

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
---	---	---

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>XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT 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>11/01/1947</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>11/01/1947</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>11/01/1947</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>XAVIER UNIVERSITY OF LOUISIANA</u> <u>1 DREXEL DRIVE</u> <u>NEW ORLEANS, LA 70125</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>72-0635884</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>504-520-6787</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>611000</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>72-0635884</u>	2c Plan Sponsor's telephone number <u>504-520-6787</u>	2d Business code (see instructions) <u>611000</u>	
2b Employer Identification Number (EIN) <u>72-0635884</u>					
2c Plan Sponsor's telephone number <u>504-520-6787</u>					
2d Business code (see instructions) <u>611000</u>					

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/17/2022	EDWARD J. PHILLIPS
	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	894
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)	594
a(2) Total number of active participants at the end of the plan year		6a(2)	572
b Retired or separated participants receiving benefits.....		6b	0
c Other retired or separated participants entitled to future benefits		6c	319
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	891
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	18
f Total. Add lines 6d and 6e		6f	909
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	853
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2G 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
--	--	--

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021	
A Name of plan XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 XAVIER UNIVERSITY OF LOUISIANA	D Employer Identification Number (EIN) 72-0635884

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.
--------	---	--

1 Coverage Information:

(a) Name of insurance carrier
TIAA-CREF

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1624203	69345	151243	686	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	26025198
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	57452202

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	25623311
----------	---	-----------	----------

c	Additions: (1) Contributions deposited during the year	7c(1)	474584	
	(2) Dividends and credits.....	7c(2)		
	(3) Interest credited during the year.....	7c(3)	898096	
	(4) Transferred from separate account.....	7c(4)	1997336	
	(5) Other (specify below)	7c(5)		

(6) Total additions	7c(6)	3370016
---------------------------	--------------	---------

d	Total of balance and additions (add lines 7b and 7c(6))	7d	28993327
----------	--	-----------	----------

e	Deductions:			
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	1352930	
	(2) Administration charge made by carrier.....	7e(2)		
	(3) Transferred to separate account.....	7e(3)	1528347	
	(4) Other (specify below)	7e(4)	86852	

▶ MISCELLANEOUS DEBITS, INCLUDING INVESTMENT LOSSES AND TRANSFERS TO FULLY ALLOCATED CONTRACTS

(5) Total deductions	7e(5)	2968129
----------------------------	--------------	---------

f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	26025198
----------	--	-----------	----------

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)	
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)	
(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)	
(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
--	--	--

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021	
A Name of plan XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT PLAN	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 XAVIER UNIVERSITY OF LOUISIANA	D Employer Identification Number (EIN) 72-0635884

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.
--------	---	--

1 Coverage Information:

(a) Name of insurance carrier
VOYA RETIREMENT INSURANCE AND ANNUITY 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
71-0294708	86509	VFZ342	253	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 3870	(b) Total amount of fees paid 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
MISSE CHARLA SPALLUTO
2424 EDENBORN AVE
STE 680
METAIRIE, LA 70001

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1581			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
KENNETH TRAHAN
2424 EDENBORN AVE
STE 680
METAIRIE, LA 70001

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1093			3

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

BRANDON GOLL

5525 GALERIA DR STE A
BATON ROUGE, LA 70816

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
881			3

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

JOHN B DESSELLE

2424 EDENBORN AVE
STE 680
METAIRIE, LA 70001

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
312			3

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

WILLIAM RUTTER

226 SANDRINGHAM CT
KNOXVILLE, TN 37934

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

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** 1644516**5** Current value of plan's interest under this contract in separate accounts at year end..... **5****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. **6d**
Specify nature of costs ▶**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 ▶ UNALLOCATED ANNUITY ACCOUNT**b** Balance at the end of the previous year **7b** 1622683**c** Additions: (1) Contributions deposited during the year **7c(1)** 150838
(2) Dividends and credits..... **7c(2)**
(3) Interest credited during the year..... **7c(3)** 22468
(4) Transferred from separate account..... **7c(4)** 13533
(5) Other (specify below)..... **7c(5)** 26801

▶ MISCELLANEOUS LOAN REPAYMENTS

(6) Total additions **7c(6)** 213640**d** Total of balance and additions (add lines **7b** and **7c(6)**). **7d** 1836323**e** Deductions:(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)** 126701(2) Administration charge made by carrier..... **7e(2)** 3(3) Transferred to separate account..... **7e(3)** 65103(4) Other (specify below)..... **7e(4)**

▶

(5) Total deductions **7e(5)** 191807**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**)..... **7f** 1644516

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)	
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)	
(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)	
(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 XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 XAVIER UNIVERSITY OF LOUISIANA	D Employer Identification Number (EIN) 72-0635884	

Part I	Service Provider Information (see instructions)
---------------	--

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
VOYA RETIREMENT INSURANCE & ANNUITY
71-0294708

(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

(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)

SPALLUTO MISSE CHARLA

2424 EDENBORN A VE STE 680
METAIRIE, LA 70001

(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?
55	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	14612	Yes ☐ No ☒

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

TRAHAN KENNETH R

2424 EDENBORN A VE STE 680
METAIRIE, LA 70001

(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?
55	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	10104	Yes ☐ No ☒

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

GOLL BRANDON C

5525 GALERIA DR STE A
BA TON ROUGE, LA 70816

(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?
55	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	8138	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
GOLL BRANDON C	55	8138
(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.	
VOYA FINANCIAL PARTNERS 06-1375177	OTHER COMMISSIONS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
SPALLUTO MISSE CHARLA	55	14612
(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.	
VOYA FINANCIAL PARTNERS 06-1375177	OTHER COMMISSIONS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
TRAHAN KENNETH R	55	10102
(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.	
VOYA FINANCIAL PARTNERS 06-1375177	OTHER COMMISSIONS	

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:	BRUNO & TERVALON, LLP	b EIN:	72-0877929
c Position:	ACCOUNTANT		
d Address:	909 N. PRESIDENT STREET JACKSON, MS 39202	e Telephone:	601-714-0306

Explanation: MOVED TO A DIFFERENT AUDIT FIRM DUE TO COMPLETE RESTRUCTURING AND TRANSFER OF OWNERSHIP WITHIN THE PREVIOUS AUDIT FIRM.

a Name:		b EIN:	
c Position:			
d Address:		e Telephone:	

Explanation:

a Name:		b EIN:	
c Position:			
d Address:		e Telephone:	

Explanation:

a Name:		b EIN:	
c Position:			
d Address:		e Telephone:	

Explanation:

a Name:		b EIN:	
c Position:			
d Address:		e Telephone:	

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration		DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 2021 This Form is Open to Public Inspection.	
For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021					
A Name of plan XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT PLAN				B Three-digit plan number (PN) ▶ 001	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 XAVIER UNIVERSITY OF LOUISIANA				D Employer Identification Number (EIN) 72-0635884	
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)					
a Name of MTIA, CCT, PSA, or 103-12 IE: TIAA REAL ESTATE					
b Name of sponsor of entity listed in (a): TIAA-CREF					
c EIN-PN 13-1624203-004		d Entity code P		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4460591	
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)	
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 10	

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
--	--	---

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 XAVIER UNIVERSITY OF LOUISIANA	D Employer Identification Number (EIN) 72-0635884	

Part I	Asset and Liability Statement
---------------	--------------------------------------

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	137787	138016
(2) Participant contributions.....	1b(2)	157136	160404
(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)	457260	377611
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	3603162	4460591
(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)	84994092	97247373
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	25623311	27669714
(15) Other.....	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities.....	1d(1)	
(2)	Employer real property.....	1d(2)	
e	Buildings and other property used in plan operation	1e	
f	Total assets (add all amounts in lines 1a through 1e)	1f	114972748 130053709
Liabilities			
g	Benefit claims payable	1g	1121526 1357204
h	Operating payables	1h	
i	Acquisition indebtedness.....	1i	
j	Other liabilities.....	1j	
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	1121526 1357204
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	113851222 128696505

Part II Income and Expense Statement

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

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	2001621
	(B) Participants	2a(1)(B)	2170707
	(C) Others (including rollovers).....	2a(1)(C)	249578
(2)	Noncash contributions.....	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	4421906
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)	165393
	(F) Other	2b(1)(F)	920562
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	1085955
(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)	4157127
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	4157127
(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)		668002
(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)		9238319
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		19571309
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	4550789	
(2) To insurance carriers for the provision of benefits.....	2e(2)	175237	
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		4726026
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)		
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		0
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		4726026
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		14845283
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: SEAN BRUNO, CPAS

(2) EIN: 26-4006936

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.)	X		
4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection.
---	--	---

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

A Name of plan XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 XAVIER UNIVERSITY OF LOUISIANA	D Employer Identification Number (EIN) 72-0635884

Part I	Distributions
---------------	----------------------

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 82-2826183 71-0294708		
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 _____

**XAVIER UNIVERSITY of LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
EIN: 72-071992 PLAN NUMBER: 151243**

**FINANCIAL AUDIT TOGETHER WITH
INDEPENDENT AUDITOR'S REPORT
FOR THE YEARS ENDED
DECEMBER 31, 2021 AND 2020**

Sean M. Bruno

Certified Public Accountants, LLC

TABLE OF CONTENTS

	<u>PAGE</u>
INDEPENDENT AUDITOR'S REPORT	1
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS AS OF DECEMBER 31, 2021 AND 2020.....	7
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2021	8
NOTES TO THE FINANCIAL STATEMENTS	9
SUPPLEMENTAL SCHEDULES:	
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF THE YEAR)	33
SCHEDULE H, LINE 4j - SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)	35
FINANCIAL SCHEDULES	37

Sean M. Bruno
Certified Public Accountants, LLC

Member
American Institute of
Certified Public Accountants
Society of Louisiana
Certified Public Accountants

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrators and Participants of
the **Xavier University of Louisiana Defined Contribution Plan 151243**

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

I have performed audits of the financial statements of **Xavier University of Louisiana Defined Contribution Plan 151243 (the Plan)**, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the statements of net assets available for benefits as of December 31, 2021 and 2020, and the related statement of changes in net assets available for benefits for the year ended December 31, 2021, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of **the Plan** 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), my audits 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 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).

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

Management has obtained certifications from a qualified institution as of December 31, 2021 and 2020, 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.

Opinion

In my opinion, based on my audits and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section –

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

Basis for Opinion

I conducted my audits in accordance with auditing standards generally accepted in the United States of America (GAAS). My responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of my report. I am required to be independent of **the Plan** and to meet my other ethical responsibilities in accordance with the relevant ethical requirements relating to my audits. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of 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** ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

Auditor's Responsibilities for the Audit of the Financial Statements, continued

In performing an audit in accordance with GAAS, I:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risk. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of **the Plan** internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in my judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about **the Plan** ability to continue as a going concern for a reasonable period of time.

My audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

I am required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that I identified during the audit.

Supplemental Schedules Required by ERISA

The supplemental schedules of (1) assets held at the end of year as of December 31, 2021; (2) assets acquired and disposed of within the year for the year ended December 31, 2021; (3) financial transactions schedule for the year ended December 31, 2021, are presented for purposes of additional analysis and are not a required part of the financial statements, but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, I compared such information to the related certified investment information.

In forming my opinion on the supplemental schedules, I evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In my opinion –

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Supplemental Schedules Required by ERISA, continued

- the information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).



SEAN M. BRUNO
CERTIFIED PUBLIC ACCOUNTANTS, LLC
New Orleans, Louisiana

October 13, 2022

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2021 AND 2020

	<u>2021</u>	<u>2020</u>
Assets:		
Investments, at fair value (NOTES 3, 5 and 8)	\$ 129,377,678	\$ 114,220,565
Loans receivable (NOTE 1)	<u>377,611</u>	<u>457,260</u>
Total investments	<u>129,755,289</u>	<u>114,677,825</u>
Contributions receivable (NOTE 2):		
Employer	138,016	137,787
Participants	<u>160,404</u>	<u>157,136</u>
Total contributions receivable	<u>298,420</u>	<u>294,923</u>
Total Assets	<u>130,053,709</u>	<u>114,972,748</u>
Liabilities:		
Due to the Voluntary Supplemental Retirement Plan (NOTE 11)	<u>1,357,204</u>	<u>1,121,526</u>
Total Liabilities	<u>1,357,204</u>	<u>1,121,526</u>
Net Assets:		
Net assets available for benefits	<u>128,696,505</u>	<u>113,851,222</u>
Total Liabilities and Net Assets	<u>\$ 130,053,709</u>	<u>\$ 114,972,748</u>

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

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS
AVAILABLE FOR BENEFITS FOR THE
YEAR ENDED DECEMBER 31, 2021

Additions:

Additions to net assets attributed to:

Investment Income:

Net appreciation in fair value of investments and realized gains (NOTES 3 and 5)	\$ 9,906,320
Interest	1,444,187
Dividends	4,163,895
Other investment income	88,363
Subtotal	<u>15,602,765</u>

Less investment expenses	<u>(453,362)</u>
Total investment income	<u>15,149,403</u>

Contributions:

Employer	2,001,621
Participants	2,170,707
Participants rollovers and other	249,578
Total contributions	<u>4,421,906</u>
Total additions	<u>19,571,309</u>

Deductions:

Deductions from net assets attributed to:

Benefits paid to participants	4,639,174
Transfer out	86,852
Total deductions	<u>4,726,026</u>

Net increase in net assets available for benefits	14,845,283
---	------------

Net assets available for benefits:

Beginning of year	<u>113,851,222</u>
End of year	<u>\$ 128,696,505</u>

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

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 1 - Description of Plan:

The following description of the **Xavier University of Louisiana Defined Contribution Retirement Plan (the Plan)** provides only general information. Participants should refer to **the Plan** agreement for a more complete description of **the Plan's** provisions.

General

The Plan is a 403(b) defined contribution plan covering all full-time employees of **Xavier University of Louisiana (the University)**. **The Plan** is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). **The Plan** has an effective date of November 1, 1947 and was amended and restated effective January 1, 2012.

The responsibility for operation and administration of **the Plan** (except for investment management and control of assets) is vested in **the Plan Administrator**, an officer of **Xavier University of Louisiana**.

The Custodian function of **the Plan** is performed by Teachers Insurance and Annuity Association - College Retirement Equities Fund (TIAA-CREF) and VOYA Financial Advisers (**the Custodians**). **The Custodians** receive and hold contributions made to **the Plan** in trust and invest those contributions as directed by participants and according to the policies established by **the Plan** documents. **The Custodians** also make payouts from **the Plan** in accordance with **the Plan** document.

Eligibility

Full-time employees are eligible to participate in **the Plan** and elect to have elective deferrals or Roth 403(b) contributions made on their behalf hereunder immediately upon becoming employed by **the University**. For **University** contributions and employee mandatory contributions, each employee who has met the applicable age and service requirements, if any, as specified in **the Plan** provisions section, shall be eligible to have such contribution(s) made to their account under **the Plan**.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 1 - Description of Plan, Continued:

Contributions

Each year participants may contribute up to six (6) percent of pretax annual compensation each pay period, as defined in **the Plan**. Participants are eligible to make catch-up contributions before the end of **the Plan** year and may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of their contributions into various investment options offered by **the Plan**.

The Plan currently offers mutual funds, variable annuity funds, and two guaranteed annuity accounts as investment options for participants. **The University** contributes a match up to six (6) percent of the employees' base compensation. The matching **University** and employee contributions are invested directly with **the Custodians**.

Participant's Accumulation Account

Each participant's accumulation account is credited with the participant's contribution and allocations of (a) **the University's** contribution and, (b) **the Plan's** earnings, and also charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's accumulation account. Participants may direct their contributions into a variety of investment options offered by **the Custodians**.

Vesting

Participants are immediately fully vested in their contributions and **the University's** contributions plus actual earnings thereon.

Participant Loans

Loans shall be permitted under **the Plan** to the extent elected by **the University** in **the Plan** provisions section and to the extent permitted by the individual agreements controlling the account assets from which the loan is made and by which the loan will be secured.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 1 - Description of Plan, Continued:

Participant Loans, Continued

- No loan to a participant under the Plan may exceed the lesser \$50,000, reduced by the greater of (i) the outstanding balance on any loan from **the Plan** to the participant on the date the loan is made or (ii) the highest outstanding balance on loans from **the Plan** to the participant during the one-year period ending on the day before the date the loan is approved by **the Plan Administrator** (not taking into account any payments made during such one-year period); or
- One half of the value of the participant's vested account balance (as of the valuation date immediately preceding the date on which such loan is approved by **the Plan Administrator**). For purposes of Section 4.3 of the Plan document, any loan from any other plan maintained by **the University**, and any related employer shall be treated as if it were a loan made from **the Plan**, and the participant's vested interest under any such other plan shall be considered a vested interest under this **Plan**; provided, however, that the provisions of Section 4.3 of the Plan shall not be applied so as to allow the amount of a loan to exceed the amount that would otherwise be permitted in the absence of Section 4.3 of **the Plan**.

At December 31, 2021 and 2020, participants had outstanding **Plan** loan balances totaling \$377,611 and \$457,260, respectively.

Payment of Benefits

On termination of service due to death, disability or retirement, a participant may elect to receive either a one-time, lump-sum amount equal to ten (10) percent of the participant's accumulation account, or annual installments either under the Joint and Survivor Annuity, Minimum Distribution Annuity or the Limited Periodic Withdrawal Option. If a participant dies before the start of retirement benefit payments, the full current value of the accumulation account is payable to the beneficiary (ies) from the investment option selected by the participant.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 1 - Description of Plan, Continued:

Payment of Benefits, Continued

In the event of financial hardship, a participant may receive a distribution from their account. Any distribution of this type must be on account of the employee's immediate and heavy financial need as described in **the Plan** document. Participants receiving hardship distributions must cease making elective deferrals for a period of six months following such distributions.

Forfeited Accounts

As of December 31, 2021 and 2020, **the Plan** did not have a forfeited non-vested accumulation account.

NOTE 2 - Summary of Significant Accounting Principles:

Basis of Accounting

The financial statements of **the Plan** are prepared on the accrual basis of accounting. **The Plan** follows accounting standards set by the Financial Accounting Standards Board (FASB), which establishes accounting principles generally accepted in the United States of America (U.S. GAAP) that are followed in reporting the statements of net assets available for benefits and the statement of changes in net assets available for benefits. References to U.S. GAAP issued by the FASB in these notes are to the FASB Accounting Standards Codification, referred to as the ASC.

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 2 - Summary of Significant Accounting Principles, Continued:

Investment Valuation and Income Recognition

The Plan follows the fair value measurement and disclosure requirements of FASB ASC 820. See Note 5 for a discussion of fair value measurements.

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 in fair value of investments includes the gains and losses on investments bought and sold during the year as well as the unrealized appreciation or depreciation on those investments.

Subsequent Events

The Plan Administrator has evaluated subsequent events through the date that the financial statements were available to be issued, October 13, 2022, and determined that no events occurred that required disclosure. No subsequent events occurring after this date have been evaluated for inclusion in these financial statements.

Benefits Paid to Participants

Benefits are recorded when paid.

Administrative Expenses

All expenses of maintaining **the Plan** are offset against the investment earnings of the participants. Such amounts totaled \$453,362 as of December 31, 2021.

Reclassifications

Certain December 31, 2020 amounts have been reclassified to conform with the December 31, 2021 financial statement presentation.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 2 - Summary of Significant Accounting Principles, Continued:

Contributions Receivable

Contributions receivable totaling \$298,419 and \$294,923 as of December 31, 2021 and 2020 represent employee deductions and the related employee match for the month of December that were transmitted to **the Custodians** by **the University** during the subsequent month.

NOTE 3 - Investments:

The Custodians hold **the Plan's** investments and execute all investment transactions. All investment information disclosed in the accompanying financial statements and schedules, including investments held at December 31, 2021 and 2020 and net appreciation/depreciation in fair value of investments, and dividends for the year ended December 31, 2021 and 2020, was obtained or derived from information supplied to **the Plan Administrator** and certified as complete and accurate by **the Custodians**.

During 2021, **the Plan's** investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by \$9,906,320.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 4- Guaranteed Investment Contract with Teachers Insurance and Annuity Association and VOYA Life Insurance and Annuity Company:

Teachers Insurance and Annuity Association

The TIAA Traditional Annuity is a non-benefit responsive guaranteed fixed annuity investment contract with Teachers Insurance and Annuity Association (TIAA). Plan participants' accounts are credited with actual earnings on the underlying investments and charged for participant withdrawals and administrative expenses. TIAA is contractually obligated to repay the principal and a specified interest rate that is guaranteed to **the Plan**. The guaranteed investment contract is presented on the face of the statement of net assets available for benefits at fair value.

Fair value represents contributions made under the contract, plus earnings, less withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investments. The fair value of the investment contract at December 31, 2021 and 2020 was \$26,025,198 and \$25,623,311 respectively.

The TIAA Traditional Annuity is offered through a variety of contracts, including Retirement Annuities (RAs), Group Retirement Annuities (GRAs), Supplemental Retirement Annuities (SRAs), Group Supplemental Retirement Annuities (GSRAs), Retirement Choice (RC) and Retirement Choice PLUS (RCP) annuities, IRAs and Keoghs. The type of contract through which a participant allocates to the TIAA Traditional Annuity determines the applicability of certain account features, such as the guaranteed minimum interest rate, additional amounts paid, the degree of liquidity of the participant's account and the options for receiving income upon retirement.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 4- Guaranteed Investment Contract with Teachers Insurance and Annuity Association and VOYA Life Insurance and Annuity Company, Continued:

Teachers Insurance and Annuity Association, Continued

The TIAA Traditional Annuity guarantees principal and pays a guaranteed minimum interest rate during the accumulation phase-generally 3%, but between 1% and 3% for some contracts.

Each participant dollar applied to the account purchases a guaranteed amount of lifetime annuity income, paid to participants when they annuitize. Under most TIAA Traditional Annuity contracts, the minimum guaranteed interest rate during the payout phase is 2.5%.

Under RA contracts, participants may only make withdrawals in the form of a life annuity or in ten (10) installments, with the first installment paid immediately so that the “10-year” withdrawal period actually occurs over a period of nine (9) years and one (1) day.

VOYA Life Insurance and Annuity Company

The VOYA Fixed Plus Account is available through an annuity contract issued by VOYA Life Insurance and Annuity Company (VLIAC). The VOYA Fixed Plus Account is an obligation of VLIAC's general account which supports all of the company's insurance and annuity commitments. The interest rate guaranteed under the contract is subject to VLIAC's claims-paying ability.

The VOYA Fixed Plus Account is intended to be a long-term investment for participants seeking stability of principal. The assets supporting it are invested by VLIAC with this goal in mind. Therefore, VLIAC may impose limitations on the ability to move funds out of this investment option. These limitations have enabled VLIAC to provide stable credited interest rates, which historically have not varied significantly from month to month despite the general market's volatility in new money interest rates.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 4- Guaranteed Investment Contract with Teachers Insurance and Annuity Association and VOYA Life Insurance and Annuity Company, Continued:

VOYA Life Insurance and Annuity Company, Continued

Transfers and partial withdrawals from the VOYA Fixed Plus Account are generally limited to 20% of a participant's VOYA Fixed Plus Account balance per year. Full withdrawals from the VOYA Fixed Plus Account may be made for death, certain retirement income payments, and small account balances. Full withdrawals from the VOYA Fixed Plus Account for other reasons are limited and generally must be made in five-installment payments over five years. Depending on the terms of a participant's contract, other waivers to the withdrawal limitations may also apply. All withdrawals are subject to Internal Revenue Code restrictions.

The VOYA Fixed Plus Account guarantees principal and a minimum guaranteed interest rate for the life of the contract, as well as featuring two declared interest rates: a current rate, determined at least monthly, and a guaranteed minimum floor rate declared for a defined period – currently one calendar year. The guaranteed minimum floor rate may change after the defined period, but it will never be lower than the minimum guaranteed interest rate. The current rate, the guaranteed minimum floor rate and the minimum guaranteed interest rate are expressed as annual effective yields. Taking the effect of compounding into account, the interest credited to a participant's account daily yields the then current credited rate.

Beginning with the tenth anniversary of the effective date of a participant's account, VOYA Fixed Plus Account balances are credited with an interest rate at least 0.25% higher than the then-declared interest rate for the participant's account before the tenth anniversary.

VLIAC's determination of credited interest rates reflects a number of factors, including mortality and expense risks, interest rate guarantees, the investment income earned on invested assets and the amortization of any capital gains and/or losses realized on the sale of invested assets. Under this option, VLIAC assumes the risk of investment gain or loss by guaranteeing the principal amount a participant allocates to this option and promising a minimum interest rate during the accumulation period and also throughout the annuity payout period, if applicable.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 4- Guaranteed Investment Contract with Teachers Insurance and Annuity Association and VOYA Life Insurance and Annuity Company, Continued:

VOYA Life Insurance and Annuity Company, Continued

As of December 31, 2021 and 2020, the fair value of the investment contract was \$1,644,517 and \$1,622,683 respectively.

NOTE 5 - Fair Value Measurements:

In accordance with ASC Topic 820, fair value is defined as the price that **the Plan** would receive to sell an asset or pay to transfer a liability in a timely transaction with an independent buyer in the principal market, or in the absence of a principal market, the most advantageous market for the asset or liability.

ASC 820 also establishes a three-tier hierarchy to distinguish between (1) inputs that reflect the assumptions market participants would use in pricing an asset or liability developed based on market data obtained from sources independent of the reporting entity (observable inputs) and (2) inputs that reflect the reporting entity's own assumptions about the assumptions market participants would use in pricing an asset or liability developed based on the best information available in the circumstances (unobservable inputs) and to establish classification of fair value measurements for disclosure purposes.

Various inputs are used in determining the value of **the Plan's** assets or liabilities. Investments measured and reported at fair value are classified and disclosed in one of the following categories:

Level 1 - Quoted prices are available in active markets for identical investments as of the reporting date.

Level 2 – Significant other observable inputs. Pricing inputs are other than quoted prices in active markets, which are either directly or indirectly observable as of the reporting date, and fair value is determined through the use of models or other valuation methodologies including inputs that are derived principally from or corroborated by observable market data by correlation or other means.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 5 - Fair Value Measurements, Continued:

Level 3 - Significant unobservable inputs for the investment that include situations where there is little, if any, market activity. The inputs into the determination of fair value require significant management judgment or estimation.

The availability of observable inputs can vary from security to security and is affected by a wide variety of factors, including, for example, the type of security, whether the security is new or not yet established in the marketplace, the liquidity of markets, and other characteristics particular to the security. To the extent that valuation is based on models or inputs that are less observable or unobservable in the market, the determination of fair value requires more judgment. Accordingly, the degree of judgment exercised in determining fair value is greatest for instruments categorized in Level 3. The inputs or methodology used for valuing securities are not necessarily an indication of the risk associated with investing in those securities.

A description of the valuation methodologies used for assets measured at fair value are as follows:

The fair values of the TIAA-CREF Funds, the TIAA-CREF Lifecycle Funds, College Retirement Equities Funds, the TIAA Real Estate Account, the VOYA Pooled Separate Accounts, the TIAA-CREF Traditional Annuity, and the VOYA Fixed Income Annuity are based upon the underlying holdings, which are considered to be the best approximation of fair value.

Exchange-Traded Equity Securities, Common and Preferred Stock

Equity securities listed or traded on a national market or exchange are valued based on their sale price on such market or exchange at the close of business on the date of valuation, or at the mean of the closing bid and asked prices if no sale is reported. To the extent these securities are actively traded and valuation adjustments are not applied, they are categorized in Level 1 of the fair value hierarchy. Foreign investments are valued at the last sale price or official closing price reported on the exchange where traded and converted to U.S. dollars at the prevailing rates of exchange on the date of valuation. For events affecting the value of foreign securities between the time when the exchange on which they are traded closes

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 5 - Fair Value Measurements, Continued:

Exchange-Traded Equity Securities, Common and Preferred Stock, Continued

and the time when the account's net assets are calculated, such securities will be valued at fair value in accordance with generally accepted procedures. Foreign securities are generally categorized in Level 2 of the fair value hierarchy.

Debt Securities

Debt securities will generally be valued using prices provided by a pricing service that may employ various indications of value including but not limited to broker-dealer quotations. Certain debt securities, other than money market instruments, are valued based on the most recent bid price or the equivalent quoted yield for such securities (or those of comparable maturity, quality and type). Debt securities are generally categorized in Level 2 of the fair value hierarchy; in instances where prices, yields or any other key inputs are unobservable, they are categorized in Level 3 of the hierarchy.

Real Estate Properties, Real Estate Joint Ventures, and Limited Partnerships (Real Estate)

Real estate underlying holdings are generally valued based upon independent third party appraisals and independent pricing sources which are considered by **the Plan Administrator** to be the best approximation of fair value. This investment is classified within Level 3 of the fair value hierarchy.

Traditional Annuity

Investments in TIAA Traditional Annuity and the VOYA Fixed Income Annuity contracts are reported at contract value, which approximates fair value. As these investments are contract-based, observable prices for identical or similar investments do not exist and, accordingly, these investments are valued using unobservable inputs (Level 3). The contract value equals the accumulated cash contributions and interest credited to the contract, less any withdrawals. See also Note 4 for a discussion of the TIAA Traditional Annuity and the VOYA Fixed Income Annuity.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 5 - Fair Value Measurements, Continued:

Investments in Registered Investment Companies

These investments are valued at their net asset value on the valuation date. These investments are categorized in Level 1 of the fair value hierarchy.

Investments

Short-term investments, excluding investments in registered investment companies, with maturities of 60 days or less are valued at amortized cost. Short-term investments with maturities in excess of 60 days are valued in the same manner as debt securities. Short-term investments are generally categorized in Level 2 of the fair value hierarchy.

Debt, equity securities, and the traditional annuity investments classified within Level 3 have significant unobservable inputs, as they trade infrequently or not at all. Inputs used may include the original transaction price, recent transactions in the same or a similar market, and subsequent rounds of financing. When observable prices are not available, these investments are valued using one or more valuation techniques described below:

- **Market Approach:** This approach uses prices and other relevant information generated by market transactions involving identical or comparable assets or liabilities.
- **Income Approach:** This approach determines a valuation by discounting future cash flows.
- **Cost Approach:** This approach is based on the principle of substitution and the concept that a market participant would not pay more than the amount that would currently be required to replace the asset.

Although a secondary market exists for these investments, it is not active and individual transactions are typically not observable.

The valuation methodologies previously described for **the Plan** investments may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 5 - Fair Value Measurements, Continued:

Investments, Continued

valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The Plan obtains the majority of the prices used in the valuation of its investments from a pricing service that is utilized by either the Investment Managers or **the Custodians**. The pricing service utilizes industry standard pricing models that consider various inputs, including benchmark yields, reported trades, broker/dealer quotes, issuer spreads and benchmark securities as well as other relevant economic measures. As a result of discussions with **the Custodians**, **the Plan Administrator** is of the opinion that the prices received from the pricing service are a reliable representation of exit prices.

ASU No. 2010-06 requires disclosures and clarifies existing disclosure requirements about fair value measurements. ASU 2010-06 requires (a) disclosure of gross significant transfers in and/or out between Levels 1 and 2 and the reasons for those transfers, (b) disclosure of all transfers in/out of Level 3 (significant transfers to be presented gross) and the reasons for those transfers, and (c) purchases, sales, issuances and settlements to be disclosed separately (i.e., gross) within the Level 3 roll forward. ASU 2010-06 also clarifies (a) the levels of disaggregation in presenting fair value disclosures for each class of assets and liabilities and (b) the disclosures about valuation techniques and inputs that are required for fair value measurements that fall within either Level 2 or 3.

ASU 2011-04, which is effective for fiscal years ending after December 15, 2011, requires additional disclosures with a particular focus on Level 3 measurements.

ASU 2011-04 stipulates that quantitative information about significant unobservable inputs used in the Level 3 fair value measurement and a description of the Level 3 valuation processes be disclosed. Additionally, for nonfinancial assets, a nonpublic entity must disclose why the asset is being used in a manner different from its highest and best use.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 5 - Fair Value Measurements, Continued:

Investments, Continued

In accordance with ASC 820, certain investments measured at fair value using the net asset value per share practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the Statements of assets and liabilities. The tables on the following pages summarize the valuation of **the Plan's** investments measured at fair value by the FASB ASC 820 fair value hierarchy levels as of December 31, 2021 and 2020:

Assets at Fair Value as of December 31, 2021

<u>Description</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>	<u>Total</u>
Recurring Fair Value Measurements:					
TIAA Traditional Annuity	\$ -	-	26,025,198	-	\$26,025,198
TIAA Real Estate					
Real estate investment trusts	-		3,813,805	133,818	3,947,623
Marketable securities	-	312,241			312,241
Other	-	-	200,727	-	200,727
Total TIAA Real Estate	-	312,241	4,014,532	133,818	4,460,591
TIAA-CREF Lifecycle					
Registered investments	13,019,926	-	-	782,697	13,802,623
Total TIAA-CREF Lifecycle	13,019,926	-	-	782,697	13,802,623
TIAA-CREF Real Estate Securities					
Real estate investment trusts	1,419,579	7,243	-	-	1,426,822
Short-term investments	-	21,728	-	-	21,728
Total TIAA-CREF Real Estate	1,419,579	28,971	-	-	1,448,550
TIAA-CREF Equity Funds					
Consumer discretionary	147,036	12,958	-	-	159,994
Consumer staples	42,116	6,052	-	-	48,168
Communications	23,197	1,789	-	-	24,986
Financials	253,676	2,991	-	-	256,667
Health care	84,071	6,195	-	-	90,266
Industrials	111,065	6,568	-	-	117,633
Information technology	293,750	6,733	-	-	300,483
Utilities	23,197	-	-	-	23,197
All other	8,286,778	338,901	-	-	8,625,679
International	37,672	2,618,773	-	-	2,656,445
Short-term investments	39,400	200,206	-	-	239,606
Total TIAA-CREF Equity Funds	9,318,762	3,201,166	-	-	12,519,928

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 5 - Fair Value Measurements, Continued:

Investments, Continued

Assets at Fair Value as of December 31, 2021, Continued

<u>Description</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>	<u>Total</u>
CREF-Equity Funds					
Consumer discretionary	\$3,489,070	\$1,097,651	\$ -	\$ -	\$4,586,721
Consumer staples	1,168,892	657,342	-	-	1,826,234
Energy	506,594	237,654	-	-	744,248
Financials	2,208,981	1,194,063	-	-	3,403,044
Health care	3,345,812	744,825	-	-	4,090,637
Industrials	1,922,058	1,078,651	-	-	3,000,709
Information technology	8,028,393	1,091,166	-	-	9,119,559
Materials	585,807	639,962	-	-	1,225,769
Communication services	2,580,199	491,412	-	-	3,071,611
Utilities	506,594	164,654	-	-	671,248
Real Estate	506,594	237,654	-	-	744,248
International	5,716,705	2,313,366	-	-	8,030,071
All other	3,892,284	871,703	-	-	4,763,987
Short-term investments	<u>53,348</u>	<u>1,894,537</u>	-	-	<u>1,947,885</u>
Total CREF Equity Funds	<u>34,511,331</u>	<u>12,714,640</u>	-	-	<u>47,225,971</u>
CREF Social Choice-Debt Bond Fund	-	<u>1,212,616</u>	-	-	<u>1,212,616</u>
Total CREF Social Choice-Debt	-	<u>1,212,616</u>	-	-	<u>1,212,616</u>
CREF Bond Market					
Bond Fund	-	<u>3,232,366</u>	-	-	<u>3,232,366</u>
Total CREF Bond Market	-	<u>3,232,366</u>	-	-	<u>3,232,366</u>
CREF Inflation Linked-Bonds					
Bond Fund	-	<u>1,320,660</u>	-	-	<u>1,320,660</u>
Total CREF Inflation Linked-Bonds	-	<u>1,320,660</u>	-	-	<u>1,320,660</u>
VOYA Equity Funds					
Consumer discretionary	678,575	31,649	-	-	710,224
Consumer staples	127,026	22,890	-	-	149,916
Communications	401,631	3,609	-	-	405,240
Financials	633,625	21,651	-	-	655,276
Health care	973,747	17,321	-	-	991,068
Industrials	486,839	28,766	-	-	515,605
Information technology	867,152	46,911	-	-	914,063
Materials	35,176	17,215	-	-	52,391
Energy	30,355	9,021	-	-	39,376
Utilities	371,539	5,413	-	-	376,952
Real Estate	33,841	-	-	-	33,841
All other	6,948,218	475,422	15,524	-	7,439,164
International	59,311	425,855	-	-	485,166
Short-term investments	<u>837,004</u>	<u>253,637</u>	-	-	<u>1,090,641</u>
Total VOYA Equity Funds	<u>12,484,039</u>	<u>1,359,360</u>	<u>15,524</u>	-	<u>13,858,923</u>

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 5 - Fair Value Measurements, Continued:

Investments, Continued

Assets at Fair Value as of December 31, 2021, Continued

Description

VOYA Fixed Plus Annuity	-	-	1,644,516	-	1,644,516
VOYA Bond Mutual Funds	-	2,380,999	4,375	-	2,385,374
VOYA Solution					
Equity Mutual Fund	240,362	-	-	-	240,362
Total VOYA Solution	240,362	-	-	-	240,362
Total Recurring Fair Value Measurements	\$70,993,999	\$25,763,019	\$31,704,145	\$916,515	\$129,377,678

Assets at Fair Value as of December 31, 2020

Description	Level 1	Level 2	Level 3	Fair Value	Total
Recurring Fair Value Measurements:					
TIAA Traditional Annuity	\$ -	-	25,623,312	-	\$25,623,312
TIAA Real Estate					
Real estate investment trusts	-		3,217,624	72,064	3,289,688
Marketable securities	-	108,095			108,095
Other	-	-	205,380	-	205,380
Total TIAA Real Estate	-	108,095	3,423,004	72,064	3,603,163
TIAA-CREF Lifecycle					
Registered investments	10,847,703	-	-	451,988	11,299,691
Total TIAA-CREF Lifecycle	10,847,703	-	-	451,988	11,299,691
TIAA-CREF Real Estate Securities					
Real estate investment trusts	979,487	17,267	-	-	996,754
Short-term investments	-	13,026	-	-	13,026
Total TIAA-CREF Real Estate	979,487	30,293	-	-	1,009,780
TIAA-CREF Equity Funds					
Consumer discretionary	104,170	8,247	-	-	112,417
Consumer staples	39,476	4,758	-	-	44,234
Communications	13,263	1,569	-	-	14,832
Financials	126,972	-	-	-	126,972
Health care	244,517	9,295	-	-	253,812
Industrials	68,619	3,978	-	-	72,597
Information technology	203,377	4,418	-	-	207,795
Utilities	10,197	2,124	-	-	12,321
All other	6,151,148	145,136	-	-	6,296,284
International	54,040	2,080,284	-	-	2,134,324
Short-term investments	33,163	249,141	-	-	282,304
Total TIAA-CREF Equity Funds	7,048,942	2,508,950	-	-	9,557,892

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 5 - Fair Value Measurements, Continued:

Investments, Continued

Assets at Fair Value as of December 31, 2020, Continued

<u>Description</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>	<u>Total</u>
CREF-Equity Funds					
Consumer discretionary	\$3,393,933	\$856,530	\$ -	\$ -	\$,4,250,463
Consumer staples	1,133,453	559,244	-	-	1,692,697
Energy	309,950	201,077	-	-	511,027
Financials	2,080,329	1,005,385	-	-	3,085,714
Health care	3,402,746	661,012	-	-	4,063,758
Industrials	2,039,041	768,988	-	-	2,808,029
Information technology	6,860,280	930,278	-	-	7,790,558
Materials	608,007	541,910	-	-	1,149,917
Communication services	2,508,576	361,277	-	-	2,869,853
Utilities	464,925	201,077	--	-	666,002
International	4,142,688	2,103,006	-	-	6,245,694
All other	2,962,148	1,097,415	-	-	4,059,563
Short-term investments	<u>102,402</u>	<u>2,402,180</u>	<u>-</u>	<u>-</u>	<u>2,504,582</u>
Total CREF Equity Funds	<u>30,008,478</u>	<u>11,689,379</u>	<u>-</u>	<u>-</u>	<u>41,697,857</u>
CREF Social Choice-Debt Bond Fund	<u>-</u>	<u>1,112,452</u>	<u>-</u>	<u>-</u>	<u>1,112,452</u>
Total CREF Social Choice-Debt	<u>-</u>	<u>1,112,452</u>	<u>-</u>	<u>-</u>	<u>1,112,452</u>
CREF Bond Market					
Bond Fund	<u>-</u>	<u>3,730,888</u>	<u>-</u>	<u>-</u>	<u>3,730,888</u>
Total CREF Bond Market	<u>-</u>	<u>3,730,888</u>	<u>-</u>	<u>-</u>	<u>3,730,888</u>
CREF Inflation Linked-Bonds					
Bond Fund	<u>-</u>	<u>1,251,404</u>	<u>-</u>	<u>-</u>	<u>1,251,404</u>
Total CREF Inflation Linked-Bonds	<u>-</u>	<u>1,251,404</u>	<u>-</u>	<u>-</u>	<u>1,251,404</u>
VOYA Equity Funds					
Consumer discretionary	1,000,441	32,563	-	-	1,033,004
Consumer staples	231,924	21,423	-	-	253,347
Communications	606,974	7,073	-	-	614,047
Financials	813,345	22,986	-	-	836,331
Health care	1,100,990	15,914	-	-	1,116,904
Industrials	682,090	27,493	-	-	709,583
Information technology	2,262,557	38,900	-	-	2,301,457
Materials	97,121	15,382	-	-	112,503
Energy	19,176	5,305	-	-	24,481
Utilities	410,118	5,305	-	-	415,423
Real Estate	83,558	-	-	-	83,558
All other	2,033,532	413,935	-	-	2,447,467
International	308,875	392,098	18,972	-	719,945
Short-term investments	<u>648,645</u>	<u>181,049</u>	<u>926</u>	<u>-</u>	<u>830,620</u>
Total VOYA Equity Funds	<u>10,299,646</u>	<u>1,179,426</u>	<u>19,898</u>	<u>-</u>	<u>11,498,970</u>

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 5 - Fair Value Measurements, Continued:

Investments, Continued

Assets at Fair Value as of December 31, 2020, Continued

Description

VOYA Fixed Plus Annuity	-	-	1,622,683	-	1,622,683
VOYA Bond Mutual Funds	-	2,197,968	14,505	-	2,212,473
Total Recurring Fair Value Measurements	<u>\$59,184,256</u>	<u>\$23,808,855</u>	<u>\$30,703,402</u>	<u>\$524,052</u>	<u>\$114,220,565</u>

The changes in investments measured at fair value for which **the Plan** has used Level 3 inputs to determine fair value as of December 31, 2021 are as follows:

2021

Fair Value Measurements Using Significant Unobservable Inputs (Level 3)

	<u>TIAA Real Estate Account</u>	<u>VOYA Equity Funds</u>	<u>VOYA Bond Fund</u>	<u>TIAA Traditional</u>	<u>Voya Fixed Plus</u>	<u>Total Fair Value</u>
Opening Balance	\$3,423,004	\$18,972	\$15,431	\$25,623,312	\$1,622,683	\$30,703,402
Purchases	412,659	6,594	4,300	2,582,602	213,640	3,219,795
Sales	(242,167)	(952)	-	(2,968,130)	(191,807)	(3,403,056)
Transfers in/(out)	(180,157)	(8,935)	(15,617)	-	-	-
Total gains or losses	<u>601,193</u>	<u>(155)</u>	<u>261</u>	<u>787,414</u>	<u>-</u>	<u>1,184,004</u>
Closing Balance	<u>\$4,014,532</u>	<u>\$15,524</u>	<u>\$4,375</u>	<u>\$26,025,198</u>	<u>\$1,644,516</u>	<u>\$31,704,145</u>
Change in unrealized gains (losses)	<u>\$ 823,848</u>	<u>\$ 1,636</u>	<u>\$ 255</u>	<u>\$ (86,536)</u>	<u>\$ -</u>	<u>\$ 739,203</u>

As of December 31, 2021, transfers out of Level 3 into Level 2 occurred because sufficient observable inputs were available.

Quantitative information about Level 3 Fair Value Measurements as of December 31, 2021 is as follows:

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 5 - Fair Value Measurements, Continued:

<u>Description</u>	<u>Fair Value at 12/31/21</u>	<u>Valuation Technique</u>	<u>Unobservable Input</u>
TIAA Real Estate	\$4,014,532	Independent Appraisals	Market and Appraisal Risk
VOYA Equity Funds	15,524	Independent Appraisals	Market and Appraisal Risk
VOYA Bond Funds	4,375	Future Interest Rates and Discounted Cash Flow	Discount Rate
TIAA Traditional Annuity	26,025,198	Future Interest Rates and Discounted Cash Flow	Discount Rate
VOYA Fixed Plus Annuity	1,644,516	Future Interest Rates and Discounted Cash Flow	Discount Rate
Total	<u>\$31,704,145</u>		

The changes in investments measured at fair value for which **the Plan** has used Level 3 inputs to determine fair value as of December 31, 2020 are as follows:

2020

Fair Value Measurements Using Significant Unobservable Inputs (Level 3)

	<u>TIAA Real Estate Account</u>	<u>VOYA Equity Funds</u>	<u>VOYA Bond Fund</u>	<u>TIAA Traditional</u>	<u>Voya Fixed Plus</u>	<u>Total Fair Value</u>
Opening Balance	\$ 3,549,099	\$ -	\$ -	\$ 24,958,533	\$ 1,307,962	\$ 29,815,594
Purchases	272,889	4,345	17,710	2,130,616	720,451	3,146,012
Sales	(663,509)	(3,379)	(2,279)	(2,156,194)	(431,151)	(3,256,512)
Total gains or losses	<u>264,525</u>	<u>18,006</u>	<u>-</u>	<u>690,357</u>	<u>25,421</u>	<u>998,309</u>
Closing Balance	<u>\$ 3,423,004</u>	<u>\$ 18,972</u>	<u>\$ 15,431</u>	<u>\$ 25,623,312</u>	<u>\$ 1,622,683</u>	<u>\$ 30,703,402</u>
Change in unrealized gains	<u>\$ (299,098)</u>	<u>\$ 2,742</u>	<u>\$ (1,405)</u>	<u>\$ 453,310</u>	<u>\$ -</u>	<u>\$ 155,549</u>

As of December 31, 2020, transfers out of Level 3 into Level 2 occurred because sufficient observable inputs were available.

Quantitative information about Level 3 Fair Value Measurements as of December 31, 2020 is as follows

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 5 - Fair Value Measurements, Continued:

<u>Description</u>	<u>Fair Value at 12/31/20</u>	<u>Valuation Technique</u>	<u>Unobservable Input</u>
TIAA Real Estate	\$3,423,004	Independent Appraisals	Market and Appraisal Risk
VOYA Equity Funds	18,972	Independent Appraisals	Market and Appraisal Risk
VOYA Bond Funds	15,431	Future Interest Rates and Discounted Cash Flow	Discount Rate
TIAA Traditional Annuity	25,623,312	Future Interest Rates and Discounted Cash Flow	Discount Rate
VOYA Fixed Plus Annuity	1,622,683	Future Interest Rates and Discounted Cash Flow	Discount Rate
Total	<u><u>\$30,703,402</u></u>		

The Plan's financial instruments are generally short-term in nature and contain minimal credit risk. These instruments consist of loans and contributions receivable and accounts payable. The carrying value of those assets and liabilities in the Statements of Net Assets Available for Plan Benefits are assumed to approximate fair value.

NOTE 6- Party-In-Interest Transactions:

Certain plan investments are shares of mutual funds managed by TIAA and VOYA. TIAA and VOYA are **the Custodians** as defined by **the Plan** and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by **the Plan** for the investment management and administrative services amounted to \$453,362 for the year ended December 31, 2021.

NOTE 7- Plan Termination:

Although it has not expressed any intent to do so, **the University** has the right under **the Plan** to discontinue its contributions at any time and to terminate **the Plan** subject to the provisions of ERISA. In the event of plan termination, participants would be notified of the termination and all accumulation accounts will become non-forfeitable to the extent that benefits are accrued.

NOTE 8- Information Prepared and Certified by 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 Disclosures under ERISA. Accordingly, TIAA-CREF and VOYA Financial Advisers, **the Custodians of the Plan**, have certified as being complete

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 8- Information Prepared and Certified by Custodians, Continued:

and accurate the investments on the statements of net assets available for benefits as of December 31, 2021 and 2020, the investment activity reflected in the statement of changes in net assets available for benefits for the year ended December 31, 2021, and the investment information included in the supplemental schedule of the financial statements as of and for the year ended December 31, 2021.

Accordingly, as permitted under such election, **the Plan Administrator** instructed **the Plan's** independent auditors not to perform any auditing procedures with respect to the information certified as complete and accurate by **the Plan's Custodians** for their respective periods. Additionally, JP Morgan Chase Bank, N.A. (JP Morgan) has authorized TIAA to act as JP Morgan's agent for purposes of certifying the year-end financial statements required by 29 CFR 2520.103-8, except for annuity contracts.

The following information included in the accompanying financial statements and supplemental schedules was obtained from data that has been prepared and certified to as complete and accurate by **the Custodians**.

	<u>December 31,</u>	
Investments, at fair value:	<u>2021</u>	<u>2020</u>
TIAA-CREF- TIAA Traditional	\$26,025,198	\$25,623,311
TIAA-CREF-Life Cycle mutual funds	13,802,624	11,299,691
CREF-Equities:		
CREF Stock	22,812,321	20,440,256
CREF Social Choice	2,027,031	1,788,335
CREF Global Equities	9,246,215	7,363,467
CREF Growth	8,060,373	7,222,614
CREF Equity Index	3,976,058	3,339,852
CREF- Bond Market	3,715,363	3,730,888
CREF Social Choice-Debt	1,212,616	1,112,452
CREF- Money Market	607,636	1,543,331
TIAA-CREF- Real Estate	4,460,591	3,603,162
CREF-Inflation Linked Bonds	1,333,999	1,251,404
TIAA-CREF-Equities:		
Growth and Income	668,065	531,048
International Equity	3,182,726	2,573,335
Large-Cap Value	1,854,443	1,325,192
Mid-Cap Growth	361,206	203,738
Mid-Cap Value	1,346,508	885,181
Quantum Small-Cap Equities	<u>1,990,135</u>	<u>1,567,067</u>
Subtotal;	106,683,108	95,404,325

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 8- Information Prepared and Certified by Custodians, Continued:

	<u>December 31,</u>	
Investments, at fair value:	<u>2021</u>	<u>2020</u>
Social Choice	1,463,979	1,177,850
S & P 500	1,652,865	1,294,485
TIAA-CREF-Real Estate Securities	1,448,550	1,009,780
American Funds New Perspective	530,668	520,054
Invesco Developing Market Fund	617,181	632,414
Janus Overseas Fund	371,583	311,029
Lord Abbett Developing Growth Fund	1,128,997	1,068,451
AMG/River Road Mid-Cap Fund	988,256	713,477
Voya Mid-Cap Opportunity	365,246	292,071
JPMorgan Small-Cap Core	327,853	292,293
VIRTUS CEREDEx Large-Cap	545,739	470,070
American Century Small-Mid Cap	449,486	333,858
MFS Core Equity	156,669	106,301
Voya Large Cap Growth Fund	1,480,506	1,258,970
T Rowe Price All Cap Opportunity	1,241,787	860,115
Invesco Diversified Dividend Fund	801,903	717,778
VIRTUS CEREDEx Mid-Cap	47,435	33,867
Voya Invesco Equity	218,733	3,734
Voya Solution 2025	16,783	8,602
Voya Solution 2035	1,039	42,874
Voya Solution 2040	23,360	-
Voya Solution 2045	102,938	62,865
Voya Solution Income	793	746
Voya Solution 2050	12,448	-
Voya Solution 2055	20,452	20,057
Voya Solution 2060	7,235	-
Neuberger Berman Sustain Equity	141,864	15,832
T Rowe Price Capital Appreciation	5,410,165	4,577,570
Voya Solution 2030	55,314	6,092
Delaware Diversified Income Fund	648,376	719,905
Templeton Global Bond	461,225	514,327
Voya High Yield	310,625	128,091
Voya Fixed Plus Account	<u>1,644,517</u>	<u>1,622,683</u>
Total	<u>\$129,377,678</u>	<u>\$114,220,565</u>

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2021 AND 2020

NOTE 9- Income Tax Status:

The Plan is structured to comply with the applicable requirements of Section 403(b) of the Internal Revenue Code of 1986, as amended (IRC). A tax determination letter program is not yet available for IRC Section 403(b) plans through the Internal Revenue Service. **The Plan Administrator** believes that **the Plan** is currently designed and being operated in compliance with applicable requirements of the IRC and as such is exempt from Federal income taxes.

The Plan Administrator believes **the Plan** is no longer subject to income tax examinations for years prior to 2018.

NOTE 10- 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 the investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

NOTE 11- Due to the VOYA Voluntary Supplemental Retirement Plan

Accumulated contributions and investment earnings for the VOYA Voluntary Supplemental Retirement Plan totaling \$1,357,204 and \$1,121,526 for the years ended December 31, 2021 and 2020, respectively have been included in the assets of the VOYA Defined Contribution Retirement Plan.

SUPPLEMENTAL SCHEDULES

**XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN**

EIN: 72-0719924 PLAN NUMBER: 001 FORM 5500

ATTACHMENT TO FORM 5500

SCHEDULE H, LINE 4i

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2021

(a)	(b)	(c)	(d)	(e)
	IDENTITY OF ISSUE, BORROWER, LESSOR or SIMILAR PARTY	DESCRIPTION OF INVESTMENT	<u>COST</u>	<u>CURRENT VALUE</u>
*	TIAA-CREF-Traditional Annuity	TIAA Traditional Non Benefit Responsive	\$19,861,666	\$26,025,198
*	TIAA Real Estate Account	TIAA Real Estate	2,941,276	4,460,591
*	College Retirement Equities Fund	CREF Stock	11,885,904	22,812,321
*	College Retirement Equities Fund	CREF Money Market	592,368	607,636
*	College Retirement Equities Fund	CREF Social Choice	2,136,169	3,239,647
*	College Retirement Equities Fund	CREF Bond Market	3,249,501	3,715,363
*	College Retirement Equities Fund	CREF Global Equities	5,399,196	9,246,215
*	College Retirement Equities Fund	CREF Growth	3,084,552	8,060,373
*	College Retirement Equities Fund	CREF Equity Index	1,721,603	3,976,058
*	College Retirement Equities Fund	CREF Inflation-Linked Bond	1,151,287	1,333,999
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2010-Rtmt	459,593	521,252
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2015-Rtmt	314,875	359,312
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2020-Rtmt	1,475,315	1,619,979
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2025-Rtmt	1,471,440	1,757,308
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2030-Rtmt	1,634,232	1,958,715
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2035-Rtmt	1,344,226	1,645,551
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2040-Rtmt	2,300,208	2,778,808
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2045-Rtmt	1,746,786	2,070,534
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2050-Rtmt	751,685	911,102
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2055-Rtmt	89,239	99,228
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2060-Rtmt	3,225	3,467
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle Rtmt Inc-Rtmt	70,908	77,368
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Gr & Inc-Rtmt	508,741	668,065
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Intl Eq-Rtmt	2,521,638	3,182,726
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Lg-Cap Val-Rtmt	1,511,792	1,854,443
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Mid-Cap Gr-Rtmt	378,971	361,206
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Mid-Cap Val-Rtmt	1,311,322	1,346,508
*	TIAA-CREF Real Estate Securities Fund	TIAA-CREF Real Est Secs-Rtmt	986,458	1,448,550
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Sm-Cap Eq-Rtmt	1,814,079	1,990,135
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Social Ch Eq-Rtmt	1,068,434	1,463,979
*	TIAA-CREF Funds-Equity Index Fund	TIAA-CREF S&P 500 Idx-Rtmt	943,635	1,652,865
*	VOYA Financial Services	American Funds New Perspective	364,251	530,668
*	VOYA Financial Services	Invesco Developing Markets Fund	517,226	617,181
*	VOYA Financial Services	Janus Overseas Fund	279,763	371,583
*	VOYA Financial Services	Lord Abbett Developing Growth Fund	1,035,123	1,128,997
	* Party-in-interest			

See the Independent Auditors' Report on Supplementary Information.

**XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN**

EIN: 72-0719924 PLAN NUMBER: 001 FORM 5500

ATTACHMENT TO FORM 5500

SCHEDULE H, LINE 4i

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2021, CONTINUED

(a)	(b)	(c)	(d)	(e)
	IDENTITY OF ISSUE, BORROWER, LESSOR or SIMILAR PARTY	DESCRIPTION OF INVESTMENT	<u>COST</u>	<u>CURRENT VALUE</u>
*	VOYA Financial Services	AMG/River Road Mid-Cap Fund	\$1,288,172	988,256
*	VOYA Financial Services	VOYA JPMorgan Small-Cap Core	282,600	327,853
*	VOYA Financial Services	VOYA American Century Small-Mid Cap	365,447	449,486
*	VOYA Financial Services	MFS Core Equity Fund	117,836	156,669
*	VOYA Financial Services	VOYA Large Cap Growth Fund	1,310,019	1,480,506
*	VOYA Financial Services	T Rowe Price All Cap Opportunity	1,039,512	1,241,787
*	VOYA Financial Services	Invesco Diversified Dividend Fund	736,624	801,903
*	VOYA Financial Services	Neuberger Berman Sustain Equity	135,002	141,864
*	VOYA Financial Services	VOYA T Rowe Price Capital Appreciation	4,671,137	5,410,165
*	VOYA Financial Services	VOYA Invesco Equity	205,601	218,733
*	VOYA Financial Services	VOYA Solution 2025	15,939	16,783
*	Voya Financial Services	VOYA Solution 2030	54,116	55,314
*	VOYA Financial Services	VOYA Solution 2035	1,008	1,039
*	VOYA Financial Services	VOYA Solution 2040	22,711	23,360
*	VOYA Financial Services	VOYA Solution 2045	90,563	102,938
*	VOYA Financial Services	VOYA Solution 2050	12,184	12,448
*	VOYA Financial Services	VOYA Solution 2055 Portfolio	20,733	20,452
*	VOYA Financial Services	VOYA Solution 2060	7,201	7,235
*	VOYA Financial Services	VOYA Solution Income	697	793
*	VOYA Financial Services	VOYA High Yield Portfolio	307,763	310,625
*	VOYA Financial Services	Delaware Diversified Income Fund	638,904	648,376
*	VOYA Financial Services	Templeton Global Bond Fund	596,863	461,225
*	VOYA Financial Services	VOYA Mid-Cap Opportunity	307,795	365,246
*	VIRTUS CEREDX	Large-Cap	600,502	545,739
*	VIRTUS CEREDX	Mid-Cap	45,569	47,435
*	VOYA Life Insurance and Annuity	VOYA Fixed Plus Account	1,531,933	1,644,517
	Participant Loans	3.25%	<u>377,611</u>	<u>377,611</u>
	TOTAL		<u>\$91,710,729</u>	<u>\$129,755,289</u>

* Party-in-interest

(c) Including maturity date, rate of interest, collateral, par or maturity value

See the Independent Auditors' Report on Supplementary Information.

**XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN**

EIN: 72-0719924

PLAN NUMBER: 001

FORM 5500

ATTACHMENT TO FORM 5500

SCHEDULE H, LINE 4j

SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)

DECEMBER 31, 2021

(a) IDENTITY OF ISSUE, BORROWER, LESSOR or SIMILAR PARTY	(b) DESCRIPTION OF INVESTMENT	(c) COSTS OF ACQUISITIONS	(d) PROCEEDS OF DISPOSITIONS
TIAA-CREF-Traditional Annuity	TIAA Traditional Non Benefit Responsive	\$2,582,602	\$2,968,130
TIAA Real Estate Account	TIAA Real Estate	458,510	269,074
College Retirement Equities Fund	CREF Stock	819,094	2,204,006
College Retirement Equities Fund	CREF Money Market	86,333	1,022,030
College Retirement Equities Fund	CREF Social Choice	228,665	251,230
College Retirement Equities Fund	CREF Bond Market	472,659	440,611
College Retirement Equities Fund	CREF Global Equities	994,089	330,670
College Retirement Equities Fund	CREF Growth	202,813	796,543
College Retirement Equities Fund	CREF Equity Index	91,187	290,120
College Retirement Equities Fund	CREF Inflation-Linked Bond	239,178	226,386
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2010-Rtmt	50,227	67,278
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2015-Rtmt	37,268	1,689
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2020-Rtmt	379,152	294,677
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2025-Rtmt	222,114	86,074
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2030-Rtmt	503,565	44,778
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2035-Rtmt	193,619	-0-
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2040-Rtmt	632,401	15,139
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2045-Rtmt	441,039	17,371
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2050-Rtmt	198,907	-0-
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2055-Rtmt	41,281	1,759
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2060-Rtmt	1,766	-0-
TIAA-CREF Lifecycle Fund	TIAA-CREF Lfcycle Rtmt Inc- Rtmt	11,212	-0-
TIAA-CREF Funds-Equity Fund	TIAA-CREF Gr & Inc-Rtmt	141,220	30,471
TIAA-CREF Funds-Equity Fund	TIAA-CREF Intl Eq-Rtmt	517,311	117,306
TIAA-CREF Funds-Equity Fund	TIAA-CREF Lg-Cap Val-Rtmt	368,486	61,440
TIAA-CREF Funds-Equity Fund	TIAA-CREF Mid-Cap Gr-Rtmt	252,087	45,382
TIAA-CREF Funds-Equity Fund	TIAA-CREF Mid-Cap Val-Rtmt	351,229	25,622
TIAA-CREF Real Estate Securities Fund	TIAA-CREF Real Est Secs-Rtmt	221,354	137,910
TIAA-CREF Funds-Equity Fund	TIAA-CREF Quantum Sm-Cap Eq-Rtm	559,018	167,028
TIAA-CREF Funds-Equity Fund	TIAA-CREF Social Ch Eq-Rtmt	329,058	216,595
TIAA-CREF Funds-Equity Index Fund	TIAA-CREF S&P 500 Idx-Rtmt	229,380	212,986
VOYA Financial Services	American Funds New Perspective	110,958	100,344
VOYA Financial Services	Invesco Developing Markets Fund	95,374	110,608
VOYA Financial Services	Janus Overseas Fund	78,959	18,405
VOYA Financial Services	Lord Abbett Developing Growth Fund	284,288	223,742

See the Independent Auditors' Report on Supplementary Information.

**XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN**

EIN: 72-0719924

PLAN NUMBER: 001

FORM 5500

ATTACHMENT TO FORM 5500

SCHEDULE H, LINE 4j

SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)

DECEMBER 31, 2021, CONTINUED

(a) IDENTITY OF ISSUE, BORROWER, LESSOR or SIMILAR PARTY	(b) DESCRIPTION OF INVESTMENT	(c) COSTS OF ACQUISITIONS	(d) PROCEEDS OF DISPOSITIONS
VOYA Financial Services	AMG/River Road Mid-Cap Fund	\$557,603	\$282,825
VOYA Financial Services	VOYA JPMorgan Small-Cap Core	79,842	44,282
VOYA Financial Services	VOYA American Century Small-Mid Cap	134,671	19,043
VOYA Financial Services	MFS Core Equity Fund	53,232	2,865
VOYA Financial Services	VOYA Large Cap Growth Fund	354,903	133,368
VOYA Financial Services	T Rowe Price All Cap Opportunity	399,158	17,486
VOYA Financial Services	Invesco Diversified Dividend Fund	184,936	100,811
VOYA Financial Services	Neuberger Berman Sustain Equity	126,032	-0-
VOYA Financial Services	VOYA T Rowe Price Capital Appreciation	1,342,442	509,847
VOYA Financial Services	Invesco Equity	214,999	-0-
VOYA Financial Services	VOYA Solution 2025	2,181	-0-
VOYA Financial Services	VOYA Solution 2030	55,504	6,282
VOYA Financial Services	VOYA Solution 2035	2,046	43,881
VOYA Financial Services	VOYA Solution 2040	23,360	-0-
VOYA Financial Services	VOYA Solution 2045	40,073	-0-
VOYA Financial Services	VOYA Solution 2050	12,448	-0-
VOYA Financial Services	VOYA Solution 2055 Portfolio	19,810	19,416
VOYA Financial Services	VOYA Solution 2060	7,235	-0-
VOYA Financial Services	VOYA Solution Income	51	4
VOYA Financial Services	VOYA High Yield Portfolio	260,288	77,754
VOYA Financial Services	Delaware Diversified Income Fund	59,686	131,215
VOYA Financial Services	Templeton Global Bond Fund	34,971	88,068
VOYA Financial Services	VOYA Fixed Plus Account	213,640	191,807
VIRTUS CEREDX	Large-Cap	169,184	93,516
VIRTUS CEREDX	Mid-Cap	13,568	-0-
VOYA Financial Services	VOYA Mid-Cap Opportunity	86,369	13,194
Participant Loans	3.25%	145,110	68,493
TOTAL		<u>\$17,019,745</u>	<u>\$12,639,561</u>

(b) Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value

See the Independent Auditors' Report on Supplementary Information.

**XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN**

**EIN: 72-0719924 PLAN NUMBER: 001 FORM 5500
FINANCIAL SCHEDULES
FOR THE YEAR ENDED DECEMBER 31, 2021**

<u>Description</u>	<u>Status</u>
Schedule of Loans or Fixed Income Obligations in Default or Classified as Uncollectible	No Transactions Noted
Schedule of Leases in Default or Classified as Uncollectible	No Transactions Noted
Schedule of Nonexempt (Prohibited) Transactions	No Transactions Noted
Schedule of Delinquent Participant Contributions	No Transactions Noted
Schedule of Reportable Transactions	No Transactions Noted

See the Independent Auditors' Report on Supplementary Information.

Plan Name	Xavier University of Louisiana Defined Contribution Retirement Plan
Plan Sponsor EIN	72-0635884
ERISA Plan #	001
Plan Year Ending	December 31, 2021

The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Sch. H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant (IQPA).

Form/Schedule	Line #	Description	Attachment
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	X

Plan Name	Xavier University of Louisiana Defined Contribution Retirement Plan
Plan Sponsor EIN	72-0635884
ERISA Plan #	001
Plan Year Ending	December 31, 2021

The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Sch. H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant (IQPA).

Form/Schedule	Line #	Description	Attachment
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	X

Plan Name	Xavier University of Louisiana Defined Contribution Retirement Plan
Plan Sponsor EIN	72-0635884
ERISA Plan #	001
Plan Year Ending	December 31, 2021

The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Sch. H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant (IQPA).

Form/Schedule	Line #	Description	Attachment
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	X