	ons)						
	a Total (excess, if any, of line 37 over line 36)								38a	1663430		
	b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances								38b	588345		
39	Unpaid r	minimum requii	red contribution	for current year	r (excess, if ar	ny, of line 36 over li	ne 37)		39	0		
40	Unpaid r	minimum requii	red contributions	s for all years					40	0		
Pa	rt IX	Pension	Funding Rel	lief Under P	ension Re	lief Act of 2010	(See Ins	tructions)			
41	If an elec	ction was made	e to use PRA 20	10 funding relie	of for this plan:							
	a Sched	ule elected								2 plus 7 years 15 years		
	b Eligible	e plan year(s) f	for which the ele	ection in line 41a	a was made .				20	08 2009 2010 2011		

Moody Bible Institute Pension Plan EIN / PN 36-2167792 / 001

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Plan Sponsor Elections

Yield curve election: The plan sponsor did not elect to use the full yield curve under IRC section

430(h)(2)(D)(ii).

Applicable month: The plan sponsor elected to base the segment rates on the rates published

in the September immediately preceding the valuation year.

Economic Assumptions

First segment rate (years 0 to 4):	3.92%
Second segment rate (years 5 to 19):	5.52%
Third segment rate (years 20 and after):	6.29%
Effective interest rate (current year):	5.64%
First segment rate (years 0 to 4), without stabilization:	1.75%
Second segment rate (years 5 to 19), without stabilization:	3.76%
Third segment rate (years 20 and after), without stabilization:	4.66%
Effective interest rate, without stabilization (current year):	3.97%

The interest rates listed above are compounded annually.

Compensation Increases

Not applicable due to January 1, 2016 plan freeze.

Postretirement Benefit Increases

None.

Social Security Taxable Wage Base Increases

Not applicable due to January 1, 2016 plan freeze.

Moody Bible Institute Pension Plan EIN / PN 36-2167792 / 001

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Demographic Assumptions

Retirement

The retirement decrement assumptions for active participants are described in Exhibit A. Terminated vested participants are assumed to retire at age 65.

Termination

The withdrawal decrement assumptions are summarized in Exhibit B.

Disability

1985 Pension Disability Incidence Table Class 1.

Mortality and mortality improvement

The mortality follows the IRS pre-2018 Static Mortality Table with separate tables for annuitants and non-annuitants, as prescribed by Treasury regulation section 1.430(h)(3)-1, as in effect on December 31, 2017.

Marital status

80% of employees are assumed to be married; husbands are assumed to be three years older than wives.

Decrement timing

Decrements are assumed to occur as of the middle of the year.

Other Assumptions

Form of payment

All participants are assumed to elect a single life annuity.

Expenses

Prior year administrative expenses paid, adjusted for expected deviations and PBGC premiums for the year. For 2018, an amount of \$500,000 was included in the target normal cost.

Changes from Prior Year and Rationale for Changes

Assumed expenses were changed to \$500,000 for 2018 to better reflect actual historical plan experience.

Moody Bible Institute Pension Plan EIN / PN 36-2167792 / 001 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Actuarial Methods

Valuation date

The valuation date is January 1, 2018.

Actuarial value of assets

The actuarial value of assets is determined by recognizing asset gains and losses over a period of three years. Asset gains and losses are defined as the difference between the expected return on the market value of assets, using a return assumption not to exceed the third segment rate, and the actual return on the market value of assets. This gain or loss is recognized over a period of three years at 33% per year, beginning in the current year. The actuarial value of assets must be within 10% of the market value of assets.

Minimum funding method

The funding target and target normal cost for minimum funding calculations are determined using the traditional unit credit cost method as prescribed by Treasury regulation section 1.430(d)-1. The liability under the unit credit cost method is the value of the accrued pension benefit using service and pay as of the valuation date. The sum of the present value of the accrued benefits for all participants is the ERISA funding target. The normal cost is the present value of the benefits earned during the year. The target normal cost is the sum of the normal costs for all participants and the assumed administrative expenses.

Changes in Method from Prior Year and Rationale for Changes
None.

Exhibit A - Retirement Rates

<u>Age</u>	<u>Rate</u>
15-54	0.00%
55	1.00%
56	1.00%
57	1.00%
58	1.00%
59	1.00%
60	6.00%
61	6.00%
62	6.00%
63	6.00%
64	6.00%
65	25.00%
66	10.00%
67	10.00%
68	10.00%
69	10.00%
70	20.00%
71	20.00%
72	20.00%
73	20.00%
74+	100.00%

Exhibit B - Termination Rates

<u>Age</u>	<u>Rate</u>	<u>Age</u>	<u>Rate</u>
15	0.00%	45	3.81%
16	0.00%	46	3.50%
17	0.00%	47	3.19%
18	0.00%	48	2.88%
19	0.00%	49	2.68%
20	0.00%	50	2.44%
21	21.60%	51	2.25%
22	20.60%	52	2.13%
23	19.60%	53	1.87%
24	18.60%	54	1.69%
25	17.60%	55	1.50%
26	16.55%	56	1.31%
27	15.50%	57	1.12%
28	14.45%	58	0.94%
29	13.60%	59	0.75%
30	12.81%	60+	0.00%
31	12.00%		
32	11.38%		
33	10.63%		
34	10.00%		
35	9.37%		
36	8.81%		
37	8.20%		
38	7.69%		
39	7.02%		
40	6.39%		
41	5.88%		
42	5.31%		
43	4.69%		
44	4.25%		

Effective date

January 1, 1964. Last amended effective January 1, 2017.

Plan year

January 1 to December 31.

Eligibility

Effective January 1, 2006, no new participants will enter the plan. The plan was closed to new entrants as of January 1, 2006. The plan had ongoing benefit accruals for grandfathered participants until January 1, 2016.

Definitions

Vesting service

For Full-Time participants, service is measured from Date of Hire. For Part-Time Participants, an employee shall be credited with one year of service for each plan year during which the participant is a part-time employee and completes more than 1,000 hours of service and has attained age 18 years. Effective January 1, 2016, service was frozen for all participants.

Vesting

Participants are 0% vested in their accrued benefit until completion of 5 years of vesting service. Participants become 100% vested in their accrued benefit upon completion of 5 years of vesting service.

Benefit Service

Benefit service is equal to vesting service except disregarding service before age 21. Effective January 1, 2016, benefit service was frozen for all participants.

Covered Compensation

Covered Compensation shall mean 1/12th of the average of the Social Security taxable wage bases for the 35-year period ending with the calendar year in which the participant attains Social Security Retirement Age.

Earnings

For an employee classified as full time, earnings generally include base pay, overtime, amounts withheld pursuant to a salary reduction agreement to provide an annuity under Section 403(b), any salary reduction amounts elected by the participant under Section 132(f)(4), any salary reduction amounts elected by the participant and credited to a cafeteria plan under Section 125(d) and housing allowances.

For an employee classified as a part-time employee, earnings include W-2 earnings, amounts withheld pursuant to a salary reduction agreement to provide an annuity under Section 403(b), any salary reduction amounts elected by the participant under Section 132(f)(4) and any salary reduction amounts elected by the participant and credited to a cafeteria plan under Section 125(d).

Earnings earned after January 1, 2016 are excluded.

Final Average Earnings

"Final average earnings" are the average monthly compensation paid to a participant during the 60 consecutive months immediately preceding termination of employment or, if greater, the monthly average of the compensation paid to the participant during the 5 consecutive calendar years in which the total compensation was the greatest.

Accrued Benefit

0.95% of the participant's final average earnings multiplied by years of benefit service, not to exceed 30 years, plus 0.65% of the excess of the final average earnings over covered compensation multiplied by years of benefit service, not to exceed 30 years.

Effective January 1, 2006, benefits were frozen for all participants who did not meet each of the following criteria:

- a) Attained age 40 years
- b) Attained five years of vesting service
- c) The sum of age and vesting service total at least 50 points

Employees rehired after January 1, 2006 will not accrue additional benefits.

Vesting service will continue to accrue for participants with frozen benefits on and after January 1, 2006.

Effective January 1, 2006, retired participants who commenced benefits prior to January 1, 2005 received an ad-hoc Cost of Living Adjustment to their benefit amount.

Effective January 1, 2016, benefit accruals were frozen for all participants.

Early Retirement Date

The first day of the month coincident with or next following the attainment of age 60 and completion of 5 or more years of vesting service or after age 55 and completion of 10 or more years of vesting service.

Early Retirement Benefit

The Accrued Benefit, adjusted by the applicable early retirement factor in the table below.

Number of Years Early Retirement Date precedes Normal Retirement Date	Early retirement factor
0	100.00%
1	92.30%
2	84.61%
3	76.92%
4	73.07%
5	69.23%
6	65.38%
7	61.54%
8	57.69%
9	52.92%
10	48.61%

Normal retirement date

The first day of the calendar month coincident with or next following the earlier of the date the participant has both attained age 65 years and either completed five years of vesting service or completed five years of participation in the plan.

Normal retirement benefit

The Accrued Benefit.

Late retirement date

The first day of the month coincident with or next following the date of termination of service if it occurs after the Normal Retirement Date.

Late Retirement Benefit

Monthly pension on a single-life basis commencing at the participant's deferred retirement date is determined as the higher of a normal retirement pension, considering final average earnings and benefit service at termination of employment and the normal retirement pension at age 65 actuarially increased to the commencement date. Actuarial increases are determined based on the 1983 Group Annuity Mortality Table (50% male, 50% female) and a 5% interest rate.

Disability retirement date

A condition which occurs at any age and after completion of 5 or more years of vesting service and which entitles the participant to disability insurance benefits under the long-term disability insurance program or the Social Security Act.

Disability retirement benefit

The disability retirement benefit is the same as the normal retirement benefit.

Deferred vested date

The date of termination of service if it occurs after completion of 5 or more years of vesting service.

Deferred vested benefit

The Accrued Benefit. If payment commences prior to the normal retirement date, the benefit amount is reduced as provided for early retirement.

Preretirement Death Benefit Eligibility

If a participant has a surviving spouse and dies with at least five years of vesting service prior to the commencement of pension payments, their surviving spouse will be entitled to a benefit. If a participant who has no surviving spouse dies prior to termination of employment but after meeting the eligibility requirements for an early retirement pension, their beneficiary will be entitled to a benefit.

Surviving Spouse Preretirement Death Benefit

The pension that would have been payable if the participant retired on the day before death and elected to receive an early retirement pension, reduced for the automatic 50% joint and survivor pension described below and for early commencement. The benefit is payable at the later of age at death or the date the participant would have attained age 55 and 10 years of vesting service or age 60 and 5 years of vesting service.

Beneficiary Preretirement Death Benefit

A pension equal to the actuarial equivalent of the surviving spouse's benefit described above, assuming the participant had a spouse entitled to receive such pension equal in age to such participant, and in such continuous and certain form as elected by the beneficiary. The benefit is payable beginning on the first day of month following death.

Payment forms

Normal Form of Annuity

Without Spouse: Single life annuity

With Spouse: 50% joint and survivor annuity reduced to be equivalent to the retirement

benefit payable for employee's lifetime. Participant receives reduced lifetime benefit and, in event of participant's death, 50% of reduced

benefit continues to surviving spouse.

Optional Forms of Payment

50% joint and survivor annuity, 75% joint and survivor annuity,100% joint and survivor annuity, 10-, 15-, and 20-year certain and life options.

Effective January 1, 2017, if the actuarially equivalent single lump sum value of a participant's benefit is equal to or less than \$50,000, the participant can elect to receive their pension as a single lump sum.

A participant who retires under early retirement may elect a level income option.

If the actuarially equivalent single lump sum value of a participant's benefit is \$5,000 or less, then the participant receives their pension as a mandatory lump sum.

Optional Form Conversion Factors

Lump sums are calculated using the Applicable Mortality Table per section 417(e)(3) of the Internal Revenue Code and the Applicable Interest Rate in effect for the month of November prior to the plan year.

All other forms of payment are calculated using the mortality table set forth in Revenue Ruling 2001-62 and an interest rate of 7% per annum.

Resulting benefits can never be less than the benefits accrued as of December 31, 2005 and converted using the tables and factors then in effect.

Moody Bible Institute Pension Plan EIN / PN 36-2167792 / 001 Schedule SB, Line 24 - Change in Actuarial Assumptions

Change in Actuarial Assumptions

Assumed expenses were changed to \$500,000 for 2018 to better reflect actual historical plan experience.

Moody Bible Institute Pension Plan EIN / PN 36-2167792 / 001 Schedule SB, Line 26 - Schedule of Active Participant Data

Completed years of credited service as of January 1, 2018

Attained age	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & over	Total
Under 25	-	-	-	-	-	-	-	-	-	-	-
25 to 29	-	-	-	-	-	-	-	-	-	-	-
30 to 34	-	-	-	-	-	-	-	-	-	-	-
35 to 39	-	-	-	3	1	-	-	-	-	-	4
40 to 44	-	-	-	-	5	3	-	-	-	-	8
45 to 49	-	-	-	5	13	16	2	-	-	-	36
50 to 54	-	-	-	5	11	9	3	5	-	-	33
55 to 59	-	-	-	5	13	5	8	11	3	-	45
60 to 64	-	-	-	2	21	12	12	9	8	3	67
65 to 69	-	-	-	2	4	4	4	1	1	3	19
70 & over	-	-	-	1	1	1	2	1	-	1	7
Total	_	_	_	23	69	50	31	27	12	7	219

Moody Bible Institute Pension Plan EIN / PN 36-2167792 / 001 Schedule SB, Line 22 - Description of Weighted Average Retirement Age

(1)	(2)	(3)	(4)	(5)
Age	Active Group	Retirement Rate	Number Retiring	(1) * (4)
гг	•		ŭ	F F00 00
55	10,000.00	0.01	100	5,500.00
56	9,900.00	0.01	99	5,544.00
57	9,801.00	0.01	98.01	5,586.57
58	9,702.99	0.01	97.03	5,627.73
59	9,605.96	0.01	96.06	5,667.52
60	9,509.90	0.06	570.59	34,235.64
61	8,939.31	0.06	536.36	32,717.86
62	8,402.95	0.06	504.18	31,258.97
63	7,898.77	0.06	473.93	29,857.36
64	7,424.84	0.06	445.49	28,511.40
65	6,979.35	0.25	1,744.84	113,414.51
66	5,234.52	0.1	523.45	34,547.80
67	4,711.06	0.1	471.11	31,564.13
68	4,239.96	0.1	424	28,831.71
69	3,815.96	0.1	381.6	26,330.14
70	3,434.37	0.2	686.87	48,081.12
71	2,747.49	0.2	549.5	39,014.39
72	2,197.99	0.2	439.6	31,651.11
73	1,758.40	0.2	351.68	25,672.57
74	1,406.72	1_	1,406.72	104,097.00
		_	10,000.00	667,711.54

Weighted Average Retirement Age: 667,711.54/10,000.00 = 66.77 rounded to age 67