

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>07/01/2021</u> and ending <u>06/30/2022</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>401K RETIREMENT PLAN FOR SAINT PETER'S UNIVERSITY AND SAINT PETER'S PREPARATORY SCHOOL</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>002</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>06/01/1973</u></td> </tr> <tr> <td colspan="2">2b Employer Identification Number (EIN) <u>22-1508627</u></td> </tr> <tr> <td colspan="2">2c Plan Sponsor's telephone number <u>201-761-6366</u></td> </tr> <tr> <td colspan="2">2d Business code (see instructions) <u>611000</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>002</u>	1c Effective date of plan <u>06/01/1973</u>		2b Employer Identification Number (EIN) <u>22-1508627</u>		2c Plan Sponsor's telephone number <u>201-761-6366</u>		2d Business code (see instructions) <u>611000</u>	
1b Three-digit plan number (PN) ▶	<u>002</u>										
1c Effective date of plan <u>06/01/1973</u>											
2b Employer Identification Number (EIN) <u>22-1508627</u>											
2c Plan Sponsor's telephone number <u>201-761-6366</u>											
2d Business code (see instructions) <u>611000</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>SAINT PETER'S UNIVERSITY</u> <u>SAINT PETER'S UNIVERSITY</u> <u>2641 JOHN F KENNEDY BLVD</u> <u>JERSEY CITY, NJ 07306-5943</u>	<u>2641 JOHN F KENNEDY BLVD</u> <u>JERSEY CITY, NJ 07306-5943</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.	06/27/2023	PAUL CIRAULO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN	
5 Total number of participants at the beginning of the plan year		5	790
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)	417
a(2) Total number of active participants at the end of the plan year		6a(2)	401
b Retired or separated participants receiving benefits.....		6b	0
c Other retired or separated participants entitled to future benefits		6c	395
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	796
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	8
f Total. Add lines 6d and 6e		6f	804
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	779
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	1
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: 2E 2F 2G 2J 2K			
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 07/01/2021 and ending 06/30/2022		
A Name of plan 401K RETIREMENT PLAN FOR SAINT PETER'S UNIVERSITY AND SAINT PETER'S PREPARATORY SCHOOL	B Three-digit plan number (PN) ▶ 002	
C Plan sponsor's name as shown on line 2a of Form 5500 SAINT PETER'S UNIVERSITY	D Employer Identification Number (EIN) 22-1508627	

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	150454/386428	479	07/01/2021	06/30/2022

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	10305419
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	38472585

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	9883340
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c	Additions: (1) Contributions deposited during the year	7c(1)	303089	
	(2) Dividends and credits.....	7c(2)	0	
	(3) Interest credited during the year.....	7c(3)	354905	
	(4) Transferred from separate account.....	7c(4)	237374	
	(5) Other (specify below)	7c(5)		

(6) Total additions	7c(6)	895368
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d Total of balance and additions (add lines 7b and 7c(6))	7d	10778708
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e Deductions:			
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	205514	
(2) Administration charge made by carrier.....	7e(2)		
(3) Transferred to separate account.....	7e(3)	265669	
(4) Other (specify below)	7e(4)	2106	

▶ **CONTRACT ADMINISTRATOR FEES - TIAA**

(5) Total deductions	7e(5)	473289
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	10305419
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Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Part IV Provision of Information

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

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

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

For calendar plan year 2021 or fiscal plan year beginning 07/01/2021 and ending 06/30/2022		
A Name of plan 401K RETIREMENT PLAN FOR SAINT PETER'S UNIVERSITY AND SAINT PETER'S PREPARATORY SCHOOL	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 SAINT PETER'S UNIVERSITY	D Employer Identification Number (EIN) 22-1508627	

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
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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-TEACHERS INSURANCE AND ANNUITY

730 THIRD AVENUE
NEW YORK, NY 10017

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?
13	RECORD KEEPER	2394	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

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

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

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
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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
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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
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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
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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
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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
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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
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103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 07/01/2021 and ending 06/30/2022		
A Name of plan 401K RETIREMENT PLAN FOR SAINT PETER'S UNIVERSITY AND SAINT PETER'S PREPARATORY SCHOOL	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 SAINT PETER'S UNIVERSITY	D Employer Identification Number (EIN) 22-1508627	

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)	0	0
(2) Participant contributions.....	1b(2)	0	0
(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)	0	44088
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	2907079	3582717
(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)	45338873	38472585
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	9883340	10305419
(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	58129292 52404809
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	58129292 52404809

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)	1280102
	(B) Participants	2a(1)(B)	1887479
	(C) Others (including rollovers).....	2a(1)(C)	
(2)	Noncash contributions.....	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	3167581
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)	223
	(F) Other	2b(1)(F)	354905
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	355128
(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)	1057872
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	1057872
(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)		672530
(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)		-8491917
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		-3238806
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	2483432	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		2483432
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)	2106	
(3) Investment advisory and management fees.....	2i(3)	139	
(4) Other.....	2i(4)	0	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		2245
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		2485677
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		-5724483
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: BDO USA, LLP

(2) EIN: 13-5381590

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		1000000
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 07/01/2021 and ending 06/30/2022

A Name of plan <u>401K RETIREMENT PLAN FOR SAINT PETER'S UNIVERSITY AND SAINT PETER'S PREPARATORY SCHOOL</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SAINT PETER'S UNIVERSITY</u>	D Employer Identification Number (EIN) <u>22-1508627</u>

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	<u>0</u>
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): <u>13-1624203</u>		
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
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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
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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 _____

**Saint Peter's University
and St. Peter's Preparatory School
401(k) Retirement Plan**

**Financial Statements
and Supplemental Schedule
As of June 30, 2022 and 2021
and for the Year Ended June 30, 2022**

Saint Peter's University and St. Peter's Preparatory School
401(k) Retirement Plan

Financial Statements and Supplemental Schedule
As of June 30, 2022 and 2021 and for the Year Ended June 30, 2022

**Saint Peter's University and St. Peter's Preparatory School
401(k) Retirement Plan**

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Supplemental Schedule

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year) as of June 30, 2022	18-19
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Note: Other schedules required by Section 2520.103.10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA have been omitted because they are not applicable.



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Independent Auditor's Report

The Plan Administrator
Saint Peter's University and St. Peter's Preparatory School
401(k) Retirement Plan
Jersey City, New Jersey

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

We have performed audits of the financial statements of Saint Peter's University and St. Peter's Preparatory School 401(k) Retirement 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). The financial statements comprise the statements of net assets available for benefits as of June 30, 2022 and 2021, and the related statement of changes in net assets available for benefits for the year ended June 30, 2022, and the related notes to the financial statements.

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

Management has obtained a certification from a qualified institution as of June 30, 2022 and 2021, and for the year ended June 30, 2022, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

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



Basis for Opinion

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

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with 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 issued or available to be issued.

Management is responsible for maintaining a current Plan instrument, including all Plan amendments. Management is also responsible for 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 that may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

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



In performing an audit in accordance with GAAS, we:

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

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of GAAP.

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

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

Other Matter - Supplemental Schedule Required by ERISA

The supplemental schedule of Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year) as of June 30, 2022 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. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For



information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.
- The certified investment information in the supplemental schedule agrees to, or is derived from, in all material respects, the information prepared and certified by a qualified institution that management determined meet the requirements of ERISA Section 103(a)(3)(C).

BDO USA, LLP

June 26, 2023

**Saint Peter's University and St. Peter's Preparatory School
401(k) Retirement Plan**

Statements of Net Assets Available for Benefits

<i>June 30,</i>	2022	2021
Assets		
Investments, at fair value	\$ 52,360,721	\$ 58,129,292
Notes receivable from participants	44,088	-
Net Assets Available for Benefits	\$ 52,404,809	\$ 58,129,292

See accompanying notes to financial statements.

Saint Peter's University and St. Peter's Preparatory School
401(k) Retirement Plan

Statement of Changes in Net Assets Available for Benefits

Year ended June 30, 2022

(Reductions) Additions	
Investment (loss) income:	
Net depreciation in fair value of investments	\$ (7,464,482)
Interest and dividend income	1,057,872
Total Investment Loss	(6,406,610)
Contributions:	
Employer	1,280,102
Participant	1,887,479
Total Contributions	3,167,581
Interest income on notes receivable from participants	223
Total Reductions	(3,238,806)
Deductions	
Benefits paid to participants	2,483,432
Administrative expenses	2,245
Total Deductions	2,485,677
Net Decrease	(5,724,483)
Net Assets Available for Benefits, beginning of year	58,129,292
Net Assets Available for Benefits, end of year	\$ 52,404,809

See accompanying notes to financial statements.

Saint Peter's University and St. Peter's Preparatory School 401(k) Retirement Plan

Notes to Financial Statements

1. Description of the Plan

The following description of the Saint Peter's University (the University) and St. Peter's Preparatory School (the Prep) (collectively, the Organization) 401(k) Retirement Plan (the Plan) provides only general information. Participants should refer to the Plan document for a complete description of the Plan's provisions.

General

The Plan is a defined contribution 401(k) pension plan covering all eligible employees of the Organization and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan commenced on January 1, 2002 and was amended and restated July 1, 2012 and further amended effective July 1, 2017. The entire Plan document was amended and restated effective July 1, 2021.

Eligibility

The Plan covers all full-time employees of the Organization who have satisfied the Plan's eligibility requirements, as defined in the Plan document. An employee shall become a participant on the first day of the month coinciding with or next following the date on which the participant may become eligible. The following employees are not eligible to participate in the Plan:

- Individuals who became employees before December 1, 2000, and have not elected, in accordance with such procedures as may be established by the employer, to participate in the Plan.
- Adjunct professors employed by the University.

Contributions

Each year, participants may contribute a portion of their pre-tax annual compensation as defined by the Plan not to exceed the applicable Internal Revenue Service (IRS) limitations. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants are also entitled to make rollover contributions to the Plan.

The Plan document allowed for three employer contributions: (1) a mandatory 3% matching contribution of each participant's basic compensation, (2) a discretionary matching contribution, and (3) an additional discretionary contribution.

The University only makes employer matching contributions for its employees, which had been suspended from February 20, 2020 through July 1, 2021. Effective July 1, 2021, the University elected to resume making employer contributions to the participants. The Prep continued to make employer contributions.

The Prep elected to match 50% of participant contributions to the Plan up to 4% of the participant's basic compensation. The Prep also made a contribution of 3% of each participant's basic compensation.

Saint Peter's University and St. Peter's Preparatory School
401(k) Retirement Plan

Notes to Financial Statements

Participant Accounts

All of the Plan's investment options are fully participant directed. Upon enrollment in the Plan, a participant may direct the Organization and employee contributions into any of the Plan's investment options. Increases to the participant's account result from participant contributions, their pro-rata share of employer contributions, and any gain resulting from investment income or appreciation. Decreases result from withdrawals, investment losses, direct administrative expenses, and any forfeitures. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are vested immediately in their contributions plus actual earnings thereon. Vesting in the Organization's contribution portion of their account is based on years of continuous service. A participant is 100% vested after three years of credited service.

Forfeited Accounts

Under the provisions of the Plan, forfeited balances of terminated participants' non-vested accounts may be used to reduce future contributions by the Organization and pay administrative expenses. At June 30, 2022 and 2021, forfeited non-vested accounts totaled \$213,185 and \$168,004, respectively. These accounts will be used to reduce future employer contributions and pay administrative expenses. \$48,733 was forfeited by participants during 2022 and \$3,678 of the forfeiture balance was used to offset employer contributions during the year ended June 30, 2022.

Administrative Expenses

Certain expenses of maintaining the Plan are paid directly by the Plan, unless otherwise paid by the Organization. Expenses that are paid by the Organization are excluded from these financial statements. Investment-related expenses are included in net depreciation in fair value of investments.

Payment of Benefits

Upon termination of employment due to death or retirement, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in their account, or monthly, quarterly, semimonthly, annual installments, or various forms of single life and joint and survivor annuities. For termination of employment for other reasons, a participant may receive the value of the vested interest in their account as a lump-sum distribution.

Plan Loans

Loans are available to participants through Teachers Insurance and Annuity Association (TIAA), subject to certain limitations. Plan loans are issued directly from the funds owned by TIAA and loan proceeds are not removed from a participant's account balance. For all Plan loans, interest and principal is paid by the participant directly to TIAA. Plan loans are not considered investments of the Plan and therefore are not reported in the statements of net assets available for benefits. However, a portion of a participant's TIAA Traditional Annuity account balance is reserved, or held

Saint Peter's University and St. Peter's Preparatory School

401(k) Retirement Plan

Notes to Financial Statements

in collateral, to cover 110% of the outstanding loan amount for the period of time the loan is outstanding.

At June 30, 2022 and 2021, participants had outstanding Plan loan balances due to TIAA of \$325,567 and \$400,797, respectively. These loans were collateralized by TIAA traditional annuity account balances of \$358,124 and \$440,876 as of June 30, 2022 and 2021, respectively.

As of June 30, 2022, \$26,408 of loans were deemed to be in default. If a participant defaults on a loan, the loan will be treated as a benefit payment, and they will be taxed on the amount of the outstanding loan balance. Additionally, TIAA has the right to foreclose its security interest in the portion of participants' vested accounts under the Plan that they pledged as security for the loan.

The Plan has been amended to reflect a new loan policy, effective March 15, 2022, which will allow participants to take loans from Plan.

Notes Receivable from Participants

Participants may borrow from their account balance a maximum equal to the lesser of \$50,000 or 50% of the participant's vested account balance. The participant loans are secured by the balance in the participant's account and bear interest between 4.50% and 5.00% in 2022. Notes receivable must be fully repaid within five years, unless the note is for the purchase of a primary residence, in which case the note must be fully repaid within 10 years.

2. Summary of Accounting Policies

Basis of Accounting

The accompanying financial statements of the Plan have been prepared on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America (GAAP).

Use of Estimates

The preparation of financial statements in conformity with GAAP requires the Plan administrator to make estimates and assumptions that affect the reported amounts of net assets and changes in net assets and disclosure of contingent assets and liabilities at the date of the financial statements. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisor and custodian. See Note 4 for discussion of fair value measurements.

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

Saint Peter's University and St. Peter's Preparatory School

401(k) Retirement Plan

Notes to Financial Statements

Payment of Benefits

Benefits are recorded when paid.

3. Information Certified by the Trustee

The Plan administrator has elected the method of annual reporting compliance permitted by ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Teachers Insurance and Annuity Association - College Retirement Equities Fund (TIAA-CREF), a qualified institution, has certified that the following investment information included in the accompanying financial statements and ERISA-required supplemental schedule is complete and accurate:

- Investments and notes receivable from participants, reflected on the accompanying statements of net assets available for benefits as of June 30, 2022 and 2021.
- Net depreciation in fair value of investments, interest and dividend income, and income on notes receivable from participants, reflected on the accompanying statement of changes in net assets available for benefits for the year ended June 30, 2022.
- Investment information included in the Schedule of Assets (Held at End of Year) as of June 30, 2022, as shown on the ERISA-required supplemental schedule.

At the request of the Plan administrator, the Plan's independent auditors did not perform auditing procedures with respect to this certified investment information, except for comparing such certified investment information to the related investment information included in the financial statements and ERISA-required supplemental schedule.

4. 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 or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3).

The three levels of the fair value hierarchy under Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820 are described as follows:

Level 1 - This level consists of valuations that are based on unadjusted quoted prices in an active market for identical assets or liabilities that the Plan has the ability to access at the measurement date.

Level 2 - This level consists of valuations that are based on:

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

Saint Peter's University and St. Peter's Preparatory School

401(k) Retirement Plan

Notes to Financial Statements

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

Level 3 - This level consists of valuations that are based on inputs that are unobservable for the asset or liability and reflect management's best estimate of what market participants would use as fair value.

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2022 and 2021.

Registered Investment Companies - The investments in this category are comprised of registered investments, which are traded on the open market, with an annuity wrapper allowing participants to take distributions in the form of an annuity payment over a ten-year period. The funds are not traded on the open market, however, since the wrapper itself has no value. The value of the fund can be determined based on quoted prices of similar registered investments. As such, these investments have been classified as Level 2 in the fair value hierarchy.

Mutual Funds - Mutual funds are valued at the quoted market price of shares held by the Plan at year-end.

Guaranteed Annuity Contract - The Plan's fixed-rate annuity is primarily within the TIAA Traditional Annuity, with an investment through the Retirement Annuity (RA), a fixed-rate contract that is non-fully benefit-responsive. Observable prices for identical or similar investments do not exist. The contract value equals the accumulated cash contributions and interest credited to the Plan's contract, less any withdrawals and applicable fees, which approximates fair value, and it is classified as Level 3 on the valuation hierarchy. Investments in the TIAA Traditional Annuity earn a specific amount of lifetime income based on the contractual rate schedules in effect at the time the premium is paid. The crediting interest rate is calculated on a daily basis. For accumulating RA contract, the crediting interest rates were 5% as of June 30, 2022 and 3% as of June 30, 2021. The RA contract does not allow lump-sum cash withdrawals and transfers must be distributed over ten annual installments.

Money Market Fund - The money market fund is valued at the closing price reported by the fund sponsor from an actively traded exchange. This asset is managed to maintain a constant, though not guaranteed, value of \$1 per share.

Pooled Separate Accounts - The pooled accounts are valued at their accumulation unit value (AUV), which approximates fair value. The AUV is determined daily based on the net asset value (NAV) of shares of the underlying fund and the separate account charges.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair value. While Plan management 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.

Saint Peter's University and St. Peter's Preparatory School

401(k) Retirement Plan

Notes to Financial Statements

The categorization of an investment within the fair value hierarchy is based upon the pricing transparency of the investment and does not necessarily correspond to Plan management's perceived risk of that investment.

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

June 30, 2022

	Level 1	Level 2	Level 3	Total
Registered investment companies	\$ -	\$ 2,194,071	\$ -	\$ 2,194,071
Mutual funds	34,852,243	-	-	34,852,243
Guaranteed annuity contract	-	-	10,305,419	10,305,419
Money market fund	1,426,271	-	-	1,426,271
Total Investments , in the fair value hierarchy table	<u>\$ 36,278,514</u>	<u>\$ 2,194,071</u>	<u>\$ 10,305,419</u>	48,778,004
Investments, measured at NAV*: Pooled separate account				<u>3,582,717</u>
Total Investments , at fair value				<u>\$ 52,360,721</u>

June 30, 2021

	Level 1	Level 2	Level 3	Total
Registered investment companies	\$ -	\$ 2,673,887	\$ -	\$ 2,673,887
Mutual funds	41,328,927	-	-	41,328,927
Guaranteed annuity contract	-	-	9,883,340	9,883,340
Money market fund	1,336,059	-	-	1,336,059
Total Investments , in the fair value hierarchy table	<u>\$ 42,664,986</u>	<u>\$ 2,673,887</u>	<u>\$ 9,883,340</u>	55,222,213
Investments, measured at NAV*: Pooled separate account				<u>2,907,079</u>
Total Investments , at fair value				<u>\$ 58,129,292</u>

* In accordance with Subtopic 820-10, certain investments that were measured at NAV per share (or its equivalent) as a practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items present in the statements of net assets available for benefits.

The following table summarizes investments for which fair value is measured using the NAV per-share practical expedient as of June 30, 2022 and 2021, respectively. There are no participant redemption restrictions for this investment; the redemption notice period is applicable only to the Plan:

Year ended June 30,

	Investment Type	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
2022	Pooled separate account	\$ 3,582,717	None	Daily	None
2021	Pooled separate account	2,907,079	None	Daily	None

Saint Peter's University and St. Peter's Preparatory School

401(k) Retirement Plan

Notes to Financial Statements

The Plan had no financial assets that were measured at fair value on a nonrecurring basis during the years ended June 30, 2022 and 2021.

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 assets:

	TIAA Traditional Annuity*
Balance, June 30, 2020	\$ 9,087,321
Purchases and transfers in	630,966
Sales and transfers out	(173,466)
Earnings	338,519
Balance, June 30, 2021	9,883,340
Purchases and transfers in	540,463
Sales and transfers out	(473,289)
Earnings	354,905
Balance, June 30, 2022	\$ 10,305,419

* Includes Plan loan default fund balances.

5. Party-in-Interest Transactions

Plan investments include mutual funds, a guaranteed annuity contract, a money market fund, registered investment companies, and a pooled separate account managed by TIAA-CREF, and, therefore, these transactions qualify as party-in-interest. Purchases and sales of these funds are open-market transactions at fair market value. Such transactions are permitted under the provisions of the Plan and are exempt from the prohibition of party-in-interest transactions under ERISA and applicable exemptions promulgated thereunder. Notes receivable from participants also qualify as party-in-interest transactions.

6. Plan Termination

Although it has not expressed any intent to do so, the Organization has the right under the Plan to discontinue its contributions at any time and to terminate the Plan, subject to the provisions of ERISA. In the event of Plan termination, each participant will become 100% vested in their account balances and the net assets of the Plan will be distributed, as prescribed by ERISA.

7. Income Tax Status

The Internal Revenue Service (IRS) has determined and informed the Organization by a letter dated August 12, 2013 that the Plan and related trusts are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator believes that the Plan is designed in compliance with the applicable requirements of the IRC. Instances of non-compliance will be corrected by the Organization so that the Plan will maintain its qualified status.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions.

Saint Peter's University and St. Peter's Preparatory School

401(k) Retirement Plan

Notes to Financial Statements

In August 2020, the IRS commenced an examination of the Plan. The Organization has provided various documents as requested by the IRS. In a letter dated November 2021, the IRS informed the Plan that the examination was closed. There are currently no other audits in progress for any tax periods.

8. Risks and Uncertainties

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

9. Subsequent Events

The Plan's management has evaluated subsequent events through June 26, 2023, which is the date the financial statements were available to be issued. There were no subsequent events requiring adjustments to the financial statements or disclosures as stated herein.

Supplemental Schedule

Saint Peter's University and St. Peter's Preparatory School
401(k) Retirement Plan

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
EIN: 22-1508627 **Plan No.: 002**

June 30, 2022

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value	
Registered Investment Companies				
* TIAA	TIAA ACCESS EQUITY INDEX T4	**	\$	46,167
* TIAA	TIAA ACCESS MID CAP GR T4	**		40,346
* TIAA	TIAA ACCESS LG CAP GR T4	**		55,441
* TIAA	TIAA ACCESS GROWTH & INCOME T4	**		58,572
* TIAA	TIAA ACCESS QUANT SML CP EQ T4	**		63,197
* TIAA	TIAA ACCESS SOCIAL CH EQ T4	**		63,839
* TIAA	TIAA ACCESS MID CAP VAL T4	**		108,497
* TIAA	TIAA ACCESS LG CAP VAL T4	**		185,478
* TIAA	TIAA ACCESS REAL EST SECS T4	**		163,633
* TIAA	TIAA ACCESS SM CAP BL IDX T4	**		203,860
* TIAA	TIAA ACCESS INTL EQUITY T4	**		318,631
* TIAA	TIAA ACCESS LIFECYCLE 2010 T4	**		11,343
* TIAA	TIAA ACCESS LIFECYCLE 2015 T4	**		2,305
* TIAA	TIAA ACCESS LFCYLE RTMT INC T4	**		16,735
* TIAA	TIAA ACCESS LIFECYCLE 2060 T4	**		37,637
* TIAA	TIAA ACCESS LIFECYCLE 2035 T4	**		40,293
* TIAA	TIAA ACCESS LIFECYCLE 2030 T4	**		124,305
* TIAA	TIAA ACCESS LIFECYCLE 2020 T4	**		8,341
* TIAA	TIAA ACCESS LIFECYCLE 2045 T4	**		97,815
* TIAA	TIAA ACCESS LIFECYCLE 2025 T4	**		23,300
* TIAA	TIAA ACCESS LIFECYCLE 2055 T4	**		151,187
* TIAA	TIAA ACCESS LIFECYCLE 2040 T4	**		114,526
* TIAA	TIAA ACCESS CORE BOND PLUS T4	**		47,341
* TIAA	TIAA ACCESS LIFECYCLE 2050 T4	**		211,282
Total Registered Investment Companies				2,194,071
Guaranteed Annuity Contract				
* TIAA	TIAA TRADITIONAL ANNUITY	**		10,305,419
Money Market Fund				
* CREF	CREF MONEY MARKET	**		1,426,271
Pooled Separate Account				
* TIAA	TIAA REAL ESTATE	**		3,582,717

Saint Peter's University and St. Peter's Preparatory School
401(k) Retirement Plan

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
EIN: 22-1508627 **Plan No.: 002**

June 30, 2022

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value	
Mutual Funds				
* CREF	CREF INFLATION LINKED BOND R1	**	\$	255,732
* CREF	CREF INFLATION LINKED BOND R2	**		573,742
* TIAA-CREF	TIAA CREF MID - CAP VAL RTMT	**		345,553
* TIAA-CREF	TIAA CREF QT SML CAP EQ RTMT	**		575,546
* TIAA-CREF	TIAA CREF LG CAP VAL RTMT	**		806,210
* CREF	CREF EQUITY INDEX R1	**		835,191
* TIAA-CREF	TIAA CREF INTL EQ RTMT	**		822,753
* CREF	CREF GROWTH R1	**		1,353,887
* CREF	CREF GLOBAL EQUITIES R1	**		1,624,377
* CREF	CREF EQUITY INDEX R2	**		1,567,284
* CREF	CREF GLOBAL EQUITIES R2	**		2,691,077
* CREF	CREF GROWTH R2	**		2,055,246
* CREF	CREF STOCK R1	**		3,124,469
* CREF	CREF STOCK R2	**		6,630,694
* CREF	CREF SOCIAL CHOICE R1	**		241,947
* TIAA-CREF	TIAA CREF LIFECYCLE 2015 RTMT	**		200,254
* TIAA-CREF	TIAA CREF LIFECYCLE 2020 RTMT	**		667,899
* CREF	CREF SOCIAL CHOICE R2	**		717,701
* TIAA-CREF	TIAA CREF LIFECYCLE 2010 RTMT	**		687,961
* TIAA-CREF	TIAA CREF LIFECYCLE 2030 RTMT	**		824,854
* TIAA-CREF	TIAA CREF LIFECYCLE 2025 RTMT	**		1,286,162
* TIAA-CREF	TIAA CREF LIFECYCLE 2035 RTMT	**		1,553,210
* TIAA-CREF	TIAA CREF LIFECYCLE 2065 RTMT	**		159,901
* TIAA-CREF	TIAA CREF LIFECYCLE 2055 RTMT	**		38,031
* TIAA-CREF	TIAA CREF LIFECYCLE 2050 RTMT	**		3,061
* TIAA CREF	TIAA CREF LIFECYCLE 2045 RTMT	**		9,137
* TIAA-CREF	TIAA CREF LIFECYCLE 2040 RTMT	**		3,477,439
* TIAA-CREF	TIAA CREF LIFECYCLE 2060 RTMT	**		17,260
* VANGUARD	VANGUARD FEDERAL MONEY MARKET INV	**		2,684
* CREF	CREF CORE BOND R2	**		1,160,808
* CREF	CREF CORE BOND R1	**		425,419
* TIAA	TIAA CREF MID CAP GR RTMT	**		116,754
Total Mutual Funds				34,852,243
Total Investments, at fair value				52,360,721
* Participant Loans	Maturities ranging through May 2027, with interest rates ranging from 4.50% to 5.00%	-		44,088
				\$ 52,404,809

* A party-in-interest, as defined by ERISA.

** The cost of participant-directed investments is not required to be disclosed.

Multiple Employer Plan Participating Employer Information

401k Retirement Plan For Saint Peter's University and Saint Peter's Preparatory School

EIN: 22-1508627

Plan 002

Plan Year End 06/30/2022

School	EIN	Employee Contributions	Employer Contributions	Totals
Saint Peter's University	22-1508627	1,287,302	870,009	2,157,311
Saint Peter's Preparatory School	22-1527060	600,177	410,093	1,010,270
Totals		1,887,479	1,280,102	3,167,581



5500 Reportable - Schedule of Assets Held for Investment

Total Plan Assets Under Management

ST. PETER S PREPARATORY SCHOOL

For the Period Ending 06/30/2022

FUND ID	TICKER	INVESTMENT NAME	ENDING INVESTMENT PRICE	ENDING UNIT BALANCE	ENDING MARKET VALUE	ENDING COST VALUE
NBR	TIAA#	Insurance Company General Contract				
98	PLDF#	TIAA Traditional Non Benefit Responsive Plan Loan Default Fund			\$2,326,041.87 \$23,043.59	\$1,872,709.65 \$23,043.59
Subtotal Insurance Company General Contract					\$2,349,085.46	\$1,895,753.24
X1	QREARX	Pooled Separate Account				
		TIAA Real Estate	\$570.472700	2,039.2177	\$1,163,318.04	\$731,363.38
Subtotal Pooled Separate Account					\$1,163,318.04	\$731,363.38
Registered Investment Company						
X2	QCSTRX	CREF Stock R1	\$612.038100	5,105.0236	\$3,124,468.95	\$1,776,298.60
X3	QCMMRX	CREF Money Market R1	\$26.339800	17,723.0300	\$466,821.07	\$459,638.98
X4	QCSCRX	CREF Social Choice R1	\$285.344400	847.9134	\$241,947.35	\$161,144.97
X6	QCGLRX	CREF Global Equities R1	\$224.729700	7,228.1345	\$1,624,376.50	\$1,114,318.04
X7	QCGRRX	CREF Growth R1	\$273.341300	4,953.1009	\$1,353,887.04	\$688,997.88
X8	QCEQRX	CREF Equity Index R1	\$318.908000	2,618.9104	\$835,191.48	\$483,958.57
X9	QCILRX	CREF Inflation-Linked Bond R1	\$78.391900	3,262.2194	\$255,731.58	\$223,612.62
8Y	W436#	TIAA Access Core Bond Plus T4	\$38.111000	1,242.1990	\$47,341.45	\$48,571.70
8K	W422#	TIAA Access Equity Index T4	\$77.771000	593.6288	\$46,167.11	\$40,248.46
8B	W413#	TIAA Access Growth & Income T4	\$85.979900	681.2296	\$58,572.05	\$53,617.03
8A	W411#	TIAA Access Intl Equity T4	\$29.403200	10,836.6072	\$318,630.94	\$321,404.35
93	W451#	TIAA Access Lfcyle Rtmt Inc T4	\$43.812000	381.9746	\$16,735.07	\$15,019.67
8W	W434#	TIAA Access Lg-Cap Gr T4	\$97.604100	568.0210	\$55,441.18	\$51,873.15
8C	W414#	TIAA Access Lg-Cap Val T4	\$53.331600	3,477.8321	\$185,478.34	\$155,363.08
80	W438#	TIAA Access Lifecycle 2010 T4	\$45.823100	247.5381	\$11,342.96	\$11,800.58
81	W439#	TIAA Access Lifecycle 2015 T4	\$46.666500	49.3927	\$2,304.99	\$2,149.29
82	W440#	TIAA Access Lifecycle 2020 T4	\$47.503600	175.5867	\$8,341.00	\$6,763.00
83	W441#	TIAA Access Lifecycle 2025 T4	\$48.848700	476.9783	\$23,299.77	\$25,330.26



5500 Reportable - Schedule of Assets Held for Investment

Total Plan Assets Under Management

For the Period Ending 06/30/2022

FUND ID	TICKER	INVESTMENT NAME	ENDING INVESTMENT PRICE	ENDING UNIT BALANCE	ENDING MARKET VALUE	ENDING COST VALUE
84	W442#	TIAA Access Lifecycle 2030 T4	\$49.922200	2,489.9744	\$124,305.00	\$126,402.32
85	W443#	TIAA Access Lifecycle 2035 T4	\$51.783900	778.1048	\$40,293.30	\$38,721.82
86	W444#	TIAA Access Lifecycle 2040 T4	\$54.200500	2,112.9999	\$114,525.65	\$100,770.75
91	W449#	TIAA Access Lifecycle 2045 T4	\$53.545900	1,826.7453	\$97,814.73	\$90,614.80
92	W450#	TIAA Access Lifecycle 2050 T4	\$53.238900	3,968.5488	\$211,281.17	\$187,202.82
8E	W416#	TIAA Access Mid-Cap Gr T4	\$64.697500	623.6048	\$40,345.66	\$48,149.07
8F	W417#	TIAA Access Mid-Cap Val T4	\$55.745000	1,946.3162	\$108,497.40	\$91,728.86
8S	W430#	TIAA Access Real Est Secs T4	\$47.501300	3,444.8173	\$163,633.31	\$133,749.10
8Q	W428#	TIAA Access Sm-Cap Bl Idx T4	\$59.638800	3,418.2362	\$203,859.50	\$193,100.81
8G	W418#	TIAA Access Quant Sml Cp Eq T4	\$61.348900	1,030.1278	\$63,197.21	\$53,511.41
8D	W415#	TIAA Access Social Ch Eq T4	\$74.923300	852.0620	\$63,839.30	\$53,323.05
X5	QCBMRX	CREF Core Bond R1	\$124.307300	3,422.3144	\$425,418.65	\$403,335.91
AA	W463#	TIAA Access Lifecycle 2055 T4	\$53.588100	2,821.2817	\$151,187.13	\$142,501.83
AB	W464#	TIAA Access Lifecycle 2060 T4	\$37.769500	996.4888	\$37,636.89	\$37,355.20
Subtotal Registered Investment Company					\$10,521,913.73	\$7,340,577.98
TOTAL ASSETS UNDER MANAGEMENT					\$14,034,317.23	\$9,967,694.60



5500 Reportable - Schedule of Assets Held for Investment

Total Plan Assets Under Management

SAINT PETERS UNIVERSITY

For the Period Ending 06/30/2022

FUND ID	TICKER	INVESTMENT NAME	ENDING INVESTMENT PRICE	ENDING UNIT BALANCE	ENDING MARKET VALUE	ENDING COST VALUE
NBR 98	TIAA#	Insurance Company General Contract			\$7,952,968.22	\$6,390,932.69
	PLDF#	TIAA Traditional Non Benefit Responsive Plan Loan Default Fund			\$3,364.86	\$3,364.86
Subtotal Insurance Company General Contract					\$7,956,333.08	\$6,394,297.55
X1	QREARX	Pooled Separate Account TIAA Real Estate	\$570.472700	4,241.0429	\$2,419,399.20	\$1,442,326.57
Subtotal Pooled Separate Account					\$2,419,399.20	\$1,442,326.57
Registered Investment Company						
XB	TRERX	TIAA-CREF Intl Eq-Rtmt	\$11.460000	71,793.4911	\$822,753.41	\$833,863.55
XE	TRLCX	TIAA-CREF Lg-Cap Val-Rtmt	\$18.460000	43,673.3381	\$806,209.82	\$789,054.03
L1	TCLEX	TIAA-CREF Lifecycle 2010-Rtmt	\$12.170000	56,529.2913	\$687,961.48	\$748,669.93
L2	TCLIX	TIAA-CREF Lifecycle 2015-Rtmt	\$11.430000	17,519.9963	\$200,253.56	\$218,640.67
L3	TCLTX	TIAA-CREF Lifecycle 2020-Rtmt	\$12.120000	55,107.1529	\$667,898.70	\$710,473.32
L4	TCLFX	TIAA-CREF Lifecycle 2025-Rtmt	\$12.700000	101,272.6247	\$1,286,162.33	\$1,352,495.80
L5	TCLNX	TIAA-CREF Lifecycle 2030-Rtmt	\$13.120000	62,869.9479	\$824,853.72	\$853,146.40
L6	TCLRX	TIAA-CREF Lifecycle 2035-Rtmt	\$13.650000	113,788.2868	\$1,553,210.12	\$1,495,374.40
L7	TCLOX	TIAA-CREF Lifecycle 2040-Rtmt	\$14.070000	247,152.7268	\$3,477,438.87	\$3,546,450.73
L9	TFRX	TIAA-CREF Lifecycle 2045-Rtmt	\$11.500000	794.5504	\$9,137.32	\$11,212.56
LB	TLFRX	TIAA-CREF Lifecycle 2050-Rtmt	\$11.720000	261.2070	\$3,061.34	\$3,478.43
ZJ	TTRLX	TIAA-CREF Lifecycle 2055-Rtmt	\$13.860000	2,743.9252	\$38,030.80	\$47,764.18
XH	TRGMX	TIAA-CREF Mid-Cap Gr-Rtmt	\$15.090000	7,737.1872	\$116,754.16	\$193,967.34
XJ	TRVRX	TIAA-CREF Mid-Cap Val-Rtmt	\$16.110000	21,449.5855	\$345,552.83	\$412,731.04
XN	TRSEX	TIAA-CREF Qt Sml Cap Eq Rtmt	\$14.440000	39,857.7552	\$575,545.98	\$675,751.17
RY	VMFXX	Vanguard Federal Money Mkt Inv	\$1.000000	2,684.0800	\$2,684.08	\$2,684.08
AA	QCBMPX	CREF Core Bond R2	\$126.202500	9,197.9792	\$1,160,807.97	\$1,313,203.33
AB	QCGLPX	CREF Global Equities R2	\$228.153500	11,795.0292	\$2,691,077.19	\$2,880,010.18



5500 Reportable - Schedule of Assets Held for Investment

Total Plan Assets Under Management

For the Period Ending 06/30/2022

FUND ID	TICKER	INVESTMENT NAME	ENDING INVESTMENT PRICE	ENDING UNIT BALANCE	ENDING MARKET VALUE	ENDING COST VALUE
AC	QCILPX	CREF Inflation-Linked Bond R2	\$79.586800	7,209.0037	\$573,741.53	\$568,416.35
AD	QCSCPX	CREF Social Choice R2	\$289.692600	2,477.4581	\$717,701.28	\$753,451.79
AE	QCEQPX	CREF Equity Index R2	\$323.769900	4,840.7354	\$1,567,284.43	\$1,571,916.91
AF	QCGRPX	CREF Growth R2	\$277.510800	7,406.0043	\$2,055,246.19	\$2,391,492.39
AG	QCMMPX	CREF Money Market R2	\$26.620500	36,041.7742	\$959,450.05	\$958,897.18
AH	QCSTPX	CREF Stock R2	\$621.378600	10,670.9400	\$6,630,693.76	\$6,853,395.04
AI	TLXRX	TIAA-CREF Lifecycle 2060-Rtmt	\$11.840000	1,457.7350	\$17,259.58	\$21,168.21
AJ	TSFRX	TIAA-CREF Lifecycle 2065-Rtmt	\$9.840000	16,250.0535	\$159,900.53	\$197,643.26
Subtotal Registered Investment Company					\$27,950,671.03	\$29,405,352.27
90	LOAN#	Participant Loan Fund Participant Loan Fund			\$44,087.79	\$44,087.79
Subtotal Participant Loan Fund					\$44,087.79	\$44,087.79
TOTAL ASSETS UNDER MANAGEMENT					\$38,370,491.10	\$37,286,064.18