

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 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>	

A This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)

☒ a single-employer plan ☐ a DFE (specify) _____

B This return/report is: ☐ the first return/report ☐ the final return/report

☐ an amended return/report ☐ a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. ☐

D Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program

☐ special extension (enter description) _____

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

Part II	Basic Plan Information —enter all requested information		
1a Name of plan <u>YELLOWSTONE FOREVER 401(K) RETIREMENT PLAN</u> 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) <u>YELLOWSTONE FOREVER</u> <u>222 EAST MAIN STREET, SUITE 301</u> <u>BOZEMAN, MT 59715</u>	1b Three-digit plan number (PN) ▶	<u>004</u>	
	1c Effective date of plan	<u>01/01/2002</u>	
	2b Employer Identification Number (EIN)	<u>47-5427975</u>	
	2c Plan Sponsor's telephone number	<u>406-848-2400</u>	
	2d Business code (see instructions)	<u>611000</u>	

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.	10/06/2022	KRISTENA MILLS
	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
	Signature of DFE	Date	Enter name of individual signing as DFE

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

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 165
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year..... a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	 6a(1) 70 6a(2) 35 6b 0 6c 90 6d 125 6e 1 6f 126 6g 126 6h 15
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2G 2J 2F 2M b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>1</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 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 A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan YELLOWSTONE FOREVER 401(K) RETIREMENT PLAN	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 YELLOWSTONE FOREVER	D Employer Identification Number (EIN) 47-5427975	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
TIAA-CREF

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1624203	69345	385283	79	01/01/2021	12/31/2021

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	406110
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	2353269

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☒ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year	7b	398440
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c	Additions: (1) Contributions deposited during the year	7c(1)	4821	
	(2) Dividends and credits.....	7c(2)		
	(3) Interest credited during the year.....	7c(3)	13112	
	(4) Transferred from separate account.....	7c(4)	1876	
	(5) Other (specify below)	7c(5)		

(6) Total additions	7c(6)	19809
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d	Total of balance and additions (add lines 7b and 7c(6))	7d	418249
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e Deductions:

	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	11975	
	(2) Administration charge made by carrier.....	7e(2)		
	(3) Transferred to separate account.....	7e(3)		
	(4) Other (specify below)	7e(4)	164	

▶ PLAN FEE

(5) Total deductions	7e(5)	12139
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f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	406110
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Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	0
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2021
		This Form is Open to Public Inspection.
For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan YELLOWSTONE FOREVER 401(K) RETIREMENT PLAN	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 YELLOWSTONE FOREVER	D Employer Identification Number (EIN) 47-5427975	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No
- b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
TIAA
13-1624203
(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)

TIAA

730 THIRD AVENUE
NEW YORK, NY 10017-3206

13-1624203

(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?
64	RECORDKEEPING	5317	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

(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 ☐

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)

(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 ☐

(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 ☐

(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 2021 This Form is Open to Public Inspection.	
For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021					
A Name of plan YELLOWSTONE FOREVER 401(K) RETIREMENT PLAN				B Three-digit plan number (PN) ▶ 004	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 YELLOWSTONE FOREVER				D Employer Identification Number (EIN) 47-5427975	
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: TIAA REAL ESTATE					
b Name of sponsor of entity listed in (a): TIAA-CREF					
c EIN-PN 13-1624203-004		d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 149194		
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)		
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)		

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

Schedule D (Form 5500) 2021 v. 201209

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)**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)

(Complete as many entries as needed to report all participating plans)

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
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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 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan YELLOWSTONE FOREVER 401(K) RETIREMENT PLAN	B Three-digit plan number (PN) ►	004
C Plan sponsor's name as shown on line 2a of Form 5500 YELLOWSTONE FOREVER	D Employer Identification Number (EIN) 47-5427975	

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)		
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)		
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)	1912	1610
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	129147	149194
(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)	4052477	4510905
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	398442	406110
(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)	
e	Buildings and other property used in plan operation	1e	
f	Total assets (add all amounts in lines 1a through 1e)	1f	4581978 5067819
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	
i	Acquisition indebtedness.....	1i	
j	Other liabilities.....	1j	
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	0 0
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	4581978 5067819

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.

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	120507
	(B) Participants	2a(1)(B)	216243
	(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)	336750
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)	149
	(F) Other	2b(1)(F)	13112
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	13261
(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)	66543
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	66543
(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)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		22798
(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)		491817
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		931169
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	438861	
(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)		438861
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)	6467	
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		6467
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		445328
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		485841
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

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

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: **ANDERSON ZURMUEHLEN & CO., P.C.**

(2) EIN: **81-0385940**

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, 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.

During the plan year:

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.).....

	Yes	No	Amount
4a		X	

	Yes	No	Amount
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?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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?		X	
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?		X	
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.)	X		
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.)		X	
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?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
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 ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

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 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan YELLOWSTONE FOREVER 401(K) RETIREMENT PLAN	B Three-digit plan number (PN) ► 004
C Plan sponsor's name as shown on line 2a of Form 5500 YELLOWSTONE FOREVER	D Employer Identification Number (EIN) 47-5427975

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): 82-2826183 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	

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)? If the plan is a defined benefit plan, go to line 8.	☐ Yes ☒ No ☐ N/A
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.	
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a
b Enter the amount contributed by the employer to the plan for this plan year	6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c
If you completed line 6c, skip lines 8 and 9.	
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes ☐ No ☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes ☐ No ☐ N/A

Part III	Amendments
----------	------------

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes ☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes ☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes ☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes ☐ No

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

Schedule R (Form 5500) 2021
v. 201209

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (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) through (c)

a Enter the percentage of plan assets held as:

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

- 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 _____

**YELLOWSTONE FOREVER
401(K) RETIREMENT
PLAN NO. 004**

FINANCIAL REPORT

December 31, 2021 and 2020



C O N T E N T S

PAGE

INDEPENDENT AUDITOR'S REPORT 1 through 6

FINANCIAL STATEMENTS

Statements of Net Assets Available for Benefits 7

Statements of Changes in Net Assets Available for Benefits 8

Notes to Financial Statements 9 through 19

SUPPLEMENTAL SCHEDULE

Schedule of Assets Held at End of Year20 and 21

INDEPENDENT AUDITOR'S REPORT

To the Plan Sponsor and Plan Administrator of the
Yellowstone Forever 401(k) Retirement Plan No. 004
Gardiner, Montana

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

We have performed an audit of the accompanying financial statements of the Yellowstone Forever 401(k) Retirement Plan No. 004 (the 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 statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 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 audit 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 a certification from a qualified institution as of and for the year ended December 31, 2021, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. 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 these financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the 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 the Plan's ability to continue as a going concern for a reasonable period of time.

Our audit 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.

Supplemental Schedule Required by ERISA

The supplemental schedule of assets held at end of year as of December 31, 2021, is presented for purposes of additional analysis and is not a required part of the financial statements, but is 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 schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is 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 schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, is 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 schedule 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).

Anderson Zurmuehlen & Co, P.C.

Bozeman, Montana
October 5, 2022

INDEPENDENT AUDITOR'S REPORT

To the Plan Sponsor and Plan Administrator of the
Yellowstone Forever 401(k) Retirement Plan No. 004
Gardiner, Montana

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Yellowstone Forever 401(k) Retirement Plan No. 004 (the Plan), which comprise the statement of net assets available for benefits as of December 31, 2020, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes 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.

Auditor's Responsibility

Our responsibility is to express an opinion on the 2020 financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by TIAA, the Trustee of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the Plan Administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The Plan Administrator has obtained a certification from the Trustee as of and for the year ended December 31, 2020, that the information provided to the Plan Administrator by the Trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion on the 2020 financial statements. Accordingly, we do not express an opinion on the 2020 financial statements.



Report on Form and Content in Compliance with DOL Rules and Regulations for the 2020 Financial Statements

The form and content of the information included in the 2020 financial statements, other than that derived from the information certified by the Trustee, has been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Anderson Zurmuehlen & Co, P.C.

Bozeman, Montana
October 5, 2022

FINANCIAL STATEMENTS

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
ASSETS		
Investments:		
Investments, at fair value	\$ 4,908,739	\$ 4,423,005
Investment in guaranteed investment contract, at contract value	<u>157,470</u>	<u>157,061</u>
Total investments	5,066,209	4,580,066
Receivables:		
Notes receivable from participants	<u>1,610</u>	<u>1,912</u>
TOTAL ASSETS	<u>\$ 5,067,819</u>	<u>\$ 4,581,978</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 5,067,819</u>	<u>\$ 4,581,978</u>

The Notes to Financial Statements are an integral part of these statements.

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Years Ended December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
ADDITIONS TO NET ASSETS ATTRIBUTED TO		
Investment income:		
Net appreciation in fair value of investments	\$ 514,603	\$ 576,984
Interest and dividends	<u>79,816</u>	<u>56,433</u>
Total investment income	<u>594,419</u>	<u>633,417</u>
Contributions:		
Sponsor	120,508	140,171
Participant	<u>216,242</u>	<u>233,870</u>
Total contributions	<u>336,750</u>	<u>374,041</u>
Total additions	<u>931,169</u>	<u>1,007,458</u>
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO		
Benefits paid directly to participants and beneficiaries	438,861	783,141
Administrative expenses	<u>6,467</u>	<u>5,432</u>
Total deductions	<u>445,328</u>	<u>788,573</u>
CHANGE IN NET ASSETS	485,841	218,885
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	<u>4,581,978</u>	<u>4,363,093</u>
End of year	<u>\$ 5,067,819</u>	<u>\$ 4,581,978</u>

The Notes to Financial Statements are an integral part of these statements.

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
NOTES TO FINANCIAL STATEMENTS
December 31, 2021 and 2020

NOTE 1. PLAN DESCRIPTION AND SIGNIFICANT ACCOUNTING POLICIES

The following description of the Yellowstone Forever (the Plan Sponsor) 401(k) Retirement Plan No. 004 (the Plan) provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a voluntary defined contribution plan qualifying under Section 401(k) of the Internal Revenue Code of 1986. It covers all full-time, permanent employees, and all other employees who have completed one year of service. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. The Plan is a single employer plan. The original effective date of the Plan is January 1, 2002.

Plan Amendment

Effective January 1, 2020, the Plan was amended eliminating the six-month suspension of elective deferrals for those taking a hardship withdrawal.

Effective January 1, 2020, the Plan was amended expanding the list of expenses, which qualify for a hardship distribution. Participants can now receive a hardship distribution if their principal residence or place of employment at the time of disaster was in an area FEMA designates as qualifying for individual assistance in connection with a federally declared disaster. The distribution can cover the participant's expenses and losses (including loss of income) on account of the disaster. The definition of residential casualty loss has been broadened to include residential casualties even if they are not part of a federally declared disaster.

Basis of Accounting

The Plan's financial statements have been prepared using the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP), as codified by the Financial Accounting Standards Board (FASB).

Accounting Estimates

The preparation of financial statements in conformity with GAAP requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from these estimates.

Contributions

Participants may elect to have a portion of their compensation contributed to the Plan on a pre-tax basis pursuant to Internal Revenue Code Section 401(k). For calendar years 2021 and 2020, the IRS limit on the amount of elective deferrals a participant can contribute to a 401(k) plan was \$19,500. Participants direct the investment of their contributions into various investment options offered by the Plan. Eligible participants age 50 or older by the end of the calendar year may make catch-up contributions to the Plan, subject to federal statutory limitations of \$6,500 for calendar years 2021 and 2020.

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
December 31, 2021 and 2020

NOTE 1. PLAN DESCRIPTION AND SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)

Contributions (Continued)

Under the Plan's safe-harbor matching contribution formula, each year the Plan Sponsor must contribute an amount equal to 3% of the participant's annual compensation. Additionally, the Plan Sponsor makes matching contributions equal to 50% of the participant's elective deferrals, up to a maximum of 2% of the participant's compensation.

Participant Accounts

Each participant's account is credited with the participant's contributions, participant rollovers, Plan Sponsor safe-harbor contributions, Plan Sponsor matching contributions, and related investment earnings and losses. Allocations are based on participant compensation, as defined in the plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately 100% vested in their contributions, rollovers, and safe-harbor contributions and matching contributions from the Plan Sponsor, plus actual earnings thereon, after completing one hour of service.

Forfeitures

Forfeitures are held in a separate suspense account and can be used to reduce the Plan Sponsor's contributions, to pay reasonable expenses of administering the Plan, or to be allocated as additional matching contributions or elective contributions, or as additional discretionary contributions. For the plan years ended December 31, 2021 and 2020, there were forfeitures of \$950 and \$0, respectively, used to reduce Plan Sponsor contributions. As of December 31, 2021 and 2020, there were \$-0- and \$950, respectively, of un-allocated forfeitures.

Plan Expenses

The majority of administrative expenses of the Plan are paid by the Plan Sponsor and are excluded from these financial statements. Fees incurred by the Plan for administration amounted to \$6,467 and \$5,432 in 2021 and 2020, respectively. Fees incurred by the Plan for investment management services are included in the net appreciation of fair value of investments as they are paid through revenue sharing rather than direct payment.

Investment Redemption Fees

Participants invested in the TIAA Access International Equity Retirement fund option are subject to a 2.0% redemption fee if assets are held less than 60 days. No other fund options have redemption fees.

Participants invested in the TIAA Traditional assets in a Group Retirement Annuity or TIAA Traditional assets in a Retirement Choice fund option are subject to a 2.5% contract surrender fee if assets are redeemed within 120 days of termination. No other fund options have contract surrender fees.

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
December 31, 2021 and 2020

NOTE 1. PLAN DESCRIPTION AND SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The Coronavirus Aid, Relief, and Economic Security Act (CARES Act) allowed participants to borrow up to \$100,000 or 100% of their vested account balance between March 27, 2020 and September 22, 2020. The loans are secured by the balance in the participant's account. The loan interest rate is equal to the Federal Reserve Board Bank prime loan rate plus 1.0% at the time of the loan origination. The maximum number of loans a participant may have outstanding at any one time is three. Principal and interest are paid in accordance with the set amortization schedule.

Payment of Benefits

Upon termination of service due to death, disability, retirement, or severance from employment, a participant may elect to receive a distribution in such manner as is set forth in the contracts between the Plan and the participant. If the participant does not initiate a withdrawal and the value of their vested account is less than \$5,000, the vested account balance is distributed to the participant, regardless of consent. Participants with vested account balances greater than \$5,000 may delay distributions until required by law to receive required minimum distributions. Participants may make withdrawals from their account prior to termination of employment for hardships, subject to limitations imposed by the Internal Revenue Code. Participants are entitled to receive a distribution of all vested account balances upon attainment of age 59½. Benefits are recorded when paid. As of December 31, 2021 and 2020, there were no amounts due to participants who had withdrawn from the Plan for which distributions were in process.

Coronavirus-related distributions permitted under the CARES Act were allowed during the Plan year ended December 31, 2020, for participants meeting the specified qualifications in section 2202 of the CARES Act. Minimum required distributions for those age 72 or older were suspended for 2020, except upon participant request.

Tax Status

The Plan is exempt from federal and state income taxes. The determination of tax-exempt status is considered to be a tax position. The Plan's policy is to evaluate the likelihood that its uncertain tax positions will prevail upon examination based on the extent to which those positions have substantial support within the Internal Revenue Code and Regulations, Revenue Rulings, court decisions, and other evidence. It is the opinion of the Plan Administrator that the Plan has no uncertain tax positions.

The Plan has adopted a prototype plan, which received a favorable determination letter from the Internal Revenue Service dated June 30, 2014, indicating the Plan and related trust were designed in accordance with the applicable sections of the IRC.

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
December 31, 2021 and 2020

NOTE 1. PLAN DESCRIPTION AND SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)

Tax Status (Continued)

Although the prototype plan document has been amended since receiving the determination letter, the Plan Administrator believes that the Plan is designed, and is currently operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt. Therefore, no provisions for income taxes have been included in the Plan's financial statements.

Investment Valuation and Income Recognition

The Plan's investment in variable annuities, mutual funds, pooled separate accounts, and non-benefit responsive investment contracts are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's investment in the guaranteed investment contract is stated at contract value. See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Dividends and interest are recorded when received. Net appreciation includes gains and losses on investments bought and sold, as well as, held during the year.

Subsequent Events

Management has evaluated subsequent events through October 5, 2022, the date which the financial statements were available to be issued.

NOTE 2. PLAN TERMINATION

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

NOTE 3. FAIR VALUE MEASUREMENT OF INVESTMENTS

In accordance with GAAP, the Plan uses a fair value hierarchy that prioritizes the inputs to valuation techniques to measure fair value. The hierarchy gives the highest priority to unadjusted observable quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements).

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
December 31, 2021 and 2020

NOTE 3. FAIR VALUE MEASUREMENT OF INVESTMENTS (CONTINUED)

Basis of Fair Value Measurement

The three levels of the fair value input measurements under these standards are as follows:

- Level 1: Quoted prices for identical assets or liabilities in active markets;
- Level 2: Observable inputs for similar assets or liabilities in active markets, identical or similar assets in inactive markets, inputs other than quoted prices that are directly observable, and inputs derived from observable market data by correlation or other means; and
- Level 3: Unobservable inputs for a reporting entity's own assumptions with respect to the assumptions market participants would use, other entity-specific inputs that are not derived from market data, and un-observable inputs that are developed based on the best information available in the circumstances.

A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of un-observable inputs.

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2021 and 2020, from prior reporting periods.

Variable annuities: The funds invest principally in equity securities, fixed-income instruments and short-term investments in accordance with each portfolio's investment objectives. Account investments are primarily valued using market quotations or prices obtained from independent pricing sources who may employ various pricing methods to value the investments including matrix pricing. CREF Money Market Account holdings are generally valued at amortized cost. Each fund determines its unit value each day. The variable annuities held by the Plan are deemed to be actively traded.

Mutual funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end funds registered with the U.S. Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Pooled separate accounts: Valued at the net unit value (NUV) of shares of an insurance company separate account invested mainly in real estate and real estate-related investments. The NUV is based on the fair value of the underlying investment held by the fund less its liabilities. The investment value is principally derived from the market value of the underlying real estate holdings or other real estate-related investments. Real estate holdings are valued principally using external appraisals, which are estimates of property values based on a professional's opinion. Participant transactions may occur daily. Transfers out of the account are limited to one per calendar quarter.

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
December 31, 2021 and 2020

NOTE 3. FAIR VALUE MEASUREMENT OF INVESTMENTS (CONTINUED)

Basis of Fair Value Measurement (Continued)

Non-benefit responsive investment contracts: Valued at fair value by the insurance company by discounting the related cash flows using an appropriate risk-adjusted market discount rate that correlates with TIAA Traditional Annuity's historical credit rates. Crediting rates are a combination of a guaranteed rate and an annually established discretionary rate. Additionally, the discretionary rate applied to contributions received during a reporting period may vary from the discretionary rate applied to account balances at the end of the prior reporting period.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan Sponsor believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table represents by level, within the fair value hierarchy, the Plan's investment assets at fair value, as of December 31, 2021 and 2020. As required by GAAP, investment assets are classified in their entirety based upon the lowest level of input that is significant to the fair value measurement.

Assets at Fair Value as of December 31, 2021				
Description:	Level 1	Level 2	Level 3	Total
Variable annuity accounts	\$ 1,960,730	\$ 243,346	\$ -	\$ 2,204,076
Mutual funds	2,303,520	3,309	-	2,306,829
Pooled separate accounts	-	149,194	-	149,194
Non-benefit responsive investment contracts	-	-	248,640	248,640
Total investments at fair value	<u>\$ 4,264,250</u>	<u>\$ 395,849</u>	<u>\$ 248,640</u>	<u>\$ 4,908,739</u>

Assets at Fair Value as of December 31, 2020				
Description:	Level 1	Level 2	Level 3	Total
Variable annuity accounts	\$ 1,817,458	\$ 268,414	\$ -	\$ 2,085,872
Mutual funds	1,963,286	3,319	-	1,966,605
Pooled separate accounts	-	129,147	-	129,147
Non-benefit responsive investment contracts	-	-	241,381	241,381
Total investments at fair value	<u>\$ 3,780,744</u>	<u>\$ 400,880</u>	<u>\$ 241,381</u>	<u>\$ 4,423,005</u>

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
December 31, 2021 and 2020

NOTE 3. FAIR VALUE MEASUREMENT OF INVESTMENTS (CONTINUED)

Basis of Fair Value Measurement (Continued)

The following table represents the Plan's investments measured with Level 3 fair value inputs, the valuation techniques used to measure the fair value of those financial instruments, and the significant unobservable inputs and the ranges of values for those inputs.

Non-benefit Responsive Investment Contracts TIAA Traditional Annuity	Fair Value	Principal Valuation Technique	Un-observable Inputs
December 31, 2021	\$ 248,640	Discounted cash flow Theoretical transfer (exit value)	Risk-adjusted discount rate applies
December 31, 2020	\$ 241,381	Discounted cash flow Theoretical transfer (exit value)	Risk-adjusted discount rate applies

The following table sets forth a summary of changes in the fair value of the Plan's investments measured with Level 3 fair value inputs for the years ended December 31, 2021 and 2020:

Reconciliation of Level 3 Assets:

Balance at December 31, 2019	\$ 224,691
Interest and dividends	8,951
Purchases	5,092
Sales	(1,794)
Transfers in	4,441
Balance at December 31, 2020	241,381
Interest and dividends	8,459
Purchases	4,821
Sales	(6,338)
Transfers in	317
Balance at December 31, 2021	<u>\$ 248,640</u>

Transfers in and out are between Level 3 investment funds.

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
December 31, 2021 and 2020

NOTE 4. INFORMATION CERTIFIED BY THE TRUSTEE

The Plan Administrator has elected the method of compliance as permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to the following information certified by the trustee of plan investments, TIAA, except for comparing such information certified by TIAA to information included in the Plan's financial statements and supplemental schedule.

The Plan's assets were held by TIAA at December 31, 2021 and 2020. Participants direct the investment of their contributions into various investment funds or contracts, or any combination thereof. The following information included in the accompanying financial statements and supplemental schedule was obtained from data that had been prepared and certified as complete and accurate by TIAA as of and for the year ended December 31, 2021 and 2020.

	<u>2021</u>	<u>2020</u>
Variable annuities	\$ 2,204,076	\$ 2,085,872
Mutual funds	2,306,829	1,966,605
Pooled separate accounts	149,194	129,147
Insurance company general contracts	<u>406,110</u>	<u>398,442</u>
Total certified investments	<u>\$ 5,066,209</u>	<u>\$ 4,580,066</u>
Notes receivable from participants	<u>\$ 1,610</u>	<u>\$ 1,912</u>
	<u>2021</u>	<u>2020</u>
Net appreciation in fair value of investments	\$ 514,603	\$ 576,984
Interest and dividends	<u>79,816</u>	<u>56,433</u>
Total certified investment income	<u>\$ 594,419</u>	<u>\$ 633,417</u>

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
December 31, 2021 and 2020

NOTE 5. GUARANTEED INVESTMENT CONTRACTS

As of December 31, 2021 and 2020, the Plan had holdings in the Group Supplemental Retirement Annuity (GSRA) and Supplemental Retirement Annuity (SRA) accounts included in the TIAA Traditional Annuity totaling \$157,470 and \$157,061, respectively. The TIAA Traditional Annuity is a guaranteed annuity account backed by the claims-paying ability of Teachers Insurance and Annuity Association of America (TIAA), a New York domiciled insurance company. GSRA and SRA are direct fixed-dollar annuity contracts that are fully and unconditionally guaranteed, and meet the fully-benefit responsive investment contract (FBRIC) criteria. Contract value is the relevant measure for direct FBRICs because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan. Contract value represents contributions made under the contract, plus earnings and less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

Contributions to the GSRA and SRA accounts are used to purchase a contractual or guaranteed amount of future benefits for the participants. The GSRA and SRA accounts provide a guarantee of principal, a guaranteed minimum rate of interest, and the potential for additional interest if declared by TIAA. The guaranteed annual interest rate is 3% for all contributions (premiums) since 1979 under all TIAA Traditional Annuity accumulating contracts.

The Plan's ability to receive amounts due is dependent on the issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments.

Certain events might limit the ability of the Plan to transact at contract value with the issuer. Such events include (1) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the Plan Sponsor or other Plan Sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA, and (5) premature termination of the contract. No events that might limit the ability of the Plan to transact at contract value with the participants are considered probable.

In addition, certain events allow the issuer to terminate the contract with the Plan and settle at an amount different from contract value. Such events include (1) an uncured violation of the Plan's investment guidelines, (2) a breach of material obligation under the contract, (3) a material misrepresentation, and (4) a material amendment to the agreement without the consent of the issuer.

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
December 31, 2021 and 2020

NOTE 6. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, credit, and market 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 participants' account balances and the amounts reported in the statements of net assets available for benefits.

As a result of economic uncertainty and volatility in financial markets, various investment securities held by the Plan have incurred significant declines in fair value since December 31, 2021. The markets continue to evolve rapidly, and Plan management is not able at this time to estimate the full impact on the Plan's financial statements.

NOTE 7. RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

Plan investments are shares of mutual funds, variable annuities, pooled separate accounts, and benefit and non-benefit responsive investment contracts managed by TIAA. TIAA is the record keeper and the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for investment management services are included in net appreciation in fair value of investments, as they are paid through revenue sharing, rather than direct payments. The Plan paid administrative fees to TIAA amounting to \$6,467 and \$5,432, during the years ended December 31, 2021 and 2020, respectively.

The Plan Sponsor pays directly any other fees related to the Plan's operations which are not expected to be reimbursed by the Plan. The Plan Administrator is an employee of the Plan Sponsor. There are no direct transactions between these parties other than contributions to the Plan and normal benefit payments.

NOTE 8. PARTIAL TERMINATION

In March 2020, the Plan Sponsor had significant lay-offs due to COVID-19 causing a partial plan termination. All affected employees who were participants in the Plan were fully vested in their account balances at the date of the partial plan termination.

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
NOTES TO FINANCIAL STATEMENTS (CONTINUED)
December 31, 2021 and 2020

NOTE 9. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of investment income per the financial statements for the years ended December 31, 2021 and 2020, to Schedule H of Form 5500.

	<u>2021</u>	<u>2020</u>
Interest and dividends per financial statements	\$ 79,816	\$ 56,433
Difference in reporting investment income on Form 5500	<u>(12)</u>	<u>(44)</u>
Interest and dividends per Form 5500	<u>\$ 79,804</u>	<u>\$ 56,389</u>
Net appreciation in fair value of investments per financial statements	\$ 514,603	\$ 576,984
Difference in reporting investment income on Form 5500	<u>12</u>	<u>44</u>
Net appreciation in fair value of investments per Form 5500	<u>\$ 514,615</u>	<u>\$ 577,028</u>

SUPPLEMENTAL SCHEDULE

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
SCHEDULE OF ASSETS HELD AT END OF YEAR
SCHEDULE H, SECTION IV LINE 4i
EIN 47-5427975
December 31, 2021

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral or maturity value	** (d) Cost	(e) Current value
<u>Variable Annuities</u>				
*	TIAA	CREF Stock	\$	455,127
*	TIAA	CREF Money Market		151,961
*	TIAA	CREF Social Choice		133,216
*	TIAA	CREF Bond Market		110,316
*	TIAA	CREF Global Equities		214,038
*	TIAA	CREF Growth		295,026
*	TIAA	CREF Equity Index		200,154
*	TIAA	CREF Inflation-Linked Bond		91,385
*	TIAA	TIAA Access Bond Plus T4		32,654
*	TIAA	TIAA Access Equity Index T4		447
*	TIAA	TIAA Access Growth & Income T4		10,541
*	TIAA	TIAA Access Intl Equity T4		46,333
*	TIAA	TIAA Access Lg-Cap Gr T4		10,817
*	TIAA	TIAA Access Lg-Cap Val T4		16,094
*	TIAA	TIAA Access Lifecycle 2010 T4		1,102
*	TIAA	TIAA Access Lifecycle 2020 T4		30,270
*	TIAA	TIAA Access Lifecycle 2025 T4		587
*	TIAA	TIAA Access Lifecycle 2035 T4		13,687
*	TIAA	TIAA Access Lifecycle 2040 T4		77,862
*	TIAA	TIAA Access Lifecycle 2045 T4		70,838
*	TIAA	TIAA Access Lifecycle 2050 T4		95,228
*	TIAA	TIAA Access Lifecycle 2055 T4		11,185
*	TIAA	TIAA Access Mid-Cap Gr T4		50,629
*	TIAA	TIAA Access Mid-Cap Val T4		26,482
*	TIAA	TIAA Access Real Est Secs T4		18,548
*	TIAA	TIAA Access Sm-Cap BI Idx T4		26,125
*	TIAA	TIAA Access Sm-Cap Equity T4		2,338
*	TIAA	TIAA Access Social Ch Eq T4		11,086
Total variable annuities				<u>2,204,076</u>
<u>Mutual Funds</u>				
*	TIAA	TIAA-CREF Lfcyle Idx 2010-Rtmt		4,152
*	TIAA	TIAA-CREF Lfcyle Idx 2015-Rtmt		30,625
*	TIAA	TIAA-CREF Lfcyle Idx 2020-Rtmt		61,686
*	TIAA	TIAA-CREF Lfcyle Idx 2025-Rtmt		119,205
*	TIAA	TIAA-CREF Lfcyle Idx 2030-Rtmt		115,973
*	TIAA	TIAA-CREF Lfcyle Idx 2035-Rtmt		369,650
*	TIAA	TIAA-CREF Lfcyle Idx 2040-Rtmt		73,699
*	TIAA	TIAA-CREF Lfcyle Idx 2045-Rtmt		332,670

YELLOWSTONE FOREVER
401(K) RETIREMENT PLAN NO. 004
SCHEDULE OF ASSETS HELD AT END OF YEAR (CONTINUED)
SCHEDULE H, SECTION IV LINE 4i
EIN 47-5427975
December 31, 2021

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral or maturity value	** (d) Cost	(e) Current value
<u>Mutual Funds (Continued)</u>				
*	TIAA	TIAA-CREF Lfcyle Idx 2050-Rtmt		324,280
*	TIAA	TIAA-CREF Lfcyle Idx 2055-Rtmt		179,222
*	TIAA	TIAA-CREF Lfcyle Idx 2060-Rtmt		22,896
*	TIAA	TIAA-CREF Lfcyle Idx Rtln-Rtmt		19,925
*	TIAA	TIAA-CREF Money Market-Rtmt		3,309
	Metropolitan West	Metropolitan West Tot Ret Bd M		21,814
	Vanguard	Vanguard 500 Idx Adm		156,481
	Vanguard	Vanguard Ttl Bd Mkt Idx Adm		32,277
	Virgin Galactic Holdings	MFS Mid Cap Value Class R4		21,317
	American Funds	AF EuroPacific Growth Fund R4		53,844
	Vanguard	Vanguard Extended Mkt Idx Adm		148,926
	Vanguard	Vanguard Ttl Intl Stk Idx Adm		72,463
	Harbor Capital	Harbor Capital Appreciation In		32,675
	MFS	MFS Value Fund Class R4		14,991
	MFS	MFS Mid Cap Growth Fund R4		59,749
	Allspring	Allspring Special Small Cap Val R6		8,155
	Principal	Principal Small Cap GRW I R5		26,845
	Total mutual funds			<u>2,306,829</u>
<u>Pooled Separate Accounts</u>				
*	TIAA	TIAA Real Estate		<u>149,194</u>
<u>Insurance Company General Contracts</u>				
*	TIAA	TIAA Traditional Non-benefit Responsive		188,375
*	TIAA	TIAA Traditional Non-benefit Responsive 2		60,265
*	TIAA	TIAA Traditional Benefit Responsive		<u>157,470</u>
	Total benefit/non-benefit responsive investment contracts			<u>406,110</u>
*	Participant loans	Interest rate 5.75% (Scheduled maturity 2024)	-	<u>1,610</u>
	Total assets			<u>\$ 5,067,819</u>

* Represents a party-in-interest as defined by ERISA.

** Cost information was omitted as allowed for participant-directed assets.



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Schedule H, Line 4i
Schedule of Assets (Held At End of Year)

Name of Plan:

► Yellowstone Forever 401(k) Retirement Plan

Employer Identification Number:► 47-5427975

For plan year (beginning/ending):► 1/1/2021 to 12/31/2021

Plan number:► 004

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
*	College Retirement Equities Fund variable annuities	TIAA Traditional Benefit Responsive		\$ 157,470.36
*	College Retirement Equities Fund variable annuities	TIAA Traditional Non Benefit Responsive		\$ 188,374.67
*	College Retirement Equities Fund variable annuities	TIAA Traditional Non Benefit Responsive 2		\$ 60,265.22
*	College Retirement Equities Fund variable annuities	CREF Stock R1		\$ 455,126.70
*	College Retirement Equities Fund variable annuities	CREF Money Market R1		\$ 151,960.91
*	College Retirement Equities Fund variable annuities	CREF Social Choice R1		\$ 133,216.00
*	College Retirement Equities Fund variable annuities	CREF Bond Market R1		\$ 110,316.18
*	College Retirement Equities Fund variable annuities	CREF Global Equities R1		\$ 214,037.78
*	College Retirement Equities Fund variable annuities	CREF Growth R1		\$ 295,026.13
*	College Retirement Equities Fund variable annuities	CREF Equity Index R1		\$ 200,153.54
*	College Retirement Equities Fund variable annuities	CREF Inflation-Linked Bond R1		\$ 91,384.65
*	College Retirement Equities Fund variable annuities	TIAA Real Estate		\$ 149,193.98
*	College Retirement Equities Fund variable annuities	TIAA Access Core Bond Plus T4		\$ 32,654.02
*	College Retirement Equities Fund variable annuities	TIAA Access Equity Index T4		\$ 446.62
*	College Retirement Equities Fund variable annuities	TIAA Access Growth & Income T4		\$ 10,541.48
*	College Retirement Equities Fund variable annuities	TIAA Access Intl Equity T4		\$ 46,332.84
*	College Retirement Equities Fund variable annuities	TIAA Access Lg-Cap Gr T4		\$ 10,817.21
*	College Retirement Equities Fund variable annuities	TIAA Access Lg-Cap Val T4		\$ 16,094.33
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2010 T4		\$ 1,102.27
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2020 T4		\$ 30,269.92
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2025 T4		\$ 586.76
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2035 T4		\$ 13,687.00
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2040 T4		\$ 77,861.85
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2045 T4		\$ 70,838.26
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2050 T4		\$ 95,227.81
*	College Retirement Equities Fund variable annuities	TIAA Access Mid-Cap Gr T4		\$ 50,628.90
*	College Retirement Equities Fund variable annuities	TIAA Access Mid-Cap Val T4		\$ 26,481.99
*	College Retirement Equities Fund variable annuities	TIAA Access Real Est Secs T4		\$ 18,547.87
*	College Retirement Equities Fund variable annuities	TIAA Access Sm-Cap Bl Idx T4		\$ 26,124.68
*	College Retirement Equities Fund variable annuities	TIAA Access Quant Sml Cp Eq T4		\$ 2,337.53
*	College Retirement Equities Fund variable annuities	TIAA Access Social Ch Eq T4		\$ 11,086.36
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx 2010-Rtmt		\$ 4,152.10
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx 2015-Rtmt		\$ 30,625.09
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx 2020-Rtmt		\$ 61,686.01
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx 2025-Rtmt		\$ 119,205.17
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx 2030-Rtmt		\$ 115,973.38
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx 2035-Rtmt		\$ 369,650.28
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx 2040-Rtmt		\$ 73,699.28
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx 2045-Rtmt		\$ 332,669.57
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx 2050-Rtmt		\$ 324,279.50
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx 2055-Rtmt		\$ 179,221.94
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx Rtln-Rtmt		\$ 19,925.22
*	College Retirement Equities Fund variable annuities	TIAA-CREF Money Market-Rtmt		\$ 3,309.34
	College Retirement Equities Fund variable annuities	Metropolitan West Tot Ret Bd M		\$ 21,813.90
	College Retirement Equities Fund variable annuities	MFS Value Fund Class R4		\$ 14,991.07
	College Retirement Equities Fund variable annuities	Vanguard 500 Idx Adm		\$ 156,480.87
	College Retirement Equities Fund variable annuities	Vanguard Ttl Bd Mkt Idx Adm		\$ 32,277.46
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2055 T4		\$ 11,185.04
*	College Retirement Equities Fund variable annuities	TIAA-CREF Lfcyle Idx 2060-Rtmt		\$ 22,895.75
	College Retirement Equities Fund variable annuities	MFS Mid Cap Value Class R4		\$ 21,317.39
	College Retirement Equities Fund variable annuities	AF EuroPacific Growth Fund R4		\$ 53,844.40
	College Retirement Equities Fund variable annuities	Vanguard Extended Mkt Idx Adm		\$ 148,925.73
	College Retirement Equities Fund variable annuities	Vanguard Ttl Intl Stk Idx Adm		\$ 72,463.34
	College Retirement Equities Fund variable annuities	Allspring Spec SmallCap Val R6		\$ 8,154.89
	College Retirement Equities Fund variable annuities	Principal Small Cap Grw I R5		\$ 26,845.36
	College Retirement Equities Fund variable annuities	MFS Mid Cap Growth Fund R4		\$ 59,748.99
	College Retirement Equities Fund variable annuities	Harbor Capital Appreciation In		\$ 32,675.31
	College Retirement Equities Fund variable annuities	Participant Loan Fund		\$ 1,610.08
	Total			\$ 5,067,819