

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	▶ ☒
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	▶ ☐

Part II	Basic Plan Information—enter all requested information				
1a Name of plan <u>BARD COLLEGE/SIMONS ROCK 403(B) PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>06/01/1941</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>06/01/1941</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>06/01/1941</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>BARD COLLEGE</u> <u>P.O. BOX 5000</u> <u>ANNANDALE, NY 12504</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>14-1713034</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>845-758-7516</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>611000</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>14-1713034</u>	2c Plan Sponsor's telephone number <u>845-758-7516</u>	2d Business code (see instructions) <u>611000</u>	
2b Employer Identification Number (EIN) <u>14-1713034</u>					
2c Plan Sponsor's telephone number <u>845-758-7516</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	LAURA RAMSEY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/17/2022	LAURA RAMSEY
	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	2241
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)	1049
a(2) Total number of active participants at the end of the plan year		6a(2)	1163
b Retired or separated participants receiving benefits.....		6b	0
c Other retired or separated participants entitled to future benefits		6c	1070
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	2233
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	15
f Total. Add lines 6d and 6e		6f	2248
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	2215
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: 2F 2G 2L 2M 2S 2T			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>1</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021	
A Name of plan BARD COLLEGE/SIMONS ROCK 403(B) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BARD COLLEGE	D Employer Identification Number (EIN) 14-1713034

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

(a) Name of insurance carrier
TIAA-CREF

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1624203	69345	406588	1272	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
0	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

(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
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(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	72234645
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	131984259

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	72468410
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c Additions: (1) Contributions deposited during the year	7c(1)	703469	
(2) Dividends and credits.....	7c(2)		
(3) Interest credited during the year.....	7c(3)	2417279	
(4) Transferred from separate account.....	7c(4)	6226218	
(5) Other (specify below)	7c(5)	460934	

▶ MISCELLANEOUS CREDITS, INCLUDING INVESTMENT GAINS AND TRANSFERS FROM FULLY ALLOCATED CONTRACTS

(6) Total additions	7c(6)	9807900
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d Total of balance and additions (add lines 7b and 7c(6))	7d	82276310
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	4148086	
(2) Administration charge made by carrier.....	7e(2)	138555	
(3) Transferred to separate account.....	7e(3)	5743694	
(4) Other (specify below)	7e(4)	11330	

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

(5) Total deductions	7e(5)	10041665
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	72234645
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Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	
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 BARD COLLEGE/SIMONS ROCK 403(B) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BARD COLLEGE	D Employer Identification Number (EIN) 14-1713034	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
TIAA
13-1624203
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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

TIAA

13-1624203

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 17 27 28 38 50 52 54 64 66	NONE	308881	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

RESOURCES INVESTMENT ADVISORS, INC

43-1451524

(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?
28 50	NONE	65209	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SCHULTE ROTH & ZABEL LLP

13-2633996

(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?
29 50	NONE	34169	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

BST & CO. CPA'S LLP

14-1442607

(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?
10 50	NONE	27502	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan BARD COLLEGE/SIMONS ROCK 403(B) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 BARD COLLEGE	D Employer Identification Number (EIN) 14-1713034	

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)	285503	294739
(2) Participant contributions.....	1b(2)	184751	184516
(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)	444909	516410
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	9171741	10244831
(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)	224540180	261163859
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	72468410	72234645
(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	307095494 344639000
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	
i	Acquisition indebtedness.....	1i	
j	Other liabilities.....	1j	
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	0 0
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	307095494 344639000

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)	7879522
	(B) Participants	2a(1)(B)	5354112
	(C) Others (including rollovers).....	2a(1)(C)	410362
(2)	Noncash contributions.....	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	13643996
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)	26810
	(F) Other	2b(1)(F)	2417279
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	2444089
(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)	10944900
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	10944900
(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)		1589766
(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)		24092403
c Other income.....	2c		448837
d Total income. Add all income amounts in column (b) and enter total.....	2d		53163991
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	14724397	
(2) To insurance carriers for the provision of benefits.....	2e(2)	456876	
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		15181273
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		4616
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)	27502	
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)	99378	
(4) Other.....	2i(4)	308972	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		435852
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		15621741
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		37542250
l Transfers of assets:			
(1) To this plan.....	2l(1)		1256
(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: **BST & CO. CPAS, LLP**

(2) EIN: **14-1442607**

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

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			
5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... ☐ Yes ☒ No If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.			
5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)			
5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)	
5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.			

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan BARD COLLEGE/SIMONS ROCK 403(B) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BARD COLLEGE	D Employer Identification Number (EIN) 14-1713034

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 82-2826183		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
----------------	---

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	☐ 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 _____

**Bard College/Simon's Rock
403(b) Plan**

Financial Statements

December 31, 2021 and 2020

Bard College/Simon's Rock 403(b) Plan

Financial Statements

December 31, 2021 and 2020

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Independent Auditor's Report

Board of Trustees
Bard College/Simon's Rock 403(b) Plan
Annandale-on-Hudson, New York

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

We were engaged to perform an audit of the financial statements of the Bard College/Simon's Rock 403(b) Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements (2021 financial statements).

Management, having determined it is permissible in the circumstances, has elected to have the audit of the Plan's 2021 financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2021 stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Disclaimer of Opinion on the 2021 Financial Statements

We do not express an opinion on the accompanying 2021 financial statements of the Plan. Because of the significance of the matters described in the Basis for Disclaimer of Opinion on the 2021 Financial Statements section of our report, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the financial statements.

Basis for Disclaimer of Opinion on the 2021 Financial Statements

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

Further, as described in Note 7 to the financial statements, the Plan has excluded from investments in the accompanying statement of net assets available for benefits certain annuity contracts and custodial accounts issued to current and former employees prior to January 1, 2009, as permitted by the DOL's Field Assistance Bulletin No. 2009-02, Annual Reporting Requirements for 403(b) Plans. The investment income and distributions related to such accounts have also been excluded in the accompanying statements of changes in net assets available for benefits. The amount of these excluded annuity contracts and custodial accounts and the related income and distributions are not reasonably determinable. Accounting principles generally accepted in the United States of America (U.S. GAAP) require that these accounts and the related income and distributions be included in the accompanying financial statements.

Responsibilities of Management for the 2021 Financial Statements

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

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

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

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

Our responsibility is to conduct an audit of the Plan's financial statements in accordance with auditing standards generally accepted in the United States of America and to issue an auditor's report. However, because of the matters described in the Basis for Disclaimer of Opinion on the 2021 Financial Statements section of our report, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on these financial statements.

We are required to be independent of the Plan, and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit.

Other Matters

2021 Supplemental Schedule Required by ERISA

The supplemental schedule of assets (held at end of year) as of December 31, 2021, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. Because of the significance of the matters described in the Basis for Disclaimer of Opinion on the 2021 Financial Statements section of our report, it is inappropriate to, and we do not express an opinion on this supplemental schedule.

Auditor's Report on the 2020 Financial Statements

We were engaged to audit the 2020 financial statements of the Plan. As permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information certified by a qualified institution. Further, the Plan has not maintained sufficient accounting records and supporting documents relating to certain annuity contracts and custodial accounts issued to current and former employees prior to January 1, 2009. Accordingly, we were unable to apply auditing procedures sufficient to determine the extent to which the accompanying financial statements may have been affected by these conditions.



Other Matters - Continued

Auditor's Report on the 2020 Financial Statements - Continued

The Plan has excluded from the 2020 financial statements certain annuity contracts and custodial accounts issued to current and former employees prior to January 1, 2009, as permitted by the DOL's Field Assistance Bulletin No. 2009-02, Annual Reporting Requirements for 403(b) Plans. The investment income and distributions related to such accounts have also been excluded from the 2020 financial statements. The amount of these excluded annuity contracts and custodial accounts and the related income and distributions are not determinable. U.S. GAAP require that these accounts and the related income and distributions be included in the 2020 financial statements.

In our report dated October 13, 2021, we indicated that because of the significance of the information that we did not audit, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and accordingly, we did not express an opinion on the 2020 financial statements.

BST+Co.CPAs, LLP

Albany, New York
October 11, 2022



Bard College/Simon's Rock 403(b) Plan

Statements of Net Assets Available for Benefits

	December 31,	
	2021	2020
ASSETS		
Investments, at fair value	\$ 333,663,239	\$ 295,939,976
Fully benefit-responsive investment contract, at contract value	9,980,096	10,240,355
	<u>343,643,335</u>	<u>306,180,331</u>
Receivables		
Participant notes	516,410	444,909
Participant contributions	184,516	184,751
Employer contributions	294,739	285,503
	<u>995,665</u>	<u>915,163</u>
TOTAL NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 344,639,000</u>	<u>\$ 307,095,494</u>

Bard College/Simon's Rock 403(b) Plan

Statements of Changes in Net Assets Available for Benefits

	Years Ended December 31,	
	2021	2020
ADDITIONS		
Investment income		
Interest and dividends	\$ 11,219,319	\$ 6,460,414
Net appreciation in fair value of investments	27,825,029	28,686,115
	<u>39,044,348</u>	<u>35,146,529</u>
Interest on participant notes receivable	<u>26,810</u>	<u>20,986</u>
Other income		
Plan servicing credit	<u>448,837</u>	<u>339,926</u>
Contributions		
Participants	5,354,112	5,012,354
Employer	7,879,522	7,795,828
Rollovers	410,362	1,582,304
	<u>13,643,996</u>	<u>14,390,486</u>
Total additions	<u>53,163,991</u>	<u>49,897,927</u>
DEDUCTIONS		
Benefits paid	15,185,889	11,108,184
Administrative expenses	435,852	417,713
Total deductions	<u>15,621,741</u>	<u>11,525,897</u>
Net increase in net assets available for benefits prior to transfers	37,542,250	38,372,030
Transfer from Bard College Tax Deferred Annuity Plan	<u>1,256</u>	<u>1,290</u>
Net increase in net assets available for benefits	37,543,506	38,373,320
NET ASSETS AVAILABLE FOR BENEFITS, <i>beginning of year</i>	<u>307,095,494</u>	<u>268,722,174</u>
NET ASSETS AVAILABLE FOR BENEFITS, <i>end of year</i>	<u>\$ 344,639,000</u>	<u>\$ 307,095,494</u>

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 1 - Description of the Plan

The Bard College/Simon's Rock 403(b) Plan (Plan) was established on January 1, 1941. The Plan is sponsored by Bard College (College) and Bard College at Simon's Rock (Simon's Rock).

The following description of the Plan is provided for general information purposes only. Participants should refer to the Plan agreement for a more comprehensive description of the Plan's provisions.

a. General

The Plan is a defined contribution plan covering all eligible employees of the College and Simon's Rock. Effective January 1, 2009, the Plan was amended and restated to meet the provisions of the Employee Retirement Security Act of 1974 (ERISA). Prior to January 1, 2009, the Plan functioned and operated as a non-ERISA Plan. All assets of the Plan prior to January 1, 2009 do not meet the ERISA requirements for annual reporting purposes and are not reported in these financial statements.

The Plan assets are held by Teachers Insurance and Annuity Association of America (TIAA) and College Retirement Equities Fund (CREF), Custodian of the Plan. The College's and Simon's Rock's contributions, participant elective deferrals, and participant accounts are also held by the Custodian, who invests cash received and income from investments based on written instructions from the College, Simon's Rock and participants, and makes distributions to participants. The Plan trustees are responsible for oversight of the Plan and for determining the appropriateness of the Plan's investment offerings and monitoring investment performance.

The Plan includes provisions by personnel category and/or by participating employer.

b. Contributions

Participants may contribute a percentage of their pre-tax annual compensation (except under the provisions for Bard College Administration), subject to certain limitations as defined by the Plan and the Internal Revenue Code (IRC). The maximum participant deferral was \$19,500 for both years ended December 31, 2021 and 2020. Additional provisions, by respective personnel category and/or participating employer, are as follows:

Provisions for Bard College Faculty

In addition to pre-tax deferrals, participants may contribute after-tax Roth contributions to the Plan. Participants may also contribute rollover amounts representing distributions from other qualified plans.

Each year, the College may make discretionary matching contributions to qualifying participants equal to 12.5% of eligible compensation if the employee contributes 2.5% of their base compensation.

Provisions for Bard College Administration

Participant deferrals are not allowed, other than rollover amounts representing distributions from other qualified plans.

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 1 - Description of the Plan

b. Contributions - Continued

Provisions for Bard College Administration - Continued

The College may make a discretionary employer contribution each year equal to 10% of eligible compensation to qualifying participants.

Additional Provisions for Bard College Faculty and Administration

Upon hire, all eligible Administration employees are automatically enrolled to contribute 2.5% of their compensation each payroll period, subject to automatic deferral percentage increases of .5% occurring annually on July 1st, up to maximum of 5% of compensation.

In addition to pre-tax deferrals, participants may contribute after-tax Roth contributions to the Plan. Participants age 50 and over are also eligible to make catch-up contributions. Participants may also contribute rollover amounts representing distributions from other qualified plans.

Provisions for Simon's Rock Employees

Upon hire, all eligible Simon's Rock employees are automatically enrolled to contribute 2.5% of their compensation each payroll period, subject to automatic deferral percentage increases of .5% occurring annually on July 1st, up to maximum of 5% of compensation.

Participants age 50 and over are also eligible to make catch-up contributions. Participants may also contribute rollover amounts representing distributions from other qualified plans.

Simon's Rock may make a discretionary employer contribution to eligible participants equal to 10% of the participants' eligible compensation, which is determined annually by Simon's Rock's Board of Trustees.

c. Plan Eligibility

Provisions for Bard College Faculty

An employee of the College becomes eligible to participate in the Plan with respect to employee elective deferrals upon the first day of any month following commencement of employment. An employee becomes eligible for an employer contribution after completion of one year of service in which the employee worked at least 1,000 hours and attaining the age of twenty-one. Nonresident aliens and student workers are not eligible to participate in the Plan. Employees who are hired with the expectation to work fewer than 1,000 hours per year are not eligible to participate in the Plan with respect to the employer contributions.

Provisions for Bard College Administration

An employee of the College becomes eligible for an employer contribution from the College after completion of two years of service in which the employee worked at least 1,000 hours during each of those years and attaining the age of twenty-one. Nonresident aliens, employees covered by a collective bargaining agreement, and student workers are not eligible to receive employer contributions except for certain employees who are covered under the Environmental Services Bargaining Agreement. Employees who are hired with the expectation to work fewer than 1,000 hours per year are not eligible to participate in the Plan.

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 1 - Description of the Plan - Continued

c. Plan Eligibility - Continued

Additional Provisions for Bard College Faculty and Administration

An employee of the College becomes eligible to participate in the tax deferred annuity provisions of the Plan the first day of the month following commencement of employment. There is no age requirement. Nonresident aliens and student workers are not eligible to participate in the Plan.

Provisions for Simon's Rock Employees

Employees of Simon's Rock are eligible to participate in the Plan with respect to employee deferrals immediately upon hire. An employee becomes eligible for an employer contribution after attaining the age of twenty-one and completion of two years of service in which the employee worked at least 1,000 hours during each year. Student workers, nonresident aliens, visiting faculty, and employees who ordinarily work less than 20 hours per week are not eligible for the Plan. For purposes of determining eligibility, service with other institutions of higher education is considered.

d. Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of: (a) the College's and Simon's Rock's discretionary contributions, if any, and (b) Plan earnings (losses); and charged with an allocation of administrative expenses, if any, that are incurred by the Plan. 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 vested account.

e. Vesting

Provisions for Bard College Faculty

Participants are immediately vested in their voluntary contributions, the College's discretionary matching contributions, and accumulated earnings thereon.

Provisions for Bard College Administration

Participants are immediately vested in the College's discretionary employer contributions and accumulated earnings thereon.

Additional Provisions for Bard College Faculty and Administration

Participants are immediately vested in their voluntary contributions under the tax deferred annuity provisions of the Plan and accumulated earnings thereon.

Provisions for Simon's Rock Employees

Participants are immediately vested in their voluntary contributions, Simon's Rock's discretionary contributions, and accumulated earnings thereon.

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 1 - Description of the Plan - Continued

f. Plan Loans and Participant Notes Receivable

Plan loans are allowed under the tax deferred annuity provisions of the Plan for Bard College Faculty and Administration, as well as the provisions for Simon's Rock employees.

Prior to October 2018, plan loans were issued directly from TIAA-CREF, the Custodian of the Plan, and not directly from a participant's account ("Plan Loans"). As such, Plan Loans are not part of Plan assets. Plan Loans are secured by a portion of the participant's account which is held as collateral to cover 110% of the outstanding loan in case of default. Participants could borrow a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000, or 50% of their vested account balance, subject to annuity contracts and Plan provisions. The interest rates for Plan Loans are variable, and the initial rate is determined by the terms of the controlling contract. Principal and interest for Plan Loans are paid directly to TIAA-CREF through regular payroll deductions. Plan Loans directly with TIAA-CREF of \$83,629 and \$187,437 were outstanding as of December 31, 2021 and 2020, respectively.

Investments underlying defaulted loan balances are reflected in the statements of net assets available for benefits until a distribution event occurs.

Beginning in October 2018, loans are issued directly from participants' accounts (participant notes receivable) and are reflected in the accompany statement of net assets available for benefits. Participants may borrow a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000, or 50% of their vested account balance. In addition, the \$50,000 limit is reduced by the highest outstanding loan balance (of any previous loans made) in the previous twelve months. The loans bear interest at a rate commensurate with local prevailing rates. In general, principal and interest are paid ratably over a period not to exceed five years through regular payroll deductions.

In March 2020, the Coronavirus Aid Relief, and Economic Security Act (CARES Act) was enacted to provide emergency assistance and health care response for individuals, families and businesses affected. The CARES Act provided various forms of optional relief to the College, Simon's Rock, and participants of retirement plans. Under the relief provisions of the CARES Act, plan sponsors could allow qualified individuals (as defined in the CARES Act) to take loans up to the lesser of \$100,000 or 100% of their vested account balance between March 27, 2020 and September 22, 2020. In addition, for loans outstanding as of March 27, 2020, plan sponsors could allow qualified individuals to delay loan repayments due between March 27, 2020 and December 31, 2020 for up to one year.

g. Payment of Benefits

On termination of service, retirement, death, or total permanent disability, a participant (or beneficiary) may elect to receive a lump sum distribution, partial distribution, annuity payments, or installment payments in the amount equal to the value of the participant's vested interest in his or her account or elect to rollover funds into an IRA or other retirement account. If a participant's account balance is \$5,000 or less, their account will be paid as a lump sum distribution as soon as possible following termination, retirement, disability, or to the beneficiary following death.

Under the relief provisions of the CARES Act, Plan sponsors could allow participants to take up to a \$100,000 distribution from a qualified retirement plan through December 31, 2020, if the participant met certain requirements as defined in the CARES Act.

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 1 - Description of the Plan - Continued

g. Payment of Benefits - Continued

Additional provisions, by respective personnel category and/or participating employer, are as follows:

Provisions for Bard College Faculty and Bard College Administration

Participants are allowed in-service distributions upon attaining age 65 or in the event that the participant becomes disabled.

Additional Provisions for Bard College Faculty and Administration and Simon's Rock Employees

Prior to termination, participants under the tax deferred annuity provisions of the Plan and Simon's Rock employees are allowed hardship distributions, subject to the provisions of the plan, and in-service distributions of their elective account balances upon attaining age 59½, subject to provisions of the Plan.

h. TIAA Traditional Annuity

The Plan entered into an investment contract with TIAA. The TIAA Traditional Annuity is a guaranteed fixed annuity contract available as an investment option to Plan participants. Each contract is fully and unconditionally guaranteed by TIAA. The Traditional Annuity is offered through a variety of contract types, including Retirement Annuities (RA) and Retirement Choice Plus Annuities (RC). The type of contract through which a participant invests in the TIAA Traditional Annuity determines the applicability of certain account features, such as guaranteed minimum interest rate, additional interest declarations, the degree of liquidity of the participant's account, and the options for receiving income upon retirement. When participants choose to allocate a portion of their retirement savings to the TIAA Traditional Annuity during the accumulation phase of the contract, their contributions purchase a specific amount of lifetime income based on the contractual rate schedule in effect at the time the premium is paid.

During the accumulation phase, the TIAA Traditional Annuity provides a guarantee of principal, a guaranteed minimum rate of interest of 1% for RC and 3% for RA, and the potential for additional interest, if declared by TIAA. All guarantees are subject to TIAA's claims paying ability. These additional amounts, when declared, remain in effect for the twelve-month "declaration year" that begins each March 1 for accumulating annuities, and January 1 for lifetime-payout annuities; they are not guaranteed for future years. Together, the minimum and additional amounts make up the crediting interest rate.

The TIAA Traditional Annuity – Non-Benefit-Responsive is reported at contract value. The contract value of the TIAA Traditional Annuity equals the accumulated cash contributions, interest credited to the Plan's contracts, and transfers, if any, less any withdrawals and transfers, if any. The TIAA Traditional Annuity is not available for sale or transfer on any securities exchange. Accordingly, transactions in similar investment instruments are not observable. While transactions involving the purchases/sales of individual TIAA Traditional contracts are not observable in a public marketplace, contract value approximates fair value.

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 1 - Description of the Plan - Continued

h. TIAA Traditional Annuity - Continued

TIAA issues various types of contracts as funding vehicles for retirement plans. Certain contract types contain liquidity restrictions on the redemption of TIAA Traditional Annuity accumulations, which could impact the value realized upon exiting the contract. If the TIAA Traditional Annuity balance exceeds \$2,000, withdrawals and transfers out must be spread out in ten annual installments for the RA contract. The RA contract provides for a 2.5% withdrawal fee if a participant separates from service and elects to withdraw accumulations within 120 days of separation. The impact of such an occurrence on the value of a plan's investment in TIAA Traditional Annuities would be minimal.

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (1) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan); (2) changes to the Plan's prohibition on competing investment options or deletion of equity provisions; (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan; or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under the Employee Retirement Income Security Act of 1974 (ERISA). The Plan administrator does not believe that the occurrence of any such value event, which would limit the Plan's ability to transact at contract value with participants, is probable. The guaranteed fixed annuity contract does not permit TIAA to terminate the agreement prior to the scheduled maturity date.

The Plan entered into an additional investment contract with TIAA. The TIAA Stable Value Fund is a fixed rate group annuity contract. Contributions are deposited into a non-unitized separate account. The contract provides a guaranteed minimum rate of interest of between 1% and 3%, before deductions for contract fees with the potential for crediting of additional interest above the guaranteed minimum. Although the liability to provide contract guarantees and accumulations is backed by the assets in a separate account, any amount to be credited above the minimum guaranteed rate is determined by TIAA. Additional amounts of interest are not guaranteed for periods other than the periods for which they are declared. Contract holders and Plan participants do not participate in, and do not receive the earnings of, the assets in the separate account.

The TIAA Stable Value Fund is reported at contract value. The contract value of the TIAA Stable Value Fund equals the accumulated cash contributions, interest credited to the Plan's contracts and transfers, if any, less any withdrawals and transfers, if any. The TIAA Stable Value Fund is not available for sale or transfer on any securities exchange. Accordingly, transactions in similar investment instruments are not observable. While transactions involving the purchases/sales of individual TIAA Stable Value Fund contracts are not observable in a public marketplace, contract value approximates fair value.

Direct transfers to competing funds in a plan's investment line-up are prohibited (industry standard "equity wash"). Transfers may be made to a competing fund following a 90-day waiting period after being transferred to a noncompeting fund. In addition, transfers into the TIAA Stable Value Fund may not be made for 30 days following a transfer out.

If the Plan terminates its investment in the TIAA Stable Value Fund contract it could take up to two years to be paid the contract value of the investment. If the two-year payout applies, a discontinuance fee will be assessed which could reduce the interest credited during the two-year period by, at most, seventy-five basis points.

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 1 - Description of the Plan - Continued

h. TIAA Traditional Annuity - Continued

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (1) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan); (2) changes to the Plan's prohibition on competing investment options or deletion of equity provisions; (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan; or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under the Employee Retirement Income Security Act of 1974 (ERISA). The Plan administrator does not believe that the occurrence of any such value event, which would limit the Plan's ability to transact at contract value with participants, is probable. The guaranteed fixed annuity group contract does not permit TIAA to terminate the agreement prior to the scheduled maturity date.

Note 2 - Summary of Significant Accounting Policies

a. Basis of Accounting

The accompanying financial statements have been prepared in conformity with accounting principles generally accepted in the United States of America (U.S. GAAP) for defined contribution plans.

b. 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, liabilities, and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

c. Investment Valuation and Income Recognition

Investments are reported at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Fair value is defined as the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date. The Plan trustees determine the Plan's valuation policies utilizing information provided by the investment advisers, custodian, and insurance company.

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

d. Participant Notes Receivable

Notes receivable from participants are stated at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2021 or 2020. If a participant ceases to make loan repayments, the loan is deemed to be in default. Defaulted loan balances are taxable income to the participant in the year of default. Defaulted loans remain Plan assets until the loan is repaid or the participant has a distributable event. Loans treated as distributions totaled approximately \$39,900 and \$15,100 during the years ended December 31, 2021 and 2020, respectively.

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 2 - Summary of Significant Accounting Policies - Continued

e. Payment of Benefits

Benefits are recorded when paid.

f. Administrative Expenses

Investment related expenses are included in net appreciation of fair value of investments.

The Plan has a plan servicing credit account which is credited quarterly based on investment performance. Administrative plan expenses of approximately \$126,880 and \$177,145 for the years ended December 31, 2021 and 2020, respectively, were paid from the plan servicing credit account. There were no amounts allocated to participants from the plan servicing credit account for the year ended December 31, 2021. The account allocated \$125,788 to participants for the year ended December 31, 2020. Certain administrative expenses of the Plan may be paid directly by the College and Simon's Rock.

g. Subsequent Events

The Plan evaluated subsequent events for potential recognition and disclosure through October 11, 2022, the date the financial statements were available to be issued.

Note 3 - Information Certified and Provided by Plan Custodian (Unaudited)

Certain information related to investments and participant notes disclosed in the accompanying financial statements and ERISA-required supplemental schedule, including investments and notes receivable from participants held at December 31, 2021 and 2020, and net appreciation in fair value of investments, interest and dividends, and interest on participant notes receivable for the years ended December 31, 2021 and 2020, was obtained by management and agreed to or derived from information certified as complete and accurate by the Custodian of the Plan.

Note 4 - Fully Benefit-Responsive Investment Contract at Contract Value

The Plan has entered into a fixed annuity contract with TIAA (also see Note 1h). Contributions to the contract are used to purchase a contractual or guaranteed amount of future benefits for the participant that is fully and unconditionally guaranteed by the general assets of TIAA.

The contract meets the fully-benefit responsive criteria and, therefore, is reported at contract value. The contract value of the TIAA Traditional Annuity equals the accumulated cash contributions and interest credited to the Plan's contracts, less withdrawals and adjusted for transfers, if any. The RA contract is not available for sale or transfer on any securities exchange. Accordingly, transactions in similar investment instruments are not observable.

The Plan's ability to receive amounts due is dependent on the issuer's ability to meet its financial obligations. The issuer's ability to meet its financial obligations may be affected by future economic and regulatory developments. The Plan has provided no reserves against such contract value for credit risk of the contract issuer.

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 5 - Investments and Fair Value Measurements

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

The following three levels of inputs may be used to measure fair value:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets in active markets that the Plan has the ability to access.

Level 2 - Inputs to the valuation methodology include:

- Quoted prices for similar assets in active markets;
- Quoted prices for identical or similar assets in inactive markets;
- Inputs other than quoted prices that are observable for the asset;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset.

Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

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

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

TIAA Real Estate Fund: Valued at the market value of the underlying real estate holding or other real estate-related investments, which is published daily on NASDAQ. The fund is not traded on this exchange. Real estate holdings are valued principally using external appraisals. The Fund sometimes holds securities as well. These are generally priced using values obtained from independent pricing sources.

CREF Variable Annuity Accounts: Valued based on the daily unit value published on NASDAQ. The fund is not traded on this exchange. Variable annuity accounts are valued at the accumulation unit value by CREF using quoted market values or values obtained from independent pricing services of its underlying investments. If market quotations or values from independent pricing services are not readily available, CREF determines the fair value in good faith using procedures approved by independent pricing services.

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 5 - Investments and Fair Value Measurements - Continued

TIAA Stable Value Fund and TIAA Traditional Annuity - Non-Benefit-Responsive: Fixed annuity contracts are reported at contract value which approximates fair value. The contract value equals the accumulated cash contributions and interest credited to the contract, less any withdrawals and transfers. Liquidity restrictions apply to the contracts that could impact the value realized upon exiting the contract. Specifically, the RA Contract does not allow lump sum cash withdrawals, and transfers must be spread out in ten annual installments (five annual installments for withdrawals after termination of employment).

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

The following tables set forth, by level within the fair value hierarchy, the Plan's assets measured at fair value:

	December 31, 2021			
	Level 1	Level 2	Level 3	Total
Mutual Funds	\$ 139,846,239	\$ -	\$ -	\$ 139,846,239
TIAA Real Estate Fund	-	10,244,831	-	10,244,831
CREF Variable Annuity Accounts	121,317,620	-	-	121,317,620
TIAA Stable Value Fund	-	-	5,658,067	5,658,067
TIAA Traditional Annuity - Non-Benefit Responsive	-	-	56,596,482	56,596,482
Total investments	<u>\$ 261,163,859</u>	<u>\$ 10,244,831</u>	<u>\$ 62,254,549</u>	<u>\$ 333,663,239</u>

	December 31, 2020			
	Level 1	Level 2	Level 3	Total
Mutual Funds	\$ 114,838,001	\$ -	\$ -	\$ 114,838,001
TIAA Real Estate Fund	-	9,171,741	-	9,171,741
CREF Variable Annuity Accounts	109,702,178	-	-	109,702,178
TIAA Stable Value Fund	-	-	5,061,159	5,061,159
TIAA Traditional Annuity - Non-Benefit Responsive	-	-	57,166,897	57,166,897
Total investments	<u>\$ 224,540,179</u>	<u>\$ 9,171,741</u>	<u>\$ 62,228,056</u>	<u>\$ 295,939,976</u>

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 5 - Investments and Fair Value Measurements - Continued

The following table sets forth a summary of changes in fair value of the Plan's unobservable (Level 3) assets for the years ended December 31, 2021 and 2020:

	TIAA Traditional Annuity, Non-Benefit- Responsive	TIAA Stable Value Fund
January 1, 2020 balance, <i>beginning of year</i>	\$ 56,411,210	\$ 3,138,833
Contributions	344,437	1,486,917
Plan servicing credit	24,481	216,252
Interest income	517,679	1,985
Realized gain	693,462	24,310
Unrealized gain	1,059,618	80,693
Withdrawals	(404,644)	(17,705)
Distributions	(2,567,316)	(27,581)
Annuity settlement options	(158,624)	-
Fees	(3,967)	(183,457)
Transfers in	4,017,335	2,079,622
Transfers out	(2,766,774)	(1,738,710)
December 31, 2020 balance, <i>end of year</i>	57,166,897	5,061,159
Contributions	304,894	398,575
Plan servicing credit	-	448,837
Interest income	270,069	2,786
Realized gain	862,870	31,819
Unrealized gain	866,699	80,809
Withdrawals	(414,734)	(113,401)
Distributions	(2,344,404)	(179,456)
Annuity settlement options	(451,777)	-
Participant loans issued	-	(11,331)
Participant loan principal repayments	329	7,857
Fees	(3,561)	(134,994)
Transfers in	5,091,174	605,622
Transfers out	(4,751,974)	(540,215)
December 31, 2021 balance, <i>end of year</i>	<u>\$ 56,596,482</u>	<u>\$ 5,658,067</u>

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 5 - Investments and Fair Value Measurements - Continued

Quantitative Information about Significant Unobservable Inputs Used in Level 3 Fair Value Measurements

The following tables represent the Plan's Level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments, and the significant unobservable inputs and ranges of values for those inputs:

December 31, 2021				
Instrument	Fair Value	Principal Valuation Technique	Unobservable Inputs	Range of Significant Input Values
Fixed Rate Annuity Contract - TIAA Traditional Annuity	\$ 56,596,482	Discounted cash flow Theoretical transfer (exit value)	Risk-adjusted discount rate applied	Retirement Annuity Contract 3.00% - 3.80% Retirement Choice Contract 2.75% - 3.90%
Fixed Rate Group Annuity Contract - TIAA Stable Value	\$ 5,658,067	Discounted cash flow Theoretical transfer (exit value)	Risk-adjusted discount rate applied	1% - 3%

December 31, 2020				
Instrument	Fair Value	Principal Valuation Technique	Unobservable Inputs	Range of Significant Input Values
Fixed Rate Annuity Contract - TIAA Traditional Annuity	\$ 57,166,897	Discounted cash flow Theoretical transfer (exit value)	Risk-adjusted discount rate applied	Retirement Annuity Contract 3.00% - 4.45% Retirement Choice Contract 2.25% - 4.40%
Fixed Rate Group Annuity Contract - TIAA Stable Value	\$ 5,061,159	Discounted cash flow Theoretical transfer (exit value)	Risk-adjusted discount rate applied	1% - 3%

Note 6 - Related Party and Party-In-Interest Transactions

The College and Simon's Rock did not pay any Plan expenses in connection with the administration of the Plan for the years ended December 31, 2021 and 2020.

Certain administrative functions are performed by employees of the College and Simon's Rock who do not receive compensation for such functions.

Certain Plan investments are managed by TIAA-CREF, the Custodian of the Plan.

Note 7 - Orphan Contracts

The Department of Labor's Field Assistance Bulletin No. 2009-02, *Annual Reporting Requirements for 403(b) Plans* (as clarified by Field Assistance Bulletin No. 2010-01) allows a plan administrator of a 403(b) plan to exclude certain contracts and accounts (Orphan Contracts) from plan assets for purposes of ERISA's annual reporting and audit requirements under specified conditions.

Bard College/Simon's Rock 403(b) Plan

Notes to Financial Statements December 31, 2021 and 2020

Note 7 - Orphan Contracts - Continued

Accordingly, the Plan has excluded from investments in the accompanying statements of net assets available for benefits certain annuity and custodial accounts issued to current and former employees prior to January 1, 2009. The related investment income and distributions have also been excluded in the accompanying statements of changes in net assets available for benefits. These amounts relate to vendors other than TIAA-CREF to whom contributions were made prior to January 1, 2009. No contributions were made or allowed to vendors other than TIAA-CREF after January 1, 2009. The amount of these excluded annuity and custodial accounts and the related income and distributions has not been determined, but management estimates that they may be material to the financial statements. U.S. GAAP requires that these excluded annuity and custodial accounts and the related income and distributions be included in the accompanying financial statements.

Note 8 - Plan Termination

Although they have not expressed any intent to do so, the College and Simon's Rock have the right under the Plan to discontinue their contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event that the Plan terminates, the net assets of the Plan will be allocated as prescribed by ERISA and its related regulations.

Note 9 - Tax Status

The Plan has been designed to qualify under Section 403(b) of the IRC. The terms of the Plan have been prepared to conform with the sample language provided by the IRS in Revenue Procedure 2007-71. The Plan is required to operate in conformity with the IRC to maintain the tax-exempt status for plan participants under Section 403(b).

The Plan's management evaluates tax positions taken by the Plan and recognizes a tax liability or asset if an uncertain tax position was taken and it is more-likely-than-not that the tax position would not be sustained upon examination by taxing authorities. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

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. Market risks include global events which could impact the value of investments, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Bard College/Simon's Rock 403(b) Plan

Supplemental Schedule Required Under ERISA and Department of Labor Regulations Schedule H December 31, 2021

Line 4i - Schedule of Assets (Held at End of Year)

(a) Identity of Party	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost (1)	(e) Current Value
*	TIAA Traditional Annuity - Benefit Responsive	Fixed Rate Annuity Contract		\$ 9,980,096
*	TIAA Traditional Annuity - Non Benefit Responsive	Fixed Rate Annuity Contract		52,192,550
*	TIAA Traditional Annuity - Non Benefit Responsive	Fixed Rate Annuity Contract		4,403,932
*	TIAA Stable Value	Fixed Rate Group Annuity Contract		5,658,067
*	CREF Stock Fund	Variable Annuity		47,414,678
*	CREF Money Market	Variable Annuity		1,547,326
*	CREF Social Choice	Variable Annuity		13,555,246
*	CREF Bond Market	Variable Annuity		6,471,543
*	CREF Global Equities	Variable Annuity		16,911,708
*	CREF Growth	Variable Annuity		17,779,327
*	CREF Equity Index	Variable Annuity		14,098,680
*	CREF Inflation-Linked Bond	Variable Annuity		3,539,112
*	TIAA Real Estate Fund	Pooled Separate Account		10,244,831
*	TIAA Access Core Bond Plus T4	Mutual Fund		4,685
*	TIAA Access International Equity	Mutual Fund		50,234
*	TIAA Access Large Cap Growth	Mutual Fund		28,750
*	TIAA Access Lifecycle 2020	Mutual Fund		10,780
*	TIAA Access Lifecycle 2025	Mutual Fund		19,463
*	TIAA Access Lifecycle 2030	Mutual Fund		16,484
*	TIAA Access Lifecycle 2035	Mutual Fund		23,329
*	TIAA Access Lifecycle 2040	Mutual Fund		66,005
*	TIAA Access Lifecycle 2045	Mutual Fund		31,863
*	TIAA Access Lifecycle 2050	Mutual Fund		41,296
*	TIAA Access Mid-Cap Growth	Mutual Fund		30,551
*	TIAA Access Mid-Cap Value	Mutual Fund		18,482
*	TIAA Access Quant Sml Cp Eq T4	Mutual Fund		31,658
*	TIAA Access Real Estate Securities	Mutual Fund		6,440
*	TIAA Access Small-Cap BI Index	Mutual Fund		11,419
*	TIAA Access Social Choice	Mutual Fund		30,369
*	TIAA-CREF Lifecycle Rmt Inc-Rmt	Mutual Fund		121,567
*	TIAA-CREF Lifecycle 2010 Rmt	Mutual Fund		4,634,258
*	TIAA-CREF Lifecycle 2015 Rmt	Mutual Fund		5,159,337
*	TIAA-CREF Lifecycle 2020 Rmt	Mutual Fund		8,853,916
*	TIAA-CREF Lifecycle 2025 Rmt	Mutual Fund		12,061,960
*	TIAA-CREF Lifecycle 2030 Rmt	Mutual Fund		14,553,764
*	TIAA-CREF Lifecycle 2035 Rmt	Mutual Fund		7,951,563
*	TIAA-CREF Lifecycle 2040 Rmt	Mutual Fund		10,673,440
*	TIAA-CREF Lifecycle 2045 Rmt	Mutual Fund		10,179,630
*	TIAA-CREF Lifecycle 2050 Rmt	Mutual Fund		5,212,789
*	TIAA-CREF Lifecycle 2055 Rmt	Mutual Fund		2,090,783
*	TIAA-CREF Lifecycle 2060-Inst	Mutual Fund		710,024
*	TIAA-CREF Lifecycle 2060-Inst	Mutual Fund		23,911

See Independent Auditor's Report.

Bard College/Simon's Rock 403(b) Plan

Supplemental Schedule Required Under ERISA and Department of Labor Regulations Schedule H December 31, 2021

Line 4i - Schedule of Assets (Held at End of Year) - Continued

(a) Identity of Party	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost (1)	(e) Current Value
	T. Rowe Price Capital App Fd	Mutual Fund		1,724,194
	Vanguard Inst Idx Inst	Mutual Fund		9,573,101
	Vanguard Small Cap Index Adm	Mutual Fund		3,898,008
	Vanguard Ttl Bd Mkt Idx Adm	Mutual Fund		310,325
	Vanguard Mid -Cap Idx Adm	Mutual Fund		1,695,160
	Vanguard Developed Mkts Idx Adm	Mutual Fund		1,040,200
	Vanguard FTSE Social Index Adm	Mutual Fund		6,291,451
	Allspring Small Co Growth Inst	Mutual Fund		2,393,738
	BlackRock High Yield Bd Inst	Mutual Fund		1,348,738
	BlackRock Mid Cap Growth Eq K	Mutual Fund		1,426,969
	DFA Internat Sustain Core 1	Mutual Fund		200,429
	Domini Impact Bond Inst	Mutual Fund		138,815
	Invesco Developing Markets R6	Mutual Fund		1,943,631
	Western Assset Income Fund CI	Mutual Fund		652,880
	MFS Growth Fund Class R4	Mutual Fund		3,123,403
	MFS Global Equity Class R4	Mutual Fund		2,062,388
	JPMorgan US Research Enh Eq R6	Mutual Fund		624,112
	JPMorgan Equity Inc Fd Cla R6	Mutual Fund		4,512,489
	Metropolitan West Total Return Bond Fund	Mutual Fund		3,440,017
	MFS Mid Cap Value Class R6	Mutual Fund		3,502,002
	Vanguard REIT Idx Adm	Mutual Fund		2,389,504
	MFS Intl Diversification CI R6	Mutual Fund		4,905,935
				<u>343,643,335</u>
*	Participant notes receivable (2)	Inteest rates of 4.25% - 6.50% maturing at various dates through 2030		<u>516,410</u>
				<u>\$ 344,159,745</u>

(1) Cost information may be omitted with respect to participant or beneficiary directed transactions under an individual account plan.

(2) These notes are solely secured by the participant account balances in the Plan.

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

Plan Name	Bard College/Simons Rock 403(b) Plan
Plan Sponsor EIN	14-1713034
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	

Plan Name	Bard College/Simons Rock 403(b) Plan
Plan Sponsor EIN	14-1713034
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	