

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>GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/1974</u></td> </tr> <tr> <td colspan="2">2b Employer Identification Number (EIN) <u>94-1551410</u></td> </tr> <tr> <td colspan="2">2c Plan Sponsor's telephone number <u>510-562-8470</u></td> </tr> <tr> <td colspan="2">2d Business code (see instructions) <u>813000</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>01/01/1974</u>		2b Employer Identification Number (EIN) <u>94-1551410</u>		2c Plan Sponsor's telephone number <u>510-562-8470</u>		2d Business code (see instructions) <u>813000</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>										
1c Effective date of plan <u>01/01/1974</u>											
2b Employer Identification Number (EIN) <u>94-1551410</u>											
2c Plan Sponsor's telephone number <u>510-562-8470</u>											
2d Business code (see instructions) <u>813000</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>GIRL SCOUTS OF NORTHERN CALIFORNIA</u> <u>1650 HARBOR BAY PARKWAY, SUITE 100</u> <u>ALAMEDA, CA 94502</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.	10/13/2022	HERNA CRUZ-LOUIE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2021)
v. 210624

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	220
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).			
a(1) Total number of active participants at the beginning of the plan year.....		6a(1)	127
a(2) Total number of active participants at the end of the plan year		6a(2)	114
b Retired or separated participants receiving benefits.....		6b	0
c Other retired or separated participants entitled to future benefits		6c	104
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	218
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	218
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	218
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	6
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: 2F 2G 2L 2M 2T 3D			
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>2</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 GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 GIRL SCOUTS OF NORTHERN CALIFORNIA	D Employer Identification Number (EIN) 94-1551410

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
THE VARIABLE ANNUITY LIFE INSURANCE CO.

(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
74-1625348	70238	14625	10	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
19	0

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
JEFFREY ISLEY
2929 ALLEN PARKWAY
HOUSTON, TX 77019

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
19			3

(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	90197
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	76731

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	67409
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c	Additions: (1) Contributions deposited during the year	7c(1)		
	(2) Dividends and credits.....	7c(2)		
	(3) Interest credited during the year.....	7c(3)	1975	
	(4) Transferred from separate account.....	7c(4)	24881	
	(5) Other (specify below)	7c(5)		
	▶			

(6) Total additions	7c(6)	26856
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d	Total of balance and additions (add lines 7b and 7c(6))	7d	94265
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e	Deductions:			
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	4067	
	(2) Administration charge made by carrier.....	7e(2)		
	(3) Transferred to separate account.....	7e(3)		
	(4) Other (specify below)	7e(4)	1	
	▶ CONTRACT SURRENDER CHARGES			

(5) Total deductions	7e(5)	4068
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f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	90197
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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 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 GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 GIRL SCOUTS OF NORTHERN CALIFORNIA	D Employer Identification Number (EIN) 94-1551410

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
MUTUAL OF AMERICA LIFE INSURANCE COMPANY

(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
13-1614399	88668	069625-K	68	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	115928
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	149448

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	112749
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c	Additions: (1) Contributions deposited during the year	7c(1)	1	
	(2) Dividends and credits.....	7c(2)	3371	
	(3) Interest credited during the year.....	7c(3)		
	(4) Transferred from separate account.....	7c(4)		
	(5) Other (specify below)	7c(5)		
	▶			

(6) Total additions	7c(6)	3372
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d Total of balance and additions (add lines 7b and 7c(6))	7d	116121
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e Deductions:			
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)		
(2) Administration charge made by carrier.....	7e(2)	193	
(3) Transferred to separate account.....	7e(3)		
(4) Other (specify below)	7e(4)		
▶			

(5) Total deductions	7e(5)	193
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	115928
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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 GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 GIRL SCOUTS OF NORTHERN CALIFORNIA	D Employer Identification Number (EIN) 94-1551410	

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	
FIDELITY MANAGEMENT & RESEARCH CO	82 DEVONSHIRE STREET BOSTON, MA 02109

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
THE VANGUARD GROUP	PO BOX 2600 VALLEY FORGE, PA 19482-2600

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
DEUTSCHE INVESTMENT MANAGEMENT AMER	222 SOUTH RIVERSIDE PLAZA CHICAGO, IL 60606-5808

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
OPPENHEIMER FUNDS INC	PO BOX 5270 DENVER, CO 80217-5270

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

AMERICAN CENTURY INVESTMENT MGMNT

PO BOX 419786
KANSAS CITY, MO 64141-6786**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

CALVERT INVESTMENT MGMNT INC

4550 MONTGOMERY AVENUE
SUITE 1000N
BETHESDA, MD 20814**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

CAPITAL RESEARCH AND MANAGEMENT CO

333 SOUTH HOPE STREET
LOS ANGELES, CA 90071**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

PIMCO

840 NEWPORT CENTER
NEWPORT BEACH, CA 92660**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

T. ROWE PRICE ASSOC., INC.

100 EAST PRATT STREET
BALTIMORE, MD 21202**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

MFS VARIABLE INSURANCE TRUST III

111 HUTINGTON AVENUE
BOSTON, MA 02199**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

VICTORY VARIABLE INS FUNDS

4900 TIEDEMAN RD., 4TH FL
BROOKLYN, OH 44144**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

NEUBERGER BERMAN BD LLC

1290 AVENUE OF THE AMERICAS
NEW YORK, NY 10104

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

GOLDMAN SACHS VAR INS TRUST

200 WEST ST.
NEW YORK, NY 10282

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

DELAWARE VIP TRUST

ONE COMMERCE SQUARE
2005 MARKET ST.
PHILADELPHIA, PA 19103

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

THE VARIABLE ANNUITY LIFE INS CO

74-1625348

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

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

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

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

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

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)

MUTUAL OF AMERICA LIFE INS CO

320 PARK AVENUE
NEW YORK, NY 10022

(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?
12 15 37 65	NONE	401	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

T. ROWE PRICE RPS INC

52-1309931

(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?
15	NONE	0	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 ☐

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
T. ROWE PRICE RPS INC.	15 59	0
(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.	
VARIOUS INVESTMENTS 100 EAST PRATT STREET BALTIMORE, MD 21202	SEE ATTACHED	
(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
(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

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

(complete as many entries as needed)

a Name:	MOSS ADAMS LLP	b EIN:	91-0189318
c Position:	INDEPENDENT AUDITOR		
d Address:	101 SECOND STREET, SUITE 900 SAN FRANCISCO, CA 94105	e Telephone:	415-956-1500

Explanation: MOSS ADAMS LLP LOOKED AT THE MAJORITY OF ITS CLIENT BASE AND MEASURED THEM BASED ON VARIOUS FACTORS. AS A RESULT OF THIS ANALYSIS, THEY WILL NOT BE ABLE TO PERFORM 2021 AUDIT OF 403(B) PLAN.

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.
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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 <u>GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>GIRL SCOUTS OF NORTHERN CALIFORNIA</u>	D Employer Identification Number (EIN) <u>94-1551410</u>	

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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>SEPARATE ACCOUNT NUMBER 2</u>		
b Name of sponsor of entity listed in (a): <u>MUTUAL OF AMERICA LIFE INSURANCE COMPANY</u>		
c EIN-PN <u>13-1614399-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>149448</u>
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)**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
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 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 GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 GIRL SCOUTS OF NORTHERN CALIFORNIA	D Employer Identification Number (EIN) 94-1551410	

Part I	Asset and Liability Statement
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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)	80357	34043
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	8977241	10836421
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	346760	206125
(15) Other.....	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(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	9404358	11076589

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	9404358	11076589
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	184982	
(B) Participants	2a(1)(B)	668714	
(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)		853696
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)	2670	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2670
(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)	492462	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		492462
(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)		
(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)		867898
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		2216726
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	542960	
(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)		542960
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)	1535	
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		1535
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		544495
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		1672231
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: YULISHANA

(2) EIN: 85-0711727

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?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	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.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ 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.
---	--	---

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 GIRL SCOUTS OF NORTHERN CALIFORNIA	D Employer Identification Number (EIN) 94-1551410

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): 52-1309931 74-1625348		
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)?	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes	☐ No	☐ N/A

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

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

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

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

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 _____



Girl Scouts of Northern California 403(b) Plan

Financial Statements
and Supplemental Schedule

December 31, 2021 and 2020
and For the Year Ended December 31, 2021

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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator
Girl Scouts of Northern California 403(b) Plan
Alameda, CA

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2021 Financial Statements

We were engaged to perform an audit of the financial statements of Girl Scouts of Northern California 403(b) Plan ("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 ("2021 Financial Statements").

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2021 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 certifications from qualified institutions as of and for the year ended December 31, 2021, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Disclaimer of Opinion

We do not express an opinion on the accompanying financial statements of the Plan. Because of the significance of the matters described in the Basis for Disclaimer of Opinion section of our report, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the financial statements.

Basis for Disclaimer of Opinion

The Plan has not maintained sufficient accounting records and supporting documents relating to certain annuity contracts and custodial accounts issued to current and former employees prior to January 1, 2009. Accordingly, we were unable to apply auditing procedures sufficient to determine the extent to which the accompanying financial statements may have been affected by these conditions.

Responsibilities of Management for the 2021 Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the 2021 Financial Statements

Our responsibility is to conduct an audit of the Plan's financial statements in accordance with auditing standards generally accepted in the United States of America and to issue an auditor's report. However, because of the matters described in the Basis for Disclaimer of Opinion section of our report, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on these financial statements.

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 audits.

Other Matter - 2021 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. Because of the significance of the matters described in the Basis for Disclaimer of Opinion section, it is inappropriate to and we do not express an opinion on the supplemental schedule referred to above.

Other Matter - Auditor's Report on the 2020 financial statement

The 2020 financial statement of Girl Scouts of Northern California 403(b) Plan was audited by predecessor auditors. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the plan administrator instructed the predecessor auditor not to perform, and they did not perform any auditing procedures with respect to the information certified by a qualified institution. Their report dated October 11, 2021, indicated that (a) because of the significance of the information that they did not audit, they were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and accordingly, they did not express an opinion on the 2020 financial statement and supplemental schedule, and (b) the form and content of the information included in the 2020 financial statement and supplemental schedule other than that derived from the certified information, were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.



San Jose, California
October 6, 2022

Girl Scouts of Northern California 403(b) Plan
Statements of Net Assets Available for Benefits
December 31, 2021 and 2020

ASSETS	2021	2020
Investments, at fair value:		
Interest accumulation account	\$ 115,928	\$ 112,749
Mutual funds	10,686,973	8,977,241
Pooled separate accounts	149,448	142,504
Total investments, at fair value	10,952,349	9,232,494
Guaranteed investment contracts, at contract value	90,197	91,507
Total investments	11,042,546	9,324,001
Notes receivable from participants	34,043	80,357
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 11,076,589</u>	<u>\$ 9,404,358</u>

The accompanying notes are an integral part of these financial statements.

Girl Scouts of Northern California 403(b) Plan
Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2021

ADDITIONS TO NET ASSETS

Contributions:

Participant deferrals	\$ 668,714
Employer contributions	184,982
Total contributions	<u>853,696</u>

Investment income:

Dividend and interest income	828,653
Net appreciation in fair value of investments	531,707
Total investment income	<u>1,360,360</u>

Interest income on notes receivable from participants	<u>2,670</u>
---	--------------

Total additions to net assets	<u>2,216,726</u>
-------------------------------	------------------

DEDUCTIONS FROM NET ASSETS

Benefits paid to participants	542,960
Administrative expenses	1,535
Total deductions from net assets	<u>544,495</u>

CHANGE IN NET ASSETS AVAILABLE FOR BENEFITS	<u>1,672,231</u>
---	------------------

NET ASSETS AVAILABLE FOR BENEFITS, BEGINNING OF YEAR	<u>9,404,358</u>
--	------------------

NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR	<u><u>\$ 11,076,589</u></u>
--	-----------------------------

The accompanying notes are an integral part of these financial statements.

Girl Scouts of Northern California 403(b) Plan
Notes to Financial Statements
December 31, 2021 and 2020

1. DESCRIPTION OF THE PLAN

The following description of Girl Scouts of Northern California 403(b) Plan ("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 403(b) defined contribution savings plan sponsored by Girl Scouts of Northern California ("Organization" or "Employer"). The Plan was established in 1974 and is subject to the provisions of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Plan administration

The Organization has contracted with T. Rowe Price Trust Company ("T. Rowe Price"), Mutual of America Life Insurance Company ("Mutual of America") and American International Group, Inc. Retirement Services ("AIG"), as a representative for The Variable Annuity Life Insurance Company ("VALIC"), to act as the custodians of the Plan's assets (collectively, "Custodians").

Eligibility

The Plan covers substantially all employees who normally work more than 20 hours per week, except for certain nonresident aliens. Participants must attain age 18 to be eligible to receive discretionary employer matching contributions.

Contributions

Each year, participants may contribute up to 100% of their eligible pre-tax or after-tax (as Roth contributions) compensation, as defined by the plan document, up to the maximum annual amount allowed by the Internal Revenue Code ("IRC"). Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Eligible employees are automatically enrolled in the Plan at 6% of their eligible pre-tax compensation unless they affirmatively opt out of participation.

Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans.

Participants direct the investment of contributions to their respective accounts into the investment options offered by the Plan.

The Organization is also allowed to make discretionary matching contributions to the Plan. During the year ended December 31, 2021, the Organization made discretionary matching contributions equal to 50% of employee deferrals up to 6% of eligible compensation, as defined in the plan document, for a total of approximately \$185,000, net of forfeitures.

Vesting

Participants are immediately 100% vested in their elective contributions plus earnings thereon. Participants vest in the Organization's contributions based upon years of credited service as defined in the plan document. Effective January 1, 2019, a participant is 33% vested after one year of credited service, 66% vested after two years of credited service and 100% vested after three years of credited service. Prior to January 1, 2019, participants became 50% vested after two years of credited service and 100% vested after 3 years of credited service.

Girl Scouts of Northern California 403(b) Plan
Notes to Financial Statements
December 31, 2021 and 2020

Forfeited account balances

As of December 31, 2021 and 2020, total forfeited account balances included with Plan assets were approximately \$5,700 and \$32,500, respectively. During the year ended December 31, 2021, approximately \$29,000 in forfeitures were used to offset the Organization's discretionary matching contributions and approximately \$2,000 in forfeitures were used to pay plan administrative expenses.

Participant accounts

Each participant's account is credited with the participant's contributions and allocations of any Organization contributions and Plan earnings. Accounts are charged with an allocation of investment losses, if any, and administrative expenses, if not paid by the Organization. Earnings and losses allocations are based strictly on the participant's selection of investments and timing of purchase. Other allocations are based on participant earnings or account balances, as defined in the plan documents. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance. Participants direct the investment of their account into various investment options offered by the Plan.

Notes receivable from participants

Participants may borrow from their account a minimum of \$1,000 and up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. Notes receivable from participants ("participant loans") are issued by the Plan and secured by the balance in the participant's account. Participant loans must be repaid within five years, unless the participant's loan is used to acquire a primary residence, in which case the repayment period may be longer. Participant loans bear a rate of interest equal to the prime rate. Principal and interest are generally paid ratably through payroll deductions with payments made each pay period. Outstanding participant loans at December 31, 2021 bear interest at an annual rate from 3.25% to 5.25%.

In 2020, as part of the CARES Act, the Plan allowed for a suspension of loan payments for all eligible employees until December 31, 2020. Any suspended loan payments were restarted after January 1, 2021. Any suspended loans were re-amortized, with new payment amounts and payoff dates.

Plan loans

As of December 31, 2016, the rate of interest on outstanding loans with AIG was 3%, with various maturities through December 2012. Participant balances in the amount of loans outstanding are used as collateral on the loans. These funds are restricted with respect to withdrawals and transfers while the loan is outstanding. The collateral for defaulted loans will remain in the Plan until the loan is paid in full or the participant becomes eligible for a distribution. The loans themselves are not reported assets of the Plan. The collateral which is reported as assets of the Plan was \$24,426 and \$23,714 as of December 31, 2021 and 2020, respectively. Effective January 1, 2011, participants are no longer allowed to borrow funds from their AIG accounts. Loans are not allowed with Mutual of America.

Girl Scouts of Northern California 403(b) Plan
Notes to Financial Statements
December 31, 2021 and 2020

Payment of benefits

Distributions and withdrawals are payable upon retirement, termination, disability or death. The Plan permits in-service and hardship withdrawals under certain conditions, as described in the plan document. Upon termination, participants with total vested account balances of up to \$1,000 may automatically receive a lump-sum cash distributions from the Plan. Unless affirmatively elected otherwise by the participant, if a participant's vested account balance is greater than \$1,000 and less than \$5,000, the balance may be automatically rolled over into an individual retirement account, preselected by the Organization. If a participant's vested account balance is greater than \$5,000, the participant may consent to either a distribution from the Plan or postpone payment to a later date and remain in the Plan, as described in the plan document.

With the adoption of the CARES Act, qualified participants were able to take coronavirus related distributions up to \$100,000 or 100% of their vested account balance from March 27, 2020 through December 31, 2020. Mandatory tax withholdings and early withdrawal penalties were waived, and ordinary income taxes may be paid over a three-year period. Participants are permitted to repay the distribution over a three-year period. In addition, required minimum distributions for individuals who have reached age 70 ½ have been waived.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of accounting and financial statement presentation

The financial statements of the Plan are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

Use of estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and the change therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Contributions and contributions receivable

Contributions from participants are recorded based on the date the contributions are separated from a participant's pay by the Organization, which is the pay date. Contributions from the Organization are recorded in the year earned to coincide with the year the Organization records the contributions in its financial statements. Rollover contributions from participants are recorded based on the date the contributions are received by the Custodians.

Investment valuation

The Plan's investments are reported at fair value and contract value as certified by the Custodians.

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an ordinary transaction between market participants at the measurement date.

Contract value is the relevant measurement for assets invested in fully benefit-responsive investment contracts because contract value is the amount participants would normally receive if they were to initiate permitted transactions under the terms of the Plan.

Girl Scouts of Northern California 403(b) Plan
Notes to Financial Statements
December 31, 2021 and 2020

Income recognition

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

Notes receivable from participants

Participant loans are recorded at their unpaid principal balance plus any accrued but unpaid interest. Interest income on participant loans is recorded on an accrual basis. Delinquent notes receivable are reclassified as distributions upon the occurrence of a distributable event based upon the terms of the plan document. No allowance for credit losses has been recorded as of December 31, 2021 and 2020.

Payment of benefits

Benefits are recorded when paid.

Administrative expenses

Certain administrative expenses of the Plan were paid directly by the Organization for the year ended December 31, 2021. The Plan is not expected to reimburse the Organization. Investment fees, which may vary according to the individual investment options selected, are paid out of the assets of the Plan.

Subsequent events

The Plan has evaluated subsequent events through October 6, 2022, the date the financial statements were available to be issued.

3. INFORMATION PREPARED AND CERTIFIED BY THE CUSTODIANS

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted under such election, the following information was certified as complete and accurate by the Custodians, and was not subjected to any auditing procedures performed by the independent auditors:

- Investments and notes receivable from participants reflected on the accompanying Statements of Net Assets Available for Benefits as of December 31, 2021 and 2020.
- Net appreciation in fair value of investments, dividend and interest income, and interest income on notes receivable from participants reflected on the accompanying Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2021.
- Investments reflected on the Schedule of Assets (Held at End of Year).

4. FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3).

Girl Scouts of Northern California 403(b) Plan
Notes to Financial Statements
December 31, 2021 and 2020

The three levels of the fair value hierarchy are described as follows:

- Level 1 - inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities the Plan has the ability to access.
- Level 2 - inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; and inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3 - inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value on a recurring basis. There have been no changes in the methodologies used as of December 31, 2021 and 2020.

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

Pooled separate accounts: Units held in pooled separate accounts ("PSA") are valued using the NAV practical expedient of the PSA as reported by the account managers. The NAV practical expedient is based on the fair value of the underlying assets owed by the PSA, minus its liabilities, and then divided by the number of units outstanding. There are no redemption restrictions for these accounts.

Interest accumulation account: Mutual of America's General Account ("General Account") is stated to be an interest accumulation account and determined by Mutual of America to be comparable to a cash equivalent. Interest bearing cash is valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer. Funds in the General Account are completely liquid, with no front or back-end charges. The interest rate credited to funds in the General Account is a current rate and is not dependent upon the length of time the assets are invested with Mutual of America; requests for withdrawal may be made at any time and are not dependent upon securities being liquidated; and there are no deferred sales charges, loan assessments, or interest rate adjustments that would impact the value of the funds.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future values. Furthermore, although the Plan 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.

Girl Scouts of Northern California 403(b) Plan
Notes to Financial Statements
December 31, 2021 and 2020

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2021:

	Level 1	Level 2	Level 3	Total
Interest accumulation account	\$ 115,928	\$ -	\$ -	\$ 115,928
Mutual funds	10,686,973	-	-	10,686,973
Total assets in the fair value hierarchy	<u>\$ 10,802,901</u>	<u>\$ -</u>	<u>\$ -</u>	<u>10,802,901</u>
Investments measured at NAV practical expedient				<u>149,448</u>
Investments at fair value				<u>\$ 10,952,349</u>

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2020:

	Level 1	Level 2	Level 3	Total
Interest accumulation account	\$ 112,749	\$ -	\$ -	\$ 112,749
Mutual funds	8,977,241	-	-	8,977,241
Total assets in the fair value hierarchy	<u>\$ 9,089,990</u>	<u>\$ -</u>	<u>\$ -</u>	<u>9,089,990</u>
Investments measured at NAV practical expedient				<u>142,504</u>
Investments at fair value				<u>\$ 9,232,494</u>

5. RISKS AND UNCERTAINTIES

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

In March 2020, the COVID-19 outbreak was declared a pandemic by the World Health Organization. The COVID-19 pandemic has also led to extreme volatility in financial markets and has affected, and may continue to affect, the market price of Plan assets. While the potential economic impact brought by, and the duration of, COVID-19 may be difficult to assess or predict, a widespread pandemic could result in significant disruption of global financial markets. The extent to which COVID-19 impacts the financial markets will depend on future developments that are highly uncertain and cannot be predicted.

6. TAX STATUS

The Plan has been designed to qualify under Section 403(b) of the IRC. The Plan has adopted a volume submitter plan document that has received an opinion letter from the Internal Revenue Service ("IRS") dated March 31, 2017. The Plan has been amended since the receipt of the letter from the IRS, however the plan administrator believes the Plan has been operated in accordance with the provisions of the IRC and its associated trust is tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Girl Scouts of Northern California 403(b) Plan
Notes to Financial Statements
December 31, 2021 and 2020

7. PARTY-IN-INTEREST TRANSACTIONS

Parties-in-interest are defined by ERISA as any fiduciary of the Plan, any party rendering services to the Plan, the Organization, and certain others. Certain Plan investments are managed by the Custodians, or their affiliates. As such, transactions conducted by the Custodians or their affiliates, including fee offset agreements, qualify as party-in-interest transactions. Also, the Organization pays certain fees and expenses on behalf of the Plan. These transactions qualify as party-in-interest transactions, however, they are exempt from the prohibited transaction rules under ERISA.

The Custodians retain, as compensation for services provided to the Plan, any interest (or “float”) on amounts earned while certain transactions are pending. This applies to both contributions and distributions. Earnings are at institutional money market rates.

8. PLAN TERMINATION

Although it has not expressed any intent to do so, the Organization has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. Participants would become fully vested in their account balances in the event the Plan is terminated.

9. HISTORICAL PLAN ADMINISTRATION

Prior to 2009, the Plan’s service providers tracked contributions, investment earnings, distributions, and other activity on a contract basis. Each participant was set up as having a separate contract and Plan level activity was not captured. This method of administration was utilized prior to January 1, 2009, as the regulations governing 403(b) plans did not require plan level reporting. As a result of this administration and lack of historical plan level financial reporting, the plan administrator is unable to obtain plan level information prior to January 1, 2009.

SUPPLEMENTAL SCHEDULE

Girl Scouts of Northern California 403(b) Plan
 EIN: 94-1551410; Plan: 001
 Schedule H, Part IV, Line 4(i) - Schedule of Assets (Held at End of Year)
 December 31, 2021

(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
T. Rowe Price Trust Company:				
*	T. Rowe Price New Horizons Fund	Mutual Fund	** \$	546,688
*	T. Rowe Price Government Money Fund	Mutual Fund	**	139,728
*	T. Rowe Price Spectrum Income Fund	Mutual Fund	**	11,249
*	T. Rowe Price Equity Income Fund	Mutual Fund	**	720,184
*	T. Rowe Price Extended Equity Market	Mutual Fund	**	226,576
*	T. Rowe Price U.S. Bond Enhanced Index Fund	Mutual Fund	**	109,477
*	T. Rowe Price International Equity Index Fund	Mutual Fund	**	217,040
*	T. Rowe Price Retirement 2010 Fund	Mutual Fund	**	25,966
*	T. Rowe Price Retirement 2020 Fund	Mutual Fund	**	1,051,829
*	T. Rowe Price Retirement 2030 Fund	Mutual Fund	**	687,189
*	T. Rowe Price Retirement 2040 Fund	Mutual Fund	**	731,910
*	Alliance Bernstein Discovery Value Fund	Mutual Fund	**	1,049
*	T. Rowe Price Retirement 2015 Fund	Mutual Fund	**	353,967
*	T. Rowe Price Retirement 2025 Fund	Mutual Fund	**	1,649,305
*	T. Rowe Price Retirement 2035 Fund	Mutual Fund	**	1,144,748
*	T. Rowe Price Retirement 2045 Fund	Mutual Fund	**	915,156
*	Neuberger Berman Sustainable Equity Index Fund	Mutual Fund	**	74,061
*	T. Rowe Price Retirement 2050 Fund	Mutual Fund	**	628,094
*	T. Rowe Price Retirement 2055 Fund	Mutual Fund	**	1,150,533
	Fidelity Contrafund	Mutual Fund	**	225,493
The Variable Annuity Life Insurance Company:				
*	Core Bond Fund	Mutual Fund	**	64
*	Dividend Value Fund	Mutual Fund	**	50
*	Emerging Economies Fund	Mutual Fund	**	2,868
*	Global Real Estate Fund	Mutual Fund	**	53
*	Growth Fund	Mutual Fund	**	15,373
*	High Yield Bond Fund	Mutual Fund	**	33
*	Inflation Protected Fund	Mutual Fund	**	50
*	International Value Fund	Mutual Fund	**	77
*	International Equities Index Fund	Mutual Fund	**	164
*	International Opportunities Fund	Mutual Fund	**	65
*	Invesco Balanced-Risk Commodity Strategy Fund	Mutual Fund	**	33
*	Large Capital Growth Fund	Mutual Fund	**	21,239
*	Mid Cap Index Fund	Mutual Fund	**	149
*	Mid Cap Value Fund	Mutual Fund	**	84
*	Small Cap Growth Fund	Mutual Fund	**	12,353
*	Small Cap Index Fund	Mutual Fund	**	31
*	Small Cap Value Fund	Mutual Fund	**	33
*	Stock Index Fund	Mutual Fund	**	14,425
*	Systematic Value Fund	Mutual Fund	**	9,322
*	US Socially Responsible Fund	Mutual Fund	**	143
*	Vanguard Windsor Fund	Mutual Fund	**	122
*	Fixed Account Plus	Guaranteed Investment Contract	**	24,084
*	Short Term Fixed Account	Guaranteed Investment Contract	**	41,292
*	Loan Collateral Fund	Guaranteed Investment Contract	**	24,426
*	Loan Escrow Fund	Guaranteed Investment Contract	**	395

Girl Scouts of Northern California 403(b) Plan
 EIN: 94-1551410; Plan: 001
 Schedule H, Part IV, Line 4(i) - Schedule of Assets (Held at End of Year)
 December 31, 2021

(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
Mutual of America Life Insurance Company:				
*	Mutual of America Interest Accumulation Account	Interest Accumulation Account	**	115,928
*	Mutual of America Aggressive Allocation Fund	Pooled Separate Account	**	5,887
*	Mutual of America Moderate Allocation Fund	Pooled Separate Account	**	6,799
*	Mutual of America Bond Fund	Pooled Separate Account	**	919
*	Mutual of America Composite Fund	Pooled Separate Account	**	771
*	Calvert VP SRI Balanced Portfolio Fund	Pooled Separate Account	**	1,844
*	Mutual of America Equity Index Fund	Pooled Separate Account	**	8,369
*	Fidelity Investments VIP Mid Cap Fund	Pooled Separate Account	**	766
*	Fidelity Investments VIP Contrafund Portfolio Fund	Pooled Separate Account	**	2,291
*	Fidelity Investments VIP Equity-Income Fund	Pooled Separate Account	**	437
*	Mutual of America Money Market Fund	Pooled Separate Account	**	3,909
*	Mutual of America Mid-Term Bond Fund	Pooled Separate Account	**	202
*	Mutual of America Mid-Cap Equity Index Fund	Pooled Separate Account	**	7,588
*	Mutual of America Mid Cap Value Fund	Pooled Separate Account	**	582
*	Invesco V.I. Main Street Fund	Pooled Separate Account	**	1,879
*	Mutual of America 2020 Retirement Fund	Pooled Separate Account	**	38,481
*	Mutual of America 2045 Retirement Fund	Pooled Separate Account	**	30,860
*	Mutual of America All America Fund	Pooled Separate Account	**	13,102
*	DWS Capital Growth VIP Fund	Pooled Separate Account	**	7,331
*	Mutual of America Small Cap Growth Fund	Pooled Separate Account	**	1,986
*	Mutual of America Small Cap Value Fund	Pooled Separate Account	**	1,319
*	American Century VP Capital Appreciation Fund	Pooled Separate Account	**	11,617
*	Vanguard VIF Diversified Value Portfolio	Pooled Separate Account	**	1,188
*	Vanguard VIF International Portfolio Fund	Pooled Separate Account	**	1,321
*	Notes Receivable from Participants (participant loans)	Interest rates 3.25% to 5.25%	-0-	\$ 34,043
* Indicated party-in-interest to the Plan				
** Cost information not provided as all investments are participant directed				

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 01/01/2021 and ending 12/31/2021	
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 GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN	1b	Three-digit plan number (PN) ▶	001
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) GIRL SCOUTS OF NORTHERN CALIFORNIA 1650 HARBOR BAY PARKWAY, SUITE 100 ALAMEDA CA 94502		1c	Effective date of plan 01/01/1974
		2b	Employer Identification Number (EIN) 94-1551410
		2c	Plan Sponsor's telephone number 510-562-8470
		2d	Business code (see instructions) 813000

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		10/13/2022	Herna Cruz-Louie
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		10/13/2022	Herna Cruz-Louie
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2021)
v. 201209

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	220
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).			
a(1) Total number of active participants at the beginning of the plan year.....		6a(1)	127
a(2) Total number of active participants at the end of the plan year		6a(2)	114
b Retired or separated participants receiving benefits.....		6b	0
c Other retired or separated participants entitled to future benefits		6c	104
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	218
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	218
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	218
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	6
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: 2F 2G 2L 2M 2T 3D			
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>2</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 _____

Report of Indirect Compensation

T. Rowe Price Retirement Plan Services, Inc.



GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN | Period January 1 through December 31, 2021

I. Indirect Plan Investment Expenses

Plan Investment Expense (costs paid indirectly with respect to investments held in the plan during the reporting period)
The Administrative Fees column reflects administrative fee rate(s) in effect for an investment during the period that the investment was available in the Plan during the reporting year.

Investment ^{1,2}	Ticker	Expense Ratio ^{3,4}	Administrative Fees ^{5,6,7}		Website
T. Rowe Price Managed Investments			Effective Date	Annual Rate	Download a Prospectus for a T. Rowe Price Mutual Fund
T. Rowe Price Ext Equity Mkt Index	PEMX	0.25%	01/03/2021	0.19%	
T. Rowe Price New Horizons	PRNHX	0.75%	01/03/2021	0.19%	
T. Rowe Price Government Money	PRRX	0.37%	01/03/2021	0.19%	
T. Rowe Price Equity Index 500	PREIX	0.18%	01/03/2021	0.19%	
TRP Spectrum Income	RPSIX	0.62%	01/03/2021	0.19%	
International Equity Index	PIEQX	0.31%	01/03/2021	0.19%	
TRP U.S. Bond Enhanced Index Fund	PBDIX	0.25%	01/03/2021	0.19%	
T. Rowe Price Retirement 2010	TRRAX	0.49%	01/03/2021	0.19%	
T. Rowe Price Retirement 2020	TRRBX	0.53%	01/03/2021	0.19%	
T. Rowe Price Retirement 2015	TRRGX	0.51%	01/03/2021	0.19%	
T. Rowe Price Retirement 2025	TRRHX	0.55%	01/03/2021	0.19%	
T. Rowe Price Retirement 2035	TRRJX	0.59%	01/03/2021	0.19%	
T. Rowe Price Retirement 2045	TRRKX	0.62%	01/03/2021	0.19%	
T. Rowe Price Retirement 2030	TRRCX	0.58%	01/03/2021	0.19%	
T. Rowe Price Retirement 2050	TRRMX	0.63%	01/03/2021	0.19%	
T. Rowe Price Retirement 2055	TRRNX	0.64%	01/03/2021	0.19%	
T. Rowe Price Retirement 2040	TRRDY	0.60%	01/03/2021	0.19%	
Other Investments					
AB Discovery Value A	ABASX	1.15%	01/03/2021	0.50%	www.AllianceBernstein.com
Neuberger Berman Sustain Eq Inv	NBSRX	0.86%	01/03/2021	0.00%	www.nb.com

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Report of Indirect Compensation

T. Rowe Price Retirement Plan Services, Inc.



GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN | Period January 1 through December 31, 2021

Investment ^{1,2}	Ticker	Expense Ratio ^{3,4}	Administrative Fees ^{5,6,7}		Website
Fidelity Contra Fund	FCNTX	0.85%	01/03/2021	0.25%	www.institutional.fidelity.com
Weighted Average		0.55%			

N/A = Not Applicable/None

--- = Not Available

Report of Indirect Compensation

T. Rowe Price Retirement Plan Services, Inc.



GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN | Period January 1 through December 31, 2021

II. Non-Monetary Compensation-Gifts and Entertainment

The amount of non-monetary compensation (e.g., gifts and entertainment) attributable to the plan, if any, received by T. Rowe Price Retirement Plan Services, Inc. ("TRP RPS") will be provided under a separate e-mail cover to be delivered after the Report of Indirect Compensation is provided.

III. Float and Incidental Compensation

Earnings from Short-term Investments "Float"

General or "omnibus" bank accounts are maintained to hold amounts awaiting trade settlement or clearance of disbursements in connection with plan transactions. Amounts in these omnibus accounts may generate earnings ("float").

Trades associated with contributions and loan repayments are generally placed on the date that investment instructions and funds are received in "good order", and typically settle on the next business day, but may take up to five business days in certain circumstances. Although trade settlement for transactions within plans are usually simultaneous, some in-plan transactions involving certain investments may result in omnibus account balances for up to four business days. Plan distributions and other disbursements are generally redeemed from the plan's investments on the day the request is received in "good order" and checks or electronic payments issued within two business days after redemption proceeds are received. These amounts may comprise balances in omnibus accounts until the date the wires clear, electronic transactions are accepted by the receiving institution, or checks are presented for payment. The Outstanding Distribution Checks Report available on the Plan Sponsor website identifies outstanding distribution checks. As directed by the plan sponsor, stale dated check amounts (generally outstanding for more than 180 days) are (a) reissued FBO the participant at an updated address, or (b) reprocessed into plan-level or participant accounts.

Earnings on balances in omnibus accounts are calculated using the federal funds rate and are used to reduce bank expenses. Half of any amount that remains after payment of bank expenses are retained and are used to offset expenses in connection with recordkeeping services provided by TRP RPS or its agents. If earnings do not exceed bank fees, TRP RPS or its agents pays the balance.

Plan Transaction Processing

Inadvertent and unintentional TRP RPS or its agents' errors may occur from time to time while processing investment transactions. Where such an error occurs in processing a plan investment transaction that is in "good order", the error is corrected, using standard correction methodologies and participant accounts are adjusted accordingly.

Report of Indirect Compensation

T. Rowe Price Retirement Plan Services, Inc.



GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN | Period January 1 through December 31, 2021

The correction to restore participants' accounts may result in gains or losses attributable to market movement in share price between the transaction and correction dates. If the correction results in an aggregate loss, TRP RPS funds the loss. If the correction results in an aggregate gain for a T. Rowe Price investment, that gain is returned to the investment and used to offset transactional costs. If the correction results in an aggregate gain for an investment that is not sponsored by T. Rowe Price, that gain is retained by TRP RPS or its agents to offset operational expenses.

For calendar year 2021, gains for non-T. Rowe Price investment transaction corrections averaged approximately \$607.81 for each affected plan. Average losses per affected plan absorbed by TRP RPS approximated \$578.85.

Tax Withholding Service

TRP RPS or its agents processes distributions to plan participants and performs income tax withholding and tax reporting services with respect to those distributions, as applicable. Certain jurisdictions may provide interest or credits related to remittance of income tax withholdings. TRP RPS or its agents retains any such interest or credits.

Omnibus Account Reconciliation

Omnibus account balances are reconciled to the recordkeeping and trading systems on a daily basis. Certain minor discrepancies can arise from differences between the systems involved in trading and settlement, such as decimal place and rounding conflicts. In addition, de minimis discrepancies can arise from differences between amounts expected and amounts actually delivered to the omnibus account in connection with plan activity, such as contributions or loan repayments. Immaterial discrepancies are resolved by periodically funding shortfalls to or withdrawing excess amounts from the omnibus account.

Endnotes

- ¹ Plan investments with a balance greater than \$0 at any time during the reporting period, are shown in section I. Indirect Plan Investment Expenses. Investments held through self-directed brokerage accounts are excluded from this section.
- ² Other Investments include plan assets invested in non-proprietary investments (i.e., investments not managed by T. Rowe Price).
- ³ The investment's annualized net expense ratio and administrative fees/credits are rounded to two decimal places.
- ⁴ Each investment's annualized net expense ratio is based on the investment's fiscal year-end data available to TRP RPS as of 12/31/2021. For the purpose of this report, the net expense ratio may include one or more of the following: management fees, operating costs, administrative fees, and trustee fees, as applicable. The net expense ratio may not reflect certain waivers or expenses, e.g., voluntary management fee waivers, which may reduce or increase the net expense ratio shown. For T. Rowe Price mutual funds ("Price Funds"), contractual waivers are reflected in the net expense ratio. Please read disclosure documents, such as a prospectus, for more information about an investment's expenses. The source of the expense ratio for non-proprietary mutual fund investments is Lipper Data Feed Services. The expense ratio for other non-proprietary investments may be reported to TRP RPS through a third-party commercial database or by the sponsor or manager of the investment. In certain cases, TRP RPS may have been unable to obtain the investment's expense ratio, in which case, it is the plan administrator's responsibility to obtain this information for the plan if it is required for purposes of the Form 5500, Schedule C.

Report of Indirect Compensation

T. Rowe Price Retirement Plan Services, Inc.



GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN | Period January 1 through December 31, 2021

- ⁵ For certain non-proprietary investments, TRP RPS receives compensation for the provision of shareholder recordkeeping and administrative services. Such compensation, including shareholder servicing fees, sub-transfer agency fees, and Rule 12b-1 fees, may be compensated by the investment, investment manager, its advisor or affiliates. Depending on the source, administrative fees may be reflected in the expense ratio of the investment.
- ⁶ For Price Funds with an amount greater than zero in the Administrative Fees column, TRP RPS receives payment from such Price Funds for the provision of shareholder recordkeeping and administrative services.
- ⁷ Endnote 7 is not applicable.

Service Provider Disclosure Summary

T. Rowe Price Retirement Plan Services, Inc.



GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN | MAY 26, 2021

Regulations issued by the U.S. Department of Labor under Section 408(b)(2) of the Employee Retirement Income Security Act of 1974 ("**ERISA**") require service providers to ERISA-covered plans to provide certain disclosure information regarding direct and indirect fees received by the service provider in connection with the provision of services to the plan. This document is intended to provide you with an outline of disclosures related to the provision of plan recordkeeping services to your plan by T. Rowe Price Retirement Plan Services, Inc. ("TRP RPS").

Participants: 190¹

Cost to the Plan for Recordkeeping Services

	Total Plan (\$)²	Per Participant (\$)²	Basis Points²
Estimated Annual Administrative Fees from Investments	\$18,510	\$97.42	19.000
(-) Estimated Administrative Budget	-	-	-
(+) Estimated Annual Recordkeeping Service Fee	-	-	-
Estimated Annual Recordkeeping Cost to the Plan	\$18,510	\$97.42	18.900

The "Estimated Annual Administrative Fees from Investments" is the amount of administrative fees generated by investments listed in Exhibit A that are estimated to be received and retained by TRP RPS for the provision of shareholder, recordkeeping and administrative services on behalf of the investments.

The "Estimated Administrative Budget" is a pricing credit provide to the plan by TRP RPS.

The "Estimated Annual Recordkeeping Service Fee" is an amount to be charged to the plan by TRP RPS for the provision of recordkeeping services to the plan as listed in Exhibit C.

The "Estimated Annual Recordkeeping Cost to the Plan" is the total of the Estimated Annual Administrative Fees/Credits from Investments minus the Estimated Administrative Budget plus the Estimated Annual Recordkeeping Service Fee.

The Estimated Annual Recordkeeping Cost to the Plan listed above, plus the additional direct compensation disclosed on Exhibit C reflect an estimate of the cost to the plan for providing the services set forth in Exhibit B. In addition, TRP RPS may receive incidental indirect compensation as described in Exhibit D.

1 Participant count is based on the number of participants with a balance greater than \$0.00 on 04/30/2021.

2 For illustrative purposes, the costs in this table are expressed as total plan dollars, per participant dollars and basis points (basis point illustrations are based on total plan assets excluding any outstanding loans, if applicable).

Service Provider Disclosure Summary

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Exhibit A - Investments

Investment	Lipper Fund Category	Assets ³	Lipper No-Load Expense Ratio Average ⁴	Expense Ratio ⁵				Recordkeeping	
				Gross	Net	Limitation	Total Net Expense	Admin Fees ⁶	Estimated Amount Generated
AB Discovery Value A ABASX	Small-Cap Core Funds	\$0	1.09%	1.15%	1.15%	N/A	\$0	0.500%	\$0
Fidelity Contra Fund FCNTX	Large-Cap Growth Funds	\$204,168	0.91%	0.86%	0.86%	N/A	\$1,756	0.250%	\$510
International Equity Index PIEQX	International Large-Cp Core Fds	\$204,485	0.95%	0.45%	0.45%	N/A	\$920	0.190%	\$389
Neuberger Berman Sustain Eq Inv NBSRX	Multi-Cap Core Funds	\$64,487	0.91%	0.87%	0.87%	N/A	\$561	0.000%	\$0
T Rowe Price Government Money PRRXX	U.S. Government Money Market Funds	\$49,357	0.50%	0.30%	0.30%	N/A	\$148	0.190%	\$94
T. Rowe Price Equity Index 500 PREIX	S&P 500 Index Funds	\$603,172	0.30%	0.19%	0.19%	N/A	\$1,146	0.190%	\$1,146
T. Rowe Price Ext Equity Mkt Index PEXMX	Small-Cap Growth Funds	\$224,346	1.11%	0.35%	0.35%	N/A	\$785	0.190%	\$426
T. Rowe Price New Horizons PRNHX	Mid-Cap Growth Funds	\$521,390	1.02%	0.75%	0.75%	N/A	\$3,910	0.190%	\$991
T. Rowe Price Retire Bal Inv TRRIX	Mixed-Asset Target Today Funds	\$0	0.55%	0.50%	0.50%	N/A	\$0	0.190%	\$0
T. Rowe Price Retirement 2005 TRRFX	Mixed-Asset Target 2010 Funds	\$0	0.53%	0.52%	0.52%	N/A	\$0	0.190%	\$0
T. Rowe Price Retirement 2010 TRRAX	Mixed-Asset Target 2010 Funds	\$26,063	0.53%	0.52%	0.52%	N/A	\$136	0.190%	\$50

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... Continued

Investment	Lipper Fund Category	Assets ³	Lipper No-Load Expense Ratio Average ⁴	Expense Ratio ⁵				Recordkeeping	
				Gross	Net	Limitation	Total Net Expense	Admin Fees ⁶	Estimated Amount Generated
T. Rowe Price Retirement 2015 TRRGX	Mixed-Asset Target 2015 Funds	\$427,808	0.53%	0.55%	0.55%	N/A	\$2,353	0.190%	\$813
T. Rowe Price Retirement 2020 TRRBX	Mixed-Asset Target 2020 Funds	\$1,001,849	0.57%	0.57%	0.57%	N/A	\$5,711	0.190%	\$1,904
T. Rowe Price Retirement 2025 TRRHX	Mixed-Asset Target 2025 Funds	\$1,586,716	0.59%	0.61%	0.61%	N/A	\$9,679	0.190%	\$3,015
T. Rowe Price Retirement 2030 TRRCX	Mixed-Asset Target 2030 Funds	\$604,180	0.61%	0.64%	0.64%	N/A	\$3,867	0.190%	\$1,148
T. Rowe Price Retirement 2035 TRRJX	Mixed-Asset Target 2035 Funds	\$1,014,806	0.63%	0.67%	0.67%	N/A	\$6,799	0.190%	\$1,928
T. Rowe Price Retirement 2040 TRRDY	Mixed-Asset Target 2040 Funds	\$647,629	0.65%	0.69%	0.69%	N/A	\$4,469	0.190%	\$1,230
T. Rowe Price Retirement 2045 TRRKX	Mixed-Asset Target 2045 Funds	\$893,420	0.65%	0.71%	0.71%	N/A	\$6,343	0.190%	\$1,698
T. Rowe Price Retirement 2050 TRRMX	Mixed-Asset Target 2050 Funds	\$570,071	0.66%	0.71%	0.71%	N/A	\$4,048	0.190%	\$1,083
T. Rowe Price Retirement 2055 TRRNK	Mixed-Asset Target 2055 Funds	\$982,839	0.66%	0.71%	0.71%	N/A	\$6,978	0.190%	\$1,867
T. Rowe Price Spectrum Income RPSIX	Multi-Sector Income Funds	\$11,122	0.96%	0.62%	0.62%	N/A	\$69	0.190%	\$21
TRP U.S. Bond Enhanced Index Fund PBDIX	Core Bond Funds	\$104,255	0.55%	0.26%	0.25%	Contractual Expires 02/28/2023	\$261	0.190%	\$198
Total		\$9,742,163		0.62%	0.62%		\$59,938	0.190%	\$18,510

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Other Plan Assets

Outstanding Loans	\$95,383
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It is important to read disclosure documents, such as the prospectus, statement of additional information, and fact sheets, for each investment to understand any fees that are charged directly against the amount invested in connection with the acquisition, sale, transfer of, or withdrawal from the investment contract, product, or entity (*i.e.*, sales loads, sales charges, deferred sales charges, redemption fees, surrender charges, exchange fees, account fees, and purchase fees).

Additional information and materials about plan investments that are within the control of, or reasonably available to TRP RPS, may be found on the plan sponsor website. This includes investment information that is required for you to comply with your disclosure obligations under the DOL participant fee disclosure regulation. Please contact a Client Relations Consultant for more information on the service TRP RPS offers to assist you in meeting your obligations under the DOL participant fee disclosure regulation.

To access additional investment information on the plan sponsor website, from the Investments tab, click on Electronic Investment Information where you may access prospectuses and fund fact sheets. If you do not have access to the site, please ensure that your basic census information is loaded to the recordkeeping system and go to rps.troweprice.com and follow the prompts to register for use of the site. To reset your password, please contact T. Rowe Price Technical Support at 1-800-639-8552. You will be asked to provide certain security information in order to reset your password. If you do not know this information, please obtain it from your authorized approver prior to calling Technical Support.

3 Assets

Assets are as of 04/30/2021 and are rounded to the nearest whole dollar.

4 Lipper No-Load Expense Ratio Average

The Lipper No-Load Expense Ratio Average is as of the most recent quarter end and is provided to compare the ongoing costs of investing in each listed investment with other investments in the respective Lipper Fund Category.

5 Expense Ratio

Each investment's annualized expense ratio is based on the investment's most recent fiscal year-end data available to TRP RPS. For the purpose of this summary document, the expense ratio may include one or more of the following: management fees, operating costs, administrative fees, and trustee fees, as applicable. The net expense ratio may not reflect certain waivers or expenses, *e.g.*, voluntary management fee waivers, which may reduce or increase the net expense ratio shown. For T. Rowe Price-sponsored mutual funds ("Price Funds"), contractual waivers are reflected in the net expense ratio. Please read disclosure documents, such as a prospectus, for more information about an investment's expenses. The source of the expense ratio for non-proprietary mutual fund investments is Lipper Data Feed Services. The expense ratio for other non-proprietary investments may be reported to TRP RPS through a third party commercial database or by the sponsor or manager of the investment.

The Price Funds have entered into an investment management agreement with T. Rowe Price Associates, Inc. ("TRPA"), an affiliate of TRP RPS, which provides the Price Funds with discretionary investment management services. As compensation for the services provided, each respective Price Fund pays TRPA an investment management fee, which is included in calculating the expense ratio for the respective Price Fund. Please see the respective Price Funds' prospectus, statement of additional information ("SAI"), annual report, and semiannual report for more information on the fees and services provided.

Service Provider Disclosure Summary

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The T. Rowe Price-sponsored common trust funds ("Price Trusts") are sponsored by T. Rowe Price Trust Company ("TRPTC"), an affiliate of TRP RPS, which administers the Price Trusts in accordance with the provisions of the respective Declaration of Trust. As compensation for the services provided, each respective Price Trust or plan pays TRPTC a trustee fee, which is typically included in calculating the applicable expense ratio for the respective Price Trust. Please see the respective Price Trust's Declaration of Trust and the Plan's agreement with TRPTC (e.g., Investment Agency Appointment and Participation Authorization or Participation Agreement) for more information on the fees and services provided.

The gross expense ratio reflects the fund expenses as stated in the fee table of the fund's prospectus prior to the deduction of any waiver or reimbursement. The net expense ratio reflects fund expenses as stated in the fee table of the fund's prospectus after the deduction of any waiver or reimbursement. If a fund has an active expense ratio limitation, the expiration date (if available) is shown in the table above.

Expense ratio total is the weighted average.

6 Administrative Fees

Administrative Fees total is the weighted average of administrative fees for each investment shown. Administrative fees for each investment do not increase the reported total expense ratio of the investment.

For Price Funds with an amount greater than zero in the Administrative Fees column ("Crediting Price Funds"), TRP RPS receives payment from Crediting Price Funds to offset the costs of providing shareholder recordkeeping and administrative services on behalf of Crediting Price Funds.

Certain Price Separate Accounts pay TRP RPS for the provision of recordkeeping and other administrative services.

For certain non-proprietary investments, TRP RPS receives payments for the provision of shareholder recordkeeping and administrative services. Such payments, including shareholder servicing fees, sub-transfer agency fees, and distribution or Rule 12b-1 fees, may be paid by the investment, investment manager, its advisor or affiliates.

T. Rowe Price Investment Services, Inc., distributor, T. Rowe Price mutual funds.

Service Provider Disclosure Summary

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GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN | MAY 26, 2021

Exhibit B - Services

TRP RPS offers a comprehensive suite of recordkeeping services for both plan sponsors and participants such as administrative services, participant services, implementation/conversion services, compliance services, plan document services, plan sponsor services, and directed trustee support services. A general description of the recordkeeping services provided to the plan is set forth below. Please refer to your plan's recordkeeping agreement and/or the Administrative Service Manual for a comprehensive list of services provided to the plan. Copies of these materials can be obtained by contacting Client Relations at 1-800-839-1901. In connection with its services as a recordkeeper, TRP RPS is not a fiduciary to the plan.

Recordkeeping Services

Processing of enrollments, contributions, plan investment transactions, loans (as applicable), QDROs (account segregation), in-service and other distributions (including tax withholding and reporting of distributions). General maintenance of plan accounts, demographic data and providing reports.

Participant Services

Provision of quarterly benefit statements, communications, educational meetings, participant website, voice response unit (VRU), participant service center, investment education, and planning tools.

TPA Support Services

Support for: Compliance testing reports; annual audits; and Form 5500 preparation reporting.

Implementation / Conversion

Plan set up and implementation, conversion, record transfer and ongoing merger and acquisition support.

Plan Sponsor Services

Relationship management, communications consultant, conversion manager, compliance analyst and plan coordinator (as applicable). Annual strategic plan, tools, plan sponsor website, data transmission and reporting (including to plan sponsor's service providers, as directed), and plan and investment review, industry insights and perspectives.

Self-Directed Brokerage Account Support Services

agreement with the plan sponsor. TRP RPS provides participant account data to the third-party broker-dealer, reporting, participant call transfers between TRP RPS and the third party broker-dealer, statement support, and database support and updates.

Self-Directed Brokerage Account Support Services

If the plan sponsor authorizes a self-directed brokerage (SDB) investment option, a third party is the broker-dealer for brokerage trades under a separate

Service Provider Disclosure Summary

T. Rowe Price Retirement Plan Services, Inc.



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Exhibit C - Direct Compensation⁷

Direct compensation is compensation that is received directly from the plan or plan sponsor, for example, fees that are deducted from participant accounts, the plan's forfeiture account or the plan's administrative budget account. On an annual basis, TRP RPS makes available through the plan sponsor website a Trust Report which discloses all fees paid from the Plan. Direct compensation expected to be received by TRP RPS relevant to your plan is summarized below.

Setup Fee	\$0
Communications Fee	Cost varies and will be invoiced to the plan sponsor.
Consultation Fee	\$125.00 per hour will be invoiced to the plan sponsor.
Contribution Funding Not Using Automated Clearing House (ACH) Fee	\$300.00 per quarter will be invoiced to the plan sponsor for the funding of contributions in a manner other than ACH.
Distribution Process Fee	\$50.00 per distribution will be deducted from a participant's account at the time of the distribution.
Employee Meetings Fee	\$1,000.00 per day beyond agreed upon number of meetings will be invoiced to the plan sponsor.
Employer Contribution Calculation Fee	\$250.00 will be invoiced to the plan sponsor for each employer contribution calculation performed.
Employer Directed Exchanges Fee	\$0 will be invoiced to plan sponsor for each plan-wide exchange.
Employer Requested Data Entry Fee	\$7.00 per participant will be invoiced to the plan sponsor for each occurrence for Employer requested data entry.
Express Delivery Fee	A \$30.00 service fee will be charged to and withdrawn from participants' and beneficiaries' accounts for each use of the express delivery service.
Loan Origination Fee	\$100.00 will be deducted from a participant's account at the time the loan is processed.
Production of De-Conversion Files Fee	\$500.00 per file will be invoiced to the plan sponsor (applies to termination of TRP RPS services, spin-offs, and similar events).

⁷ TRP RPS may assess other expenses as outlined in the plan's recordkeeping agreement.

Service Provider Disclosure Summary

T. Rowe Price Retirement Plan Services, Inc.



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Exhibit D - Float and Incidental Compensation

Incidental compensation is compensation received from any source other than the plan, the plan sponsor, the covered service provider, an affiliate, or a subcontractor that is estimated to be inconsequential and therefore does not factor into negotiations between TRP RPS and its clients. Types of incidental compensation expected to be received by TRP RPS or its agents are described below. In the interests of completeness, certain items below are included for clarity and may not result in compensation to TRP RPS

Earnings from Short-term Investments "Float"

General or "omnibus" bank accounts are maintained to hold amounts awaiting trade settlement or clearance of disbursements in connection with plan transactions. Amounts in these omnibus accounts may generate earnings ("float").

Trades associated with contributions and loan repayments are generally placed on the date that investment instructions and funds are received in "good order," and typically settle on the next business day, but may take up to five business days in certain circumstances. Although trade settlement for transactions within plans are usually simultaneous, some in-plan transactions involving certain investments may result in omnibus account balances for up to four business days. Plan distributions and other disbursements are generally redeemed from the plan's investments on the day the request is received in "good order" and checks or electronic payments issued within two business days after redemption proceeds are received. These amounts may comprise balances in omnibus accounts until the date the wires clear, electronic transactions are accepted by the receiving institution, or checks are presented for payment. The Outstanding Distribution Checks Report available on the Plan Sponsor Website identifies outstanding distribution checks. As directed by the plan sponsor, stale-dated check amounts (generally outstanding for more than 180 days) are (a) reissued for the benefit of the participant at an updated address or (b) reprocessed into plan-level or participant accounts.

Balances in omnibus accounts that remain uninvested overnight may result in discounted bank fees through earnings credits. Short-term investment of balances in omnibus accounts may generate earnings. The earnings rate for short-term investments of omnibus account balances approximates the federal funds rate. Earnings are used to pay banking expenses. Amounts remaining after payment of bank expenses are retained and are used to offset expenses in connection with recordkeeping services provided by TRP RPS or its agents. If earnings do not exceed bank fees, TRP RPS or its agents pays the balance.

Plan Transaction Processing

Inadvertent and unintentional TRP RPS or its agents' errors may occur from time to time while processing investment transactions. Where such an error occurs in processing a plan investment transaction that is in "good order," the error is corrected using standard correction methodologies and participant accounts are adjusted accordingly.

The correction to restore participants' accounts may result in gains or losses attributable to market movement in share price between the transaction and correction dates. If the correction results in an aggregate loss, TRP RPS funds the loss. If the correction results in an aggregate gain for a T. Rowe Price mutual fund, that gain is returned to the fund and used to offset transactional costs. If the correction results in an aggregate gain for a non-T. Rowe Price mutual fund, that gain is retained by TRP RPS or its agents to offset operational expenses.

Tax Withholding Service

TRP RPS or its agents processes distributions to plan participants and performs tax withholding and reporting services with respect to those distributions, as applicable. Certain jurisdictions may provide interest or credits related to remittance of tax withholdings. TRP RPS or its agents retains any such interest or credits.

Omnibus Account Reconciliation

Omnibus account balances are reconciled to the recordkeeping and trading systems on a daily basis. Certain minor discrepancies can arise from differences between the systems involved in trading and settlement, such as decimal place and rounding conflicts. In addition, de minimis discrepancies can arise from differences between amounts expected and amounts actually delivered to the omnibus account in connection with plan activity, such as contributions or loan repayments. Immaterial discrepancies are resolved by periodically funding shortfalls to, or withdrawing excess amounts from the omnibus account.

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Exhibit D - Float and Incidental Compensation ...continued

Non-monetary Compensation - Gifts and Entertainment

TRP RPS does not expect to receive any non-monetary compensation (e.g., gifts and entertainment) with respect to the plan.

GIRL SCOUTS OF NORTHERN CALIFORNIA 403(B) PLAN

Plan and Investment Disclosure | November 2021

The Department of Labor requires disclosure of certain information that is intended to help you understand the investments offered by the plan referenced above ("Plan") and the fees and expenses you may pay as a participant in the Plan. In conjunction with this requirement, this document provides information about the Plan, the investments in the Plan, as well as any applicable fees and expenses.

This document has two sections: A. Plan Information and B. Investment Information. Please review this information carefully to learn about the Plan's investments, fees and expenses, and where to go for more information. This disclosure should be retained for future reference.

A. Plan Information

This section provides information regarding your Plan and, if applicable, fees and expenses to which you may be subject. You can find out more about the Plan in the Summary Plan Description ("SPD").

Part I. General Information

- **How to Give Investment Instructions.** You may direct the investment of your account balance and future contributions among a range of investments available in the Plan. To provide investment instructions, log in to the participant website at rps.troweprice.com, or call the toll-free Plan Account Line at 1-800-354-2351.
- **Limitations on Investment Instructions.** Investment instructions may be subject to an investment's trading guidelines and restrictions. Refer to section "B. Investment Information" under "Part II. Fee and Expense Information" of this document for an investment's limitations, if any.
- **Voting, Tender, and Similar Rights and Restrictions.** Voting, tender, and similar rights with respect to investments in the Plan are exercised by the appropriate Plan fiduciary.
- **Additional Information.** The T. Rowe Price target date investments (Retirement and Target Funds) are managed based on a specific retirement year (target retirement date), which is the approximate year an investor would plan to retire (assuming a retirement age of 65). **Effective January 11, 2022, the 2060 and 2065 vintage of the T. Rowe Price target date investment available under your plan will be an additional investment option.**
- **Investments Available in the Plan.**
 - AB Discovery Value A
 - Fidelity Contra Fund
 - International Equity Index
 - Neuberger Berman Sustain Eq Inv
 - T. Rowe Price Equity Index 500
 - T. Rowe Price Ext Equity Mkt Index
 - T. Rowe Price Government Money
 - T. Rowe Price New Horizons
 - T. Rowe Price Retire Bal Inv
 - T. Rowe Price Retirement 2005
 - T. Rowe Price Retirement 2010
 - T. Rowe Price Retirement 2015
 - T. Rowe Price Retirement 2020
 - T. Rowe Price Retirement 2025
 - T. Rowe Price Retirement 2030
 - T. Rowe Price Retirement 2035

- T. Rowe Price Retirement 2040
- T. Rowe Price Retirement 2045
- T. Rowe Price Retirement 2050
- T. Rowe Price Retirement 2055
- TRP Spectrum Income
- TRP U.S. Bond Enhanced Index Fund

Log in to the participant website at **rps.troweprice.com** or call the toll-free Plan Account Line at 1-800-354-2351 to request fund prospectuses, financial statements, annual reports, and other information that is furnished to the Plan on the investments. These materials include investment objectives, risks, fees, expenses, and other information that you should read and consider before investing.

Part II. Administrative Expenses

- **Plan Related Fees and Expenses.** This chart shows fees and expenses for general Plan administrative services that may be charged to and withdrawn from your account and are not included in the total annual operating expenses of any investments in the Plan.

Type of Plan Administrative Fee	Fee Amount
Accounting Fee	Fees and expenses for accounting services charged to the Plan may be charged to and withdrawn from your account on a per capita or pro-rata basis.
Auditing Fee	Fees and expenses for auditing services charged to the Plan may be charged to and withdrawn from your account on a per capita or pro-rata basis.
Consulting Fee	Fees and expenses for consulting services charged to the Plan may be charged to and withdrawn from your account on a per capita or pro-rata basis.
Legal Services Fee	Fees and expenses for legal services charged to the Plan may be charged to and withdrawn from your account on a per capita or pro-rata basis in proportion to the closing account balance for the last business day prior to deduction of the fee.

Part III. Individual Expenses

- **Individual Fees and Expenses.** This chart shows fees and expenses for services provided to you on an individual basis that may be charged to and withdrawn from your account and are not included in the total annual operating expenses of any investment in the Plan.

Type of Individual Fee	Fee Amount
Distribution Fee	\$50.00 per distribution. Limited exceptions to this fee may apply when rolling over eligible account balances to an Individual Retirement Account with T. Rowe Price.
Express Mail Delivery Service	If your plan offers express mail services, a \$30.00 fee will be charged to and withdrawn from participants' and beneficiaries' accounts for each use of the express mail delivery service.
Participant Loan Origination Fee	\$100.00 per loan.
Morningstar Managed Account Services Fee	If you have enrolled in Morningstar Retirement Manager, an annual service fee of 0.25% of your account balance will be withdrawn from your account.

Type of Individual Fee	Fee Amount
T. Rowe Price Administrative and Connectivity Fee for Third Party Advice Services	If you have enrolled in the Morningstar Retirement Manager Service, an annual fee of 0.25% of your account balance for administrative and data connectivity services is paid to T. Rowe Price.

B. Investment Information

Investments in the Plan as of October 25, 2021

This section includes important information to help you compare the investments in the Plan and is comprised of two parts:

- **Part I** reflects performance information indicating how well the investments have performed in the past.
- **Part II** outlines the fees and expenses applicable to each investment. Fees and expenses are only one of several factors that participants and beneficiaries should consider when making investment decisions. The cumulative effect of fees and expenses can substantially reduce the growth of your retirement savings.

If you want additional information about your investment options available in the Plan, including more current performance information, log in to the participant website at rps.troweprice.com and click on the “Research Investments” tab. Investment Fact Sheets can be located by clicking on “Investment Documents”. You can also call the toll-free Plan Account Line at 1-800-354-2351, or you can contact T. Rowe Price, P.O. Box 17479, Baltimore, MD 21297-1479.

For a free paper copy of the additional information available on the participant website, please call the Plan Account Line.

Part I. Performance Information

Table 1 focuses on the performance of investments in the Plan that do not have a fixed or stated rate of return. This table shows how these alternatives have performed over time and allows you to compare them with an appropriate benchmark for the same time periods. Past performance does not guarantee how the investments will perform in the future. Your investment in these alternatives could lose money. Information about an investment's principal risks is available on the participant website at rps.troweprice.com.

Table 1 - Variable Return Investments								
Investment Name <i>Type of Investment</i>	Average Annual Total Return as of 09/30/2021				Benchmark Return			
	1 yr.	5 yr.	10 yr.	Since Inception	1 yr.	5 yr.	10 yr.	Since Inception
Retirement Funds								
T. Rowe Price Retire Bal Inv <i>Allocation--30% to 50% Equity</i>	14.16%	7.69%	7.27%	-	12.31%	7.69%	7.10%	-
	<i>Inception Date 09/30/2002</i>				Custom Benchmark - Retirement Balanced B			
					8.14%	5.94%	5.80%	-
					S&P Target Date Retirement Income			
T. Rowe Price Retirement 2005 <i>Target-Date 2000-2010</i>	13.52%	7.51%	7.58%	-	11.43%	7.56%	7.34%	-
	<i>Inception Date 02/27/2004</i>				Custom Benchmark - Retirement 2005 Fund			
					8.14%	5.94%	5.80%	-
					S&P Target Date Retirement Income			
T. Rowe Price Retirement 2010 <i>Target-Date 2000-2010</i>	14.72%	8.09%	8.29%	-	12.78%	8.15%	8.06%	-
	<i>Inception Date 09/30/2002</i>				Custom Benchmark - Retirement 2010 Fund			
					10.20%	6.78%	6.84%	-
					S&P Target Date 2010 Index			
T. Rowe Price Retirement 2015 <i>Target-Date 2015</i>	16.17%	8.84%	9.23%	-	14.12%	8.88%	8.99%	-
	<i>Inception Date 02/27/2004</i>				Custom Benchmark - Retirement 2015 Fund			
					11.93%	7.46%	7.77%	-
					S&P Target Date 2015 Index			
T. Rowe Price Retirement 2020 <i>Target-Date 2020</i>	17.76%	9.76%	10.20%	-	15.77%	9.78%	9.91%	-
	<i>Inception Date 09/30/2002</i>				Custom Benchmark - Retirement 2020 Fund			
					12.92%	7.98%	8.51%	-
					S&P Target Date 2020 Index			
T. Rowe Price Retirement 2025 <i>Target-Date 2025</i>	20.23%	10.78%	11.14%	-	18.36%	10.79%	10.84%	-
	<i>Inception Date 02/27/2004</i>				Custom Benchmark - Retirement 2025 Fund			
					16.17%	9.01%	9.42%	-
					S&P Target Date 2025 Index			
T. Rowe Price Retirement 2030 <i>Target-Date 2030</i>	22.89%	11.75%	11.99%	-	21.03%	11.74%	11.67%	-
	<i>Inception Date 09/30/2002</i>				Custom Benchmark - Retirement 2030 Fund			
					19.16%	9.93%	10.25%	-
					S&P Target Date 2030 Index			

Investment Name <i>Type of Investment</i>	Average Annual Total Return as of 09/30/2021				Benchmark Return			
	1 yr.	5 yr.	10 yr.	Since Inception	1 yr.	5 yr.	10 yr.	Since Inception
Retirement Funds (continued)								
T. Rowe Price Retirement 2035 <i>Target-Date 2035</i>	25.39%	12.57%	12.64%	-	23.48%	12.56%	12.33%	-
	<i>Inception Date 02/27/2004</i>				Custom Benchmark - Retirement 2035 Fund			
					22.56%	10.88%	11.01%	-
					S&P Target Date 2035 Index			
T. Rowe Price Retirement 2040 <i>Target-Date 2040</i>	27.55%	13.27%	13.13%	-	25.65%	13.25%	12.79%	-
	<i>Inception Date 09/30/2002</i>				Custom Benchmark - Retirement 2040 Fund			
					24.96%	11.54%	11.55%	-
					S&P Target Date 2040 Index			
T. Rowe Price Retirement 2045 <i>Target-Date 2045</i>	29.00%	13.64%	13.31%	-	27.12%	13.60%	12.97%	-
	<i>Inception Date 05/31/2005</i>				Custom Benchmark - Retirement 2045 Fund			
					26.36%	11.93%	11.90%	-
					S&P Target Date 2045 Index			
T. Rowe Price Retirement 2050 <i>Target-Date 2050</i>	29.10%	13.66%	13.31%	-	27.23%	13.62%	12.98%	-
	<i>Inception Date 12/29/2006</i>				Custom Benchmark - Retirement 2050 Fund			
					27.11%	12.19%	12.16%	-
					S&P Target Date 2050 Index			
T. Rowe Price Retirement 2055 <i>Target-Date 2055</i>	29.16%	13.62%	13.28%	-	27.22%	13.62%	12.98%	-
	<i>Inception Date 12/29/2006</i>				Custom Benchmark - Retirement 2055 Fund			
					27.47%	12.33%	12.33%	-
					S&P Target Date 2055 Index			
Stocks								
AB Discovery Value A <i>Small Value</i>	62.46%	10.33%	13.35%	-	54.38%	10.49%	13.35%	-
	<i>Inception Date 03/29/2001</i>				Russell 2500 Value Index			
Fidelity Contra Fund <i>Large Growth</i>	24.34%	20.56%	17.96%	-	30.00%	16.90%	16.63%	-
	<i>Inception Date 05/17/1967</i>				S&P 500 Index			
International Equity Index <i>Foreign Large Blend</i>	25.04%	8.66%	8.09%	-	26.08%	9.05%	8.27%	-
	<i>Inception Date 11/30/2000</i>				FTSE Dev Ex North America Net			
Neuberger Berman Sustain Eq Inv <i>Large Blend</i>	30.62%	14.28%	14.49%	-	30.00%	16.90%	16.63%	-
	<i>Inception Date 03/16/1994</i>				S&P 500 Index			
T. Rowe Price Equity Index 500 <i>Large Blend</i>	29.80%	16.66%	16.37%	-	30.00%	16.90%	16.63%	-
	<i>Inception Date 03/30/1990</i>				S&P 500 Index			
T. Rowe Price Ext Equity Mkt Index <i>Mid-Cap Growth</i>	42.00%	16.01%	16.19%	-	42.19%	16.30%	16.26%	-
	<i>Inception Date 01/30/1998</i>				S&P Completion Index			
T. Rowe Price New Horizons <i>Mid-Cap Growth</i>	32.59%	27.48%	23.12%	-	33.27%	15.34%	15.74%	-
	<i>Inception Date 06/03/1960</i>				Russell 2000 Growth Index			

Investment Name <i>Type of Investment</i>	Average Annual Total Return as of 09/30/2021				Benchmark Return			
	1 yr.	5 yr.	10 yr.	Since Inception	1 yr.	5 yr.	10 yr.	Since Inception
Bonds								
TRP Spectrum Income <i>Multisector Bond</i>	8.10%	4.42%	5.05%	-	-0.90%	2.94%	3.01%	-
	Inception Date 06/29/1990				Bloomberg US Agg Bond Index			
TRP U.S. Bond Enhanced Index Fund <i>Intermediate Core Bond</i>	-0.47%	3.10%	3.11%	-	-0.90%	2.94%	3.01%	-
	Inception Date 11/30/2000				Bloomberg US Agg Bond Index			
Money Market/Stable Value								
T. Rowe Price Government Money <i>Money Market - Taxable</i>	0.01%	0.83%	0.42%	-	0.06%	1.13%	0.60%	-
	Inception Date 01/26/1976				FTSE Treasury Bill 3 Mon USD			
					0.03%	0.75%	0.38%	-
					Lipper US Government MM Index			

All returns for periods greater than one year are annualized; all returns for periods up to one year are cumulative.

Investment returns and the comparable benchmark returns are generally calculated using performance information over the same period of time. However, in some instances, the period of time used for these calculations may vary slightly for an investment and the comparable benchmark where benchmark return data is not available on the investment's inception date.

The 1 yr., 5 yr. and 10 yr. investment Average Annual Total Returns and Benchmark Returns in Table 1 – Variable Return Investments will report a "-" when an investment inceptioned less than one year ago and, accordingly, return information is not applicable for the 1, 5 and 10-year periods. Benchmark returns will be reported as a "-" when the associated investment inceptioned prior to the inception date of the benchmark. Inception benchmark returns are typically only provided for a single broad-based securities market index benchmark ("broad-based benchmark").

For more information about the investments available in the plan, log in to the participant website at rps.troweprice.com to access fund prospectuses, financial statements, annual reports, current performance returns and other investment information.

Part II. Fee and Expense Information

Table 2 shows fee and expense information for the investments listed in Table 1. Table 2 shows the Total Annual Operating Expenses of the investments in Table 1. Total Annual Operating Expenses are expenses that reduce the rate of return of the investment. Table 2 also shows Shareholder-Type Fees. These fees are in addition to Total Annual Operating Expenses.

Table 2 - Fees and Expenses				
Investment Name <i>Type of Investment</i>	Total Annual Operating Expenses			Shareholder-Type Fees and Restrictions
	As a %	Per \$1,000	As of Date	
Retirement Funds				
T. Rowe Price Retire Bal Inv <i>Allocation--30% to 50% Equity</i>	0.49%	\$4.90	10/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price Retirement 2005 <i>Target-Date 2000-2010</i>	0.49%	\$4.90	10/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price Retirement 2010 <i>Target-Date 2000-2010</i>	0.49%	\$4.90	10/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price Retirement 2015 <i>Target-Date 2015</i>	0.51%	\$5.10	10/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price Retirement 2020 <i>Target-Date 2020</i>	0.53%	\$5.30	10/01/2021	Subject to a 30-Day Purchase Block*

Investment Name <i>Type of Investment</i>	Total Annual Operating Expenses			Shareholder-Type Fees and Restrictions
	As a %	Per \$1,000	As of Date	
Retirement Funds (continued)				
T. Rowe Price Retirement 2025 <i>Target-Date 2025</i>	0.55%	\$5.50	10/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price Retirement 2030 <i>Target-Date 2030</i>	0.58%	\$5.80	10/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price Retirement 2035 <i>Target-Date 2035</i>	0.59%	\$5.90	10/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price Retirement 2040 <i>Target-Date 2040</i>	0.60%	\$6.00	10/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price Retirement 2045 <i>Target-Date 2045</i>	0.62%	\$6.20	10/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price Retirement 2050 <i>Target-Date 2050</i>	0.63%	\$6.30	10/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price Retirement 2055 <i>Target-Date 2055</i>	0.64%	\$6.40	10/01/2021	Subject to a 30-Day Purchase Block*
Stocks				
AB Discovery Value A <i>Small Value</i>	1.15%	\$11.50	11/30/2020	
Fidelity Contra Fund <i>Large Growth</i>	0.86%	\$8.60	12/31/2020	
International Equity Index <i>Foreign Large Blend</i>	0.32%	\$3.20	08/01/2021	Subject to a 30-Day Purchase Block*
Neuberger Berman Sustain Eq Inv <i>Large Blend</i>	0.87%	\$8.70	08/31/2020	
T. Rowe Price Equity Index 500 <i>Large Blend</i>	0.18%	\$1.80	08/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price Ext Equity Mkt Index <i>Mid-Cap Growth</i>	0.25%	\$2.50	08/01/2021	Subject to a 30-Day Purchase Block*
T. Rowe Price New Horizons <i>Mid-Cap Growth</i>	0.75%	\$7.50	12/31/2020	Subject to a 30-Day Purchase Block*
Bonds				
TRP Spectrum Income <i>Multisector Bond</i>	0.62%	\$6.20	05/01/2021	Subject to a 30-Day Purchase Block*
TRP U.S. Bond Enhanced Index Fund <i>Intermediate Core Bond</i>	0.26%	\$2.60	10/31/2020	Subject to a 30-Day Purchase Block*
Money Market/Stable Value				
T. Rowe Price Government Money <i>Money Market - Taxable</i>	0.29%	\$2.90	10/01/2021	

* This investment restricts a participant's exchange into an investment for a period of 30 calendar days after the participant has exchanged out of the same investment (the "30-Day Purchase Block"). Pre-authorized, systematic purchases and redemptions are exempt from the 30-Day Purchase Block. The initial exchange that occurs when adding automatic rebalance to your account is not considered a systematic transaction and is subject to the 30-Day Purchase Block; however, the subsequent automatic rebalances are considered systematic and are exempt from the 30-Day Purchase Block. Also exempt from the 30-Day Purchase Block are transactions having a value of \$5,000 or less. Your account transactions in the same investment on a given trade date will be aggregated for purposes of applying this exception. In addition, the investment sponsor reserves the right to cancel or reject, without further notice, any exchange that is deemed to result in excessive or short-term trading.

A mutual fund investment sponsor may restrict trading/exchanges for a designated period of time in a participant account that it deems to have engaged in excessive or short-term trading.

In the Fees and Expenses table, the As of Date provided for non-T. Rowe Price ("non-TRP") investments is the most recent fiscal year end date for each investment as provided by a third party vendor. The Total Annual Operating Expenses for non-TRP investments may reflect the Total Annual Operating Expense for a period that is earlier than the As of Date. For T. Rowe Price investments, the As of Date for each investment is the fiscal year end date that corresponds with the Total Annual Operating Expenses reported.

The Total Annual Operating Expenses do not reflect any fee waivers and/or expense reimbursements that may be in effect.

Helpful References:

Visit the Department of Labor's website at www.dol.gov/sites/dolgov/files/EBSA/about-ebsa/our-activities/resource-center/publications/a-look-at-401k-plan-fees.pdf for an example showing the long-term effect of fees and expenses. You may also want to consider whether an investment in a particular investment type, along with your other investments, will help you achieve your financial goals.

Log in to the participant website at rps.troweprice.com to learn more about the Plan and investment alternatives. For a glossary of investment terms relevant to the investments in the Plan, visit rps.troweprice.com/glossary.

Form 5500 annual return/Report of Employee Benefit Plan
Schedule H Line 4i – Schedule of Assets (Held at End of Year)

See Supplemental Schedule attached with IQPA Opinion and Financial Statements.