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

2022

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

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.)
- [X] 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:
- [X] 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
COLUMBIA UNIVERSITY VOLUNTARY RETIREMENT SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 009

1c Effective date of plan 07/01/2006

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)
TRUSTEES OF COLUMBIA UNIVERSITY

C/O RETIREMENT DEPARTMENT

615 WEST 131ST STREET
STUDEBAKER, 4TH FLOOR
NEW YORK, NY 10027-7922

2b Employer Identification Number (EIN)
13-5598093

2c Plan Sponsor's telephone number
212-851-7000

2d Business code (see instructions)
611000

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.	09/08/2023	DANIEL DRISCOLL
	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

3a Plan administrator's name and address ☐ Same as Plan Sponsor

COLUMBIA UNIVERSITY VICE PRESIDENT OF HUMAN RESOURCES

615 W 131ST ST.
NEW YORK, NY 10027-7922

3b Administrator's EIN: 13-2855235

3c Administrator's telephone number: 212-851-7000

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**	29221
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)**	16817
a(2) Total number of active participants at the end of the plan year	**6a(2)**	17517
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	12812
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	30329
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	121
f Total. Add lines **6d** and **6e**.	**6f**	30450
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	30299
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2M

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)

(1)	X	Insurance
(2)	☐	Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)	☐	General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)	X	Insurance
(2)	☐	Code section 412(e)(3) insurance contracts
(3)	X	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)	X	**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)	X		**H** (Financial Information)
(2)	☐		**I** (Financial Information – Small Plan)
(3)	X	1	**A** (Insurance Information)
(4)	X		**C** (Service Provider Information)
(5)	X		**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 2022 Form M-1 annual report. If the plan was not required to file the 2022 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

2022

This Form is Open to Public Inspection

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
COLUMBIA UNIVERSITY VOLUNTARY RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 009

C Plan sponsor's name as shown on line 2a of Form 5500
TRUSTEES OF COLUMBIA UNIVERSITY

D Employer Identification Number (EIN)
13-5598093

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions

Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
TIAA-CREF

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1624203	69345	100431	7993	01/01/2022	12/31/2022

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

(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	578383423
5	Current value of plan's interest under this contract in separate accounts at year end	5	740452083

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	567339427
c	Additions: (1) Contributions deposited during the year	7c(1)	17956702		
	(2) Dividends and credits	7c(2)	0		
	(3) Interest credited during the year	7c(3)	20217204		
	(4) Transferred from separate account	7c(4)	36114231		
	(5) Other (specify below)	7c(5)	1351469		
	▶ FEES AND OTHER DEDUCTIONS				
	(6) Total additions			7c(6)	75639606
d	Total of balance and additions (add lines **7b** and **7c(6)**)			7d	642979033
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	32333552		
	(2) Administration charge made by carrier	7e(2)			
	(3) Transferred to separate account	7e(3)	32131898		
	(4) Other (specify below)	7e(4)	130160		
	▶ FEES AND OTHER DEDUCTIONS				
	(5) Total deductions			7e(5)	64595610
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	578383423

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.			**10b**	

Specify nature of costs.

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)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2022** **This Form is Open to Public Inspection.**

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
COLUMBIA UNIVERSITY VOLUNTARY RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 009

C Plan sponsor's name as shown on line 2a of Form 5500
TRUSTEES OF COLUMBIA UNIVERSITY

D Employer Identification Number (EIN)
13-5598093

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

TIAA

13-1624203

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

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

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

THE VANGUARD GROUP, INC

23-1945930

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 16 37 99	TRUSTEE	335672	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

SEYFARTH SHAW

36-2152202

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	ATTORNEY	99338	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

PRICEWATERHOUSECOOPERS LLP

13-4008324

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	51100	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

AON HEWITT INVESTMENT CONSULTING

36-3109431

(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?
17	CONSULTANT	50225	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

WILLIS TOWERS WATSON US LLC

53-0181291

(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?
11 50	NONE	29400	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MARTIN EDUCATION ENTERPRISES

45-4148409

(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?
16 70	NONE	9542	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2022

This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
COLUMBIA UNIVERSITY VOLUNTARY RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 009

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
TRUSTEES OF COLUMBIA UNIVERSITY

D Employer Identification Number (EIN)
13-5598093

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: TIAA-CREF REAL ESTATE ACCOUNT

b Name of sponsor of entity listed in (a): TIAA-CREF

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)
13-1624203-004	P	74612134

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

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

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

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

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

2022

This Form is Open to Public Inspection

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
COLUMBIA UNIVERSITY VOLUNTARY RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 009

C Plan sponsor's name as shown on line 2a of Form 5500
TRUSTEES OF COLUMBIA UNIVERSITY

D Employer Identification Number (EIN)
13-5598093

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)	13329922	0
(3) Other	1b(3)	506400	425877
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	15040030
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	72580284	74612134
(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)	3350870449	2831761787
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	567339427	578383422
(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	4004626482	3500223250
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	353079	36012
k Total liabilities (add all amounts in lines 1g through1j)	1k	353079	36012
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	4004273403	3500187238

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)		
(B) Participants	2a(1)(B)	168397735	
(C) Others (including rollovers)	2a(1)(C)	42850426	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		211248161
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)		
(F) Other	2b(1)(F)	20294222	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		20294222
(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)	70155784	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		70155784
(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)	-188337829	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		-188337829

		(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)		5994141
(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)		-469139208
c Other income	2c		1750181
d Total income. Add all **income** amounts in column (b) and enter total	2d		-348034548
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	154998250	
(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)		154998250
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)	230063	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	811384	
(4) Other	2i(4)	11920	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		1053367
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		156051617
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-504086165
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)** [X] 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) [X] 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: PRICEWATERHOUSECOOPERS LLP **(2)** EIN: 13-4008324

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:

		Yes	No	Amount
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.)	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?	4e	X		25000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	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.)	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	X		

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

2022

This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
COLUMBIA UNIVERSITY VOLUNTARY RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 009

C Plan sponsor's name as shown on line 2a of Form 5500
TRUSTEES OF COLUMBIA UNIVERSITY

D Employer Identification Number (EIN)
13-5598093

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 13-1624203 23-2186884

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3**

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (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_____

Columbia University Voluntary Retirement Savings Plan

Financial Statements and Supplemental Schedule
Required by ERISA
December 31, 2022 and 2021

Columbia University Voluntary Retirement Savings Plan
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Note: Other supplemental schedules required by Section 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.



Report of Independent Auditors

To the Administrator of Columbia University Voluntary Retirement Savings Plan

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

We were engaged to perform an audit of the financial statements of Columbia University Voluntary Retirement Savings Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2022 and 2021, and the related statement of changes in net assets available for benefits for the year ended December 31, 2022, including the related notes (collectively referred to as the "financial statements").

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

Management has obtained certifications from qualified institutions as of December 31, 2022 and 2021 and for the year ended December 31, 2022, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Disclaimer of Opinion

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

Basis for Disclaimer of Opinion

The Plan sponsor's accounting records for contracts and custodial accounts issued to current or former employees prior to January 1, 2009 do not provide sufficient evidence supporting investments, benefit payments, investment income and net assets available for benefits to permit the application of adequate auditing procedures.



Responsibilities of Management for the Financial Statements

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

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

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

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

Supplemental Schedule Required by ERISA

Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2022 ("supplemental schedule"), is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion section of our report, it is inappropriate to and we do not express an opinion on this supplemental schedule.

PricewaterhouseCoopers LLP

New York, New York
August 31, 2023

Columbia University Voluntary Retirement Savings Plan
Statements of Net Assets Available for Benefits
December 31, 2022 and 2021

	2022	2021
Assets		
Investments, at fair value		
CREF Variable annuities	$ 665,110,494	$ 1,008,060,105
TIAA Traditional annuities (Note 2)	76,543,308	79,419,912
Registered investment companies	2,166,651,293	2,342,810,344
TIAA Pooled separate account	74,612,134	72,580,284
Total investments, at fair value	2,982,917,229	3,502,870,645
Investments, at contract value		
TIAA Traditional annuities (Note 2)	501,840,114	487,919,515
Total investments, at contract value	501,840,114	487,919,515
Total investments	3,484,757,343	3,990,790,160
Receivables		
Notes receivable from participants	15,040,030	13,329,922
Other receivable	425,877	506,400
Total receivables	15,465,907	13,836,322
Total assets	3,500,223,250	4,004,626,482
Liabilities		
Accrued expenses	36,012	353,079
Net assets available for benefits	$ 3,500,187,238	$ 4,004,273,403

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

Columbia University Voluntary Retirement Savings Plan
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2022

Additions (reductions) to net assets attributed to	
Investment income (loss)	
Net depreciation in fair value of investments	$ (651,482,896)
Interest and dividend income	90,450,006
Net investment loss	(561,032,890)
Employee contributions	168,397,735
Rollover contributions	42,850,426
Other revenue	1,750,181
Net reductions	(348,034,548)
Deductions from net assets attributed to	
Benefits paid to participants	154,998,250
Administrative expenses	1,053,367
Total deductions	156,051,617
Net decrease in net assets available for benefits	(504,086,165)
Net assets available for benefits	
Beginning of year	4,004,273,403
End of year	$ 3,500,187,238

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

1. Plan Description

The following description of the Columbia University Voluntary Savings Retirement Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan Document for more complete information.

General

The Plan was established to provide retirement income benefits to eligible employees of the Columbia University (the "University") and their beneficiaries. The University is the Plan Sponsor and Administrator. Eligible employee means any employee of the University or an affiliated employer, and is defined as any employee (whether full-time or part-time) who is paid directly from the University payroll and who receives an Internal Revenue Service ("IRS") Form W-2 from the University, except i) a nonresident alien who does not receive earned income from the University, i.e., income from sources within the United States, or ii) a nonresident alien who does receive earned income from the University but all of the earned income from the University is exempt from United States income tax under a tax treaty.

The Plan is funded solely through elective deferrals made by participants, which are held in funding vehicles and invested in investment funds as selected by participants. The assets of the Plan are administered, distributed, forfeited and otherwise governed by the provisions of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Plan includes an automatic enrollment feature for participants who are new hires or rehires post July 1, 2013 and eligible participants under the Retirement Plan for Officers of Columbia University.

Contributions

Subject to the provisions of the Plan, a participant may make elective deferrals to the Plan by completing a Salary Reduction Agreement ("SRA") in such form as determined by the Plan Administrator. This SRA is legally binding and irrevocable with respect to amounts payable while the agreement is in effect but may be changed or terminated with respect to amounts not yet paid, in accordance with the administrative procedures established by the Administrator.

Rollover Contributions

The Plan allows for rollover contributions of balances that plan participants accumulated in non-Columbia University plans. These rollovers are administered by the Plan's service providers and are subject to ERISA rules and regulations.

Vesting of Plan Contributions

A participant is 100% vested in his or her plan contributions once they are made, and the earnings thereon shall be at all times nonforfeitable. This does not limit the deduction from a participant's account of such fees and charges that may be imposed by the insurance companies or custodian of the Plan, or other plan expense changes which may be charged to the account under applicable law, the removal of plan contributions made under a Mistake of Fact form, or the University's right to reallocate contributions or earnings which were incorrectly allocated to any account.

Benefit Payments
Benefit payments take place in the form of withdrawals of lump sums or annuity payments as allowed by the investment option. A participant may commence distributions from his or her account at any time following termination of employment due to retirement, death, disability, resignation or dismissal. Retirement is generally at age 65, but a phased retirement agreement is available at age 55. Distributions during employment can also occur due to hardship, withdrawals at age 59 and a half or qualified military withdrawals.

Administration
The general administration of the Plan and the responsibility for carrying out the Plan's provisions are performed by the Vice President for Human Resources of the University.

Investment Options and Participant Accounts
Plan investments are managed under the terms of agreements between the University and the Teachers Insurance and Annuity Association ("TIAA") and College Retirement Equities Fund ("CREF") (collectively, "TIAA-CREF"), who serve as insurance companies, and Vanguard Fiduciary Trust Company ("Vanguard"), who serves as custodian. Participants may elect to allocate contributions among the TIAA Traditional Annuities, TIAA Real Estate, CREF and TIAA-CREF registered investment companies, and the Vanguard and Calvert Trust Company ("Calvert") registered investment companies. The allocations may be in any whole number or percentage proportion, including full allocation to any annuity or account. Each participant's account is credited with the employee contribution and charged with an allocation of administrative expenses and Plan earnings (losses). Allocations are based on participant earnings or account balances, as defined. Effective June 1, 2022, participants may also direct the investment of their accounts into mutual funds via a self-directed brokerage account with either TIAA-CREF or Vanguard.

The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Teachers Insurance and Annuity Association
Participants can choose from a series of annuity investment options. Refer to the TIAA prospectuses for detailed descriptions of the investment options. TIAA is a legal reserve life insurance and annuity company.

The TIAA traditional annuity contracts are guaranteed insurance contracts. Contributions to the TIAA Traditional Annuities are used to purchase a guaranteed amount of future retirement benefits. TIAA provides to participants fixed dollar annuities, which are considered unallocated contracts.

Until September 2017, TIAA Traditional Annuities were offered through the Retirement Annuity ("RA") and Group Supplemental Retirement Annuity ("GSRA") contracts. The TIAA Traditional Annuity holdings within the RA contracts have liquidity restrictions and distributions, withdrawals, and transfers out of these contracts can only be made in 10 annual installments through Transfer Payout Annuities and are considered "nonbenefit responsive". As of September 2017, TIAA Traditional Annuities are offered through GSRA and Retirement Choice Plus ("RCP") contracts for all newly invested funds. The TIAA Traditional Annuity holdings within the GSRA and RCP contracts contain no liquidity restrictions and are considered "benefit responsive."

TIAA Traditional Annuities within the RCP contracts are also used as the investment vehicle for the Revenue Credit Account (refer to Other Revenue in Note 2) through the RCP contract, and as such, these contracts are considered non-participant directed.

The TIAA Real Estate Account is a pooled separate account investing mostly in real estate and real estate related investments.

College Retirement Equities Fund – Variable Annuities
Participants have a choice of eight variable annuities to which they can direct their investments. Refer to the CREF prospectuses for detailed descriptions of the investment options.

Upon retirement, investments in the TIAA Real Estate Account and the CREF variable annuities may remain in each or be invested in the Traditional Annuities.

Teachers Insurance and Annuity Association – College Retirement Equities Fund – Institutional Mutual Funds
Participants have a choice of various TIAA-CREF Institutional Mutual Funds to which they can direct their investments. TIAA-CREF Institutional Mutual Funds are not eligible to be annuitized by TIAA. TIAA, FSB is the directed custodian for the TIAA-CREF Institutional Mutual Funds.

Vanguard Fiduciary Trust Company – Mutual Funds
Participants have a choice of a variety of mutual funds to which they can direct their investments. Refer to the Vanguard prospectuses for detailed descriptions of the investment options.

Calvert Trust Company – Mutual Funds
Participants have a choice of a variety of mutual funds to which they can direct their investments. Refer to the Calvert prospectuses for detailed descriptions of the investment options.

Self-Directed Brokerage Accounts – Mutual Funds
Participants may invest in mutual funds via the self-directed brokerage options offered through both TIAA-CREF and Vanguard.

Participants direct the investment of their account balance into various investment options offered by the Plan and may change their investment options at any time, subject to the terms of the service provider agreements governing the investment options.

TIAA Plan Loans
Plan loans were available to participants from funds owned by TIAA through December 31, 2018 and were therefore not included in Plan assets. Participants who took a Plan loan must enter 110% of the loan amount into the TIAA Traditional GSRA Annuity as collateral. Although plan loans made from TIAA funds are not considered plan assets, the participant's balances held in TIAA Traditional GSRA Annuity as collateral for the Plan loans are plan assets. The minimum loan amount was $1,000 with a maximum amount of $50,000 or 45% of a participant's account balance, whichever was less. The maximum term of a plan loan was 5 years or 10 years if the loan was for the purchase of a principal residence with the longest-term Plan loan maturing December 2029. Interest is paid by the participant to TIAA with rates ranging from 4.0% to 7.88% during the year ended December 31, 2022. Plan loans of $2,781,493 and $4,215,516 were outstanding at December 31, 2022 and 2021, respectively. Were a plan loan to go into default, the collateral associated with the loan would not be distributed to TIAA unless the participant was otherwise eligible for a distribution.

Participant Loans
The participant loan amount is taken from the participants' available vested amounts of the funds in which the account is invested with either TIAA or Vanguard. Per IRS requirements, the maximum amount that a participant can borrow when added to any outstanding loan balances cannot exceed the lesser of:

- $50,000, reduced by the excess, if any, of the highest outstanding loan balance from the plan during the one-year period ending on the day before the date of the new loan over the current outstanding loan balance as of the date of the new loan; or

- 50% of the vested account balance as of the date the loan is made. At the time the loan is made, up to 50% of the vested account balance will be considered security for the loan.

The Plan has an option to charge a one-time loan application fee which will be deducted from participants' loan proceeds. The Plan also has the option to charge an annual maintenance fee that will be automatically deducted from the participants' account balance. For both TIAA and Vanguard, the maximum term of a participant loan (other than primary residence) is 5 years, with 10 years for a loan for a primary residence. The longest-term participant loan matures in November 2031. The loan interest rate and the procedure for determining the loan interest rate is subject to change and at the discretion of the Plan Administrator, which range from 4.25% to 8.5% during the year ended December 31, 2022. The interest is credited back to the account upon repayment of the loan. As of December 31, 2022 and 2021, outstanding TIAA participant loans were $9,372,410 and $8,373,539, respectively. As of December 31, 2022 and 2021, outstanding Vanguard participant loans were $5,667,620 and $4,956,383, respectively. The total of $15,040,030 and $13,329,922 as of December 31, 2022 and 2021, respectively, is reflected as notes receivable from participants on the statements of net assets available for benefits.

2. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting and in conformity with accounting principles generally accepted in the United States of America.

Investment Valuation and Income Recognition

Investments in registered investment companies, the pooled separate account and variable annuities are stated at fair value based on the net asset value on the last day of the plan year. The Trustees of the University Retirement Trust determine the Plan's valuation policies utilizing information provided by the investment advisors, custodians and insurance companies. 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. See Note 3 for discussion of fair value measurements.

Shares of registered investment company mutual funds and institutional mutual funds, variable annuities and the pooled separate account are reported at quoted market prices, which represent the net asset value (NAV) of shares held by the Plan at year end. NAV, calculated daily, is applied to daily purchase and sale transactions in addition to being used to determine ending market values. Accumulation units for variable annuities and the TIAA real estate pooled separate account are recorded at fair value at the NAV of units held by the Plan at year end.

TIAA Traditional Annuities are valued at the amount that would be received by the participant at the reporting date if the amounts were withdrawn or funds transferred within the Plan prior to maturity. The TIAA Traditional Annuity RA contract is nonbenefit responsive and reported at contract value which approximates fair value. Contract value is the aggregation of contributions, plus interest, less withdrawals and expenses, if any. Contract value approximates a discounted cash flow value calculated using an appropriate risk-adjusted market discount rate which correlates closely with TIAA Traditional Annuity's historical crediting rates. At December 31, 2022 and 2021, the balance of the RA contracts was $76,543,308 and $79,419,912, respectively. The GSRA and RCP contracts are fully benefit responsive and reported at contract value. Contract value is the relevant

measure for fully benefit responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. At December 31, 2022 and 2021, the balance of the participant directed GSRA contracts was $396,255,582 and $406,920,417, respectively, and the RCP contracts was $105,584,532 and $80,999,098, respectively, totaling $501,840,114 and $487,919,515, respectively.

The TIAA traditional annuity guarantees principal and pays a guaranteed minimum interest, which was 3% during 2022. Additional amounts above the guaranteed minimum interest rate may be declared at the discretion of the TIAA Board of Trustees on a year-by-year basis. When declared, the additional amounts remain in effect for the declaration year that begins each March 1 and are not guaranteed for future years. Together the guaranteed minimum and additional amounts make up the crediting rate in the accumulation phase. TIAA groups premium dollars received over defined periods into vintages for the purposes of determining the crediting rate for applicable declaration year during the accumulation period. During the year ended December 31, 2022, the average crediting rates for the GSRA contract was 3.38%, the average crediting rates for the RA contract was 4.21% and the average crediting rates for the RCP contract was 3.57%.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded as earned. Dividends are recorded on the ex-dividend date, or as soon as the investment advisor is informed of the ex-dividend date.

Net appreciation (depreciation) in the fair value of investments consists of the realized gains or losses and the unrealized appreciation or depreciation on those investments.

Benefits to Participants
Benefits to participants are recorded when paid.

Administrative Expenses
Administrative expenses directly related to the Plan, which consist primarily of fees for audit services, education, and preparation of participant related communication materials, are paid by the Plan from the Revenue Credit Account (refer to Other Revenue section of this Note), a component of net assets available for benefits. Certain other administrative expenses paid by the University (primarily production/mailing costs) are not reflected in the Plan's financial statements.

Other Revenue
Other revenue represents a negotiated agreement with TIAA-CREF with specific allocation methods for revenue sharing to the Plan. The credit will be deposited into the Revenue Credit Account as defined by the Plan and may only be used either to pay direct, reasonable and necessary expenses of the Plan for which the Plan is authorized to pay or to provide benefits for Plan participants and beneficiaries. Other revenue related to this agreement amounted to $1,750,181 for the year ended December 31, 2022.

Use of Estimates
The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities at the dates of the financial statements. Actual results could differ from those estimates and such differences could be material.

Risk and Uncertainties

The Plan provides for various investment options in investment securities. Investments are exposed to various risks, such as interest rate, market, and credit risks. Market values of investments can decline for a number of reasons, including changes in prevailing market and interest rates, increased market volatility due to the global pandemic, international conflict, inflationary pressure, increases in defaults, and credit rating downgrades. Due to the level of risk associated with certain investments, it is at least reasonably possible that changes in the values of investments will occur in the near term and that such changes could materially affect participants' accounts balances and the amounts reported in the statement of net assets available for benefits.

3. Fair Value Measurements

FASB Accounting Standards Codification ("ASC") 820, *Fair Value Measurement and Disclosures,* establishes a hierarchy of valuation inputs based on the extent to which the inputs are observable in the marketplace. Observable inputs reflect market data obtained from sources independent of the reporting entity and unobservable inputs reflect the entities own assumptions about how market participants would value an asset or liability based on the best information available. Valuation techniques used to measure fair value under ASC 820 utilize relevant observable inputs and minimize the use of unobservable inputs. The standard describes a fair value hierarchy based on three levels of inputs, of which the first two are considered observable and the last unobservable, that may be used to measure fair value.

The following describes the hierarchy of inputs used to measure fair value and the primary valuation methodologies used by the Plan for financial instruments measured at fair value on a recurring basis. A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement. The three levels of inputs are as follows:

Level 1 Quoted prices in active markets for identical assets or liabilities.

Level 2 Inputs other than Level 1 that are observable, either directly or indirectly, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the same term of the assets or liabilities.

Level 3 Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

A financial instrument's categorization within the valuation hierarchy is based on the lowest level of input that is significant to the fair value measurement. In determining the categorization of the Plan's investments within the fair value hierarchy, the Plan has considered market information, including observable net asset values, and the length of time until the investment will become redeemable. The categorization of a financial instrument within the hierarchy is based upon the pricing transparency of that instrument and does not necessarily correspond to the Plan's perceived risk of that instrument.

The preceding fair value methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. There have been no changes in the fair value methods used as of December 31, 2022 and 2021.

The following presents investments of the Plan as of December 31, 2022 and 2021, respectively, by caption and by level within the valuation hierarchy.

	December 31, 2022			
	Level 1	**Level 2**	**Level 3**	**Total**
Assets				
Investments, at fair value				
TIAA Traditional annuities	$ -	$ -	$ 76,543,308	$ 76,543,308
Pooled separate account	74,612,134	-	-	74,612,134
Registered investment companies				
Variable annuities				
Equities	427,686,319	-	-	427,686,319
Global Equities	94,600,544	-	-	94,600,544
Index (1)	71,231,416	-	-	71,231,416
Money Market Funds	10,177,800	-	-	10,177,800
Fixed Income	61,414,415	-	-	61,414,415
Mutual Funds (3)				
Equities	414,068,763	-	-	414,068,763
Global Equities	11,454,507	-	-	11,454,507
Lifecycle Funds (2)	1,280,889,828	-	-	1,280,889,828
Index (1)	392,941,839	-	-	392,941,839
Fixed Income	17,545	-	-	17,545
Money Market Funds	67,278,811	-	-	67,278,811
Total investments, at fair value	$ 2,906,373,921	$ -	$ 76,543,308	$ 2,982,917,229

	December 31, 2021			
	Level 1	**Level 2**	**Level 3**	**Total**
Assets				
Investments, at fair value				
TIAA Traditional annuities	$ -	$ -	$ 79,419,912	$ 79,419,912
Pooled separate account	72,580,284	-	-	72,580,284
Registered investment companies				
Variable annuities				
Equities	611,743,515	-	-	611,743,515
Global Equities	191,567,602	-	-	191,567,602
Index (1)	120,248,509	-	-	120,248,509
Money Market Funds	9,724,921	-	-	9,724,921
Fixed Income	74,775,558	-	-	74,775,558
Mutual Funds				
Equities	498,120,328	-	-	498,120,328
Global Equities	54,505,725	-	-	54,505,725
Lifecycle Funds (2)	1,187,172,864	-	-	1,187,172,864
Index (1)	499,750,535	-	-	499,750,535
Fixed Income	23,619,557	-	-	23,619,557
Money Market Funds	79,641,335	-	-	79,641,335
Total investments, at fair value	$ 3,423,450,733	$ -	$ 79,419,912	$ 3,502,870,645

(1) Index variable annuities and institutional mutual funds represent the different CREF, TIAA-CREF, Vanguard and Calvert index funds, generally containing specific portfolios selected to track the overall market for common stocks publicly traded in the United States, as represented by broad stock market indexes.

(2) Lifecycle funds are investments that seek high total return over time, through a combination of capital appreciation and income with allocations of investments changing based on a specific retirement date.

(3) Self-directed brokerage accounts are included in the mutual fund category as they exclusively hold mutual funds, which are reported at quoted market prices and represent the NAV of shares held by the Plan at year end.

For the year ended December 31, 2022, there were no transfers in or out of Level 3.

The pooled separate account invests in real estate and real estate related investments. Although the underlying assets of the pooled separate accounts cannot be quickly sold and converted to liquid assets, the TIAA general account provides a liquidity guarantee to meet participant redemption, transfer, or cash withdrawal requests varying from one to three days. Redemptions out of the investment are limited to once per quarter. Internal transfers into the TIAA Real Estate Account will be prohibited if the transfer causes the value of the participant's total accumulation in the account to exceed $150,000. The purpose of this limitation is to ensure more predictable account inflows and outflows, which is expected to facilitate efficient portfolio management over the long-term.

The registered investment company variable annuities invest in equities, global equity, index, other index, fixed income, lifecycle and money market funds. All variable annuities have daily liquidity. Participants will be locked out of the variable annuity for 90 days if a purchase, sale and repurchase within that variable annuity is made within a 60-day period. The funds have different trading terms varying from one to three days.

The Level 3 investment asset consists of the TIAA Traditional Annuity unallocated RA contract, which is nonbenefit responsive and not available for sale or transfer on any securities exchange. Accordingly, transactions in similar investment instruments are not observable, and the investments are valued using unobservable inputs (Level 3). While transactions involving the purchases/sales of individual TIAA Traditional Annuity RA contracts are not observable in a public marketplace, contract value approximates fair value.

The following tables present information about significant unobservable inputs related to the Plan's investment in assets categorized as Level 3 at December 31, 2022 and 2021:

Type		Fair Value 2022	Principal Valuation Technique	Significant Unobservable Inputs	Range of Significant Input Values
TIAA Traditional Non Benefit Responsive - RA	$	76,543,308	Discounted Cash Flow Theoretical Transfer (exit value)	Risk-adjusted discount rate applied	Between 3.70% and 6.25%

Type		Fair Value 2021	Principal Valuation Technique	Significant Unobservable Inputs	Range of Significant Input Values
TIAA Traditional Non Benefit Responsive - RA	$	79,419,912	Discounted Cash Flow Theoretical Transfer (exit value)	Risk-adjusted discount rate applied	Between 3.00% and 3.8%

4. Information Certified by the Custodian and Insurance Companies

The Plan's management has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. The Plan's assets were held by Vanguard, the custodian and TIAA-CREF, as insurance companies. TIAA has been authorized by TIAA, FSB to certify the investments and investment information for which TIAA, FSB is the directed custodian. Certified information related to investments, at fair value, investments, at contract value, interest and dividends, net depreciation in the fair value of investments and all other related investment information in the accompanying financial statements, notes to the financial statements, other than the leveling provided in Note 3, was obtained by management and agreed to or derived from information certified as complete and accurate by the custodian and insurance companies.

5. Plan Termination

The University has not expressed any intent to discontinue the Plan. However, it is free to do so at any time, subject to the provisions set forth in ERISA. In the event such discontinuance results in the termination of the Plan, participants remain 100% vested in their accounts and, subject to certain restrictions in the unallocated insurance contracts, amounts will be distributed in a lump sum.

6. Related Party and Party-in-Interest Transactions

TIAA-CREF, as insurance companies, and Vanguard, as custodian, are related parties. Investments managed by the insurance companies and custodian qualify as party-in-interest transactions which are exempt from prohibited transaction rules. In addition, the University is a related party and a party-in-interest as it provides certain services for the Plan, and notes receivable from Plan participants qualify as party-in-interest transactions. Currently, the University does not seek reimbursement for such services.

7. Federal Income Tax Status

The Plan has been designed to qualify for tax-exempt status under Section 403(b) of the Internal Revenue Code ("the Code"). The terms of the Plan have been prepared to conform to the sample language provided by the IRS in the draft Listing of Required Modifications issued April 4, 2009. The Plan is required to operate in conformity with the Code to maintain the tax-exempt status for plan participants under Section 403(b). The Plan Administrator believes that the Plan is currently designed and operating in compliance with tax applicable requirements of Section 403(b) of the Code and, therefore, believes the Plan is qualified and the related custodial accounts and tax-deferred annuities are tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements. Accounting principles generally accepted in the United States of America required plan management to evaluate tax positions taken by the Plan and recognize a tax

liability (or asset) if the organization has taken an uncertain position that more likely would not be sustained upon examination by the relevant tax authorities. The Plan Administrator has analyzed the tax positions taken by the Plan, and has concluded that, as of December 31, 2022 and 2021, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes it is no longer subject to income tax examinations for years prior to 2019.

8. Subsequent Events

Subsequent events have been evaluated through August 31, 2023, the date the financial statements were available to be issued. There have been no subsequent events that occurred during this period that would require recognition or disclosure in the financial statements as of December 31, 2022 or for the year then ended.

Supplemental Schedule Required by ERISA

Columbia University Voluntary Retirement Savings Plan
Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
	Vanguard Fiduciary Trust Company			
*	Vanguard Developed Markets Index Fund Institutional Shares	Registered investment company - Mutual funds	#	$ 11,418,894
*	Vanguard Emerging Markets Stock Index Fund: Inst'l Shares	Registered investment company - Mutual funds	#	12,893,944
*	Vanguard Extended Market Index Fund: Inst'l Shares	Registered investment company - Mutual funds	#	54,482,658
*	Vanguard Federal Money Market Fund	Registered investment company - Mutual funds	#	58,218,018
*	Vanguard Inflation-Protected Securities Fund: Inst'l Shares	Registered investment company - Mutual funds	#	3,611,574
*	Vanguard Institutional Index Fund Plus Shares	Registered investment company - Mutual funds	#	226,296,440
*	Vanguard Institutional Target Retirement 2020 Fund	Registered investment company - Mutual funds	#	52,158,029
*	Vanguard Institutional Target Retirement 2025 Fund	Registered investment company - Mutual funds	#	91,968,677
*	Vanguard Institutional Target Retirement 2030 Fund	Registered investment company - Mutual funds	#	116,665,661
*	Vanguard Institutional Target Retirement 2035 Fund	Registered investment company - Mutual funds	#	112,152,585
*	Vanguard Institutional Target Retirement 2040 Fund	Registered investment company - Mutual funds	#	121,603,765
*	Vanguard Institutional Target Retirement 2045 Fund	Registered investment company - Mutual funds	#	125,737,836
*	Vanguard Institutional Target Retirement 2050 Fund	Registered investment company - Mutual funds	#	92,702,428
*	Vanguard Institutional Target Retirement 2055 Fund	Registered investment company - Mutual funds	#	44,354,145
*	Vanguard Institutional Target Retirement 2060 Fund	Registered investment company - Mutual funds	#	13,069,914
*	Vanguard Institutional Target Retirement 2065 Fund	Registered investment company - Mutual funds	#	3,255,954
*	Vanguard Institutional Target Retirement 2070 Fund	Registered investment company - Mutual funds	#	61,107
*	Vanguard Institutional Target Retirement Income Fund	Registered investment company - Mutual funds	#	45,866,084
*	Vanguard Self Directed Brokerage Account	Registered investment company - Mutual funds	#	50,563,257
	New York Life Guaranteed Interest Account; 10 bps Fee Class	Registered investment company - Mutual funds	#	1,674,453
*	Vanguard Real Estate Index Fund - Instl Shares	Registered investment company - Mutual funds	#	9,175,521
*	Vanguard Total Bond Market Index Fund: Inst'l Shr	Registered investment company - Mutual funds	#	66,561,516
*	Vanguard Total International Stock Index Fund: Inst'l Shr	Registered investment company - Mutual funds	#	39,592,355
*	Vanguard Total International Bond Index Fund Admiral Shr	Registered investment company - Mutual funds	#	959,140
*	Vanguard Total Stock Market Index Fund Institutional Plus Shares	Registered investment company - Mutual funds	#	217,441,972
*	Vanguard Total Stock Market Index Fund: Inst'l Shr	Registered investment company - Mutual funds	#	58,579,432
*	Vanguard Total World Stock Index Fund: Inst'l Shr	Registered investment company - Mutual funds	#	6,010,792
	Subtotal			1,637,076,152

The above information was derived from data certified accurate and complete by Vanguard Fiduciary Trust Company, custodian, and Teachers Insurance and Annuity Association and College Retirement Equities Fund, insurance companies.

Columbia University Voluntary Retirement Savings Plan
Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
	TIAA			
*	TIAA TRADITIONAL NON BENEFIT RESPONSIVE NBR - RA	Unallocated Annuity Contracts	#	76,543,308
*	TIAA TRADITIONAL BENEFIT RESPONSIVE 2 BR2 - RCP	Unallocated Annuity Contracts	$ 105,584,532	105,584,532
*	TIAA TRADITIONAL BENEFIT RESPONSIVE BR1 - GSRA	Unallocated Annuity Contracts	#	394,482,154
*	PLAN LOAN DEFAULT FUND 98 - GSRA	Unallocated Annuity Contracts	#	1,773,428
*	TIAA Real Estate	Pooled Separate account	#	74,612,134
	CREF			
*	CREF STOCK R3 KH	Registered investment company - Variable annuity	#	300,661,939
*	CREF MONEY MARKET R3 KI	Registered investment company - Variable annuity	#	10,177,800
*	CREF SOCIAL CHOICE R3 KJ	Registered investment company - Variable annuity	#	45,588,628
*	CREF BOND MARKET R3 KK	Registered investment company - Variable annuity	#	39,155,878
*	CREF GLOBAL EQUITIES R3 KO	Registered investment company - Variable annuity	#	94,600,544
*	CREF GROWTH R3 KQ	Registered investment company - Variable annuity	#	81,435,753
*	CREF EQUITY INDEX R3 KR	Registered investment company - Variable annuity	#	71,231,416
*	CREF INFLATION-LINKED BOND R3 KS	Registered investment company - Variable annuity	#	22,258,535
	TIAA-CREF			
*	TIAA ACCESS BOND PLUS T1 2Y	Registered investment company - Institutional mutual funds	#	13,979
*	TIAA ACCESS EQUITY INDEX T1 2K	Registered investment company - Institutional mutual funds	#	49,004
*	TIAA ACCESS GROWTH & INCOME T1 2B	Registered investment company - Institutional mutual funds	#	3,567
*	TIAA ACCESS INTL EQUITY T1 2A	Registered investment company - Institutional mutual funds	#	35,613
*	TIAA ACCESS LFCYLE RTMT INC T1 33	Registered investment company - Institutional mutual funds	#	81
*	TIAA ACCESS LG-CAP GR T1 2W	Registered investment company - Institutional mutual funds	#	8,165
*	TIAA ACCESS LG-CAP VAL T1 2C	Registered investment company - Institutional mutual funds	#	79,226
*	TIAA ACCESS LIFECYCLE 2010 T1 20	Registered investment company - Institutional mutual funds	#	206
*	TIAA ACCESS LIFECYCLE 2015 T1 21	Registered investment company - Institutional mutual funds	#	248
*	TIAA ACCESS LIFECYCLE 2020 T1 22	Registered investment company - Institutional mutual funds	#	86
*	TIAA ACCESS LIFECYCLE 2025 T1 23	Registered investment company - Institutional mutual funds	#	89
*	TIAA ACCESS LIFECYCLE 2030 T1 24	Registered investment company - Institutional mutual funds	#	4,113
*	TIAA ACCESS LIFECYCLE 2035 T1 25	Registered investment company - Institutional mutual funds	#	96
*	TIAA ACCESS LIFECYCLE 2040 T1 26	Registered investment company - Institutional mutual funds	#	41,596
*	TIAA ACCESS LIFECYCLE 2045 T1 31	Registered investment company - Institutional mutual funds	#	20,566
*	TIAA ACCESS LIFECYCLE 2050 T1 32	Registered investment company - Institutional mutual funds	#	105,405
*	TIAA ACCESS MID-CAP GR T1 2E	Registered investment company - Institutional mutual funds	#	32,445
*	TIAA ACCESS MID-CAP VAL T1 2F	Registered investment company - Institutional mutual funds	#	41,522
*	TIAA ACCESS REAL EST SECS T1 2S	Registered investment company - Institutional mutual funds	#	42,875
*	TIAA ACCESS SM-CAP BL IDX T1 2Q	Registered investment company - Institutional mutual funds	#	96,434
*	TIAA ACCESS QUANT SML CP EQ T1 2G	Registered investment company - Institutional mutual funds	#	31,930
*	TIAA-CREF SELF-DIRECTED BROKERAGE ACCOUNT	Registered investment company - Institutional mutual funds	#	1,186,570
*	TIAA ACCESS SOCIAL CH EQ T1 2D	Registered investment company - Institutional mutual funds	#	122,210

The above information was derived from data certified accurate and complete by Vanguard Fiduciary Trust Company, custodian, and Teachers Insurance and Annuity Association and College Retirement Equities Fund, insurance companies.

Columbia University Voluntary Retirement Savings Plan
Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	VANGUARD FEDERAL MONEY MKT INV RY	Registered investment company - Institutional mutual funds	#	9,060,795
*	VANGUARD EMR MKTS STK IDX INST ZQ	Registered investment company - Institutional mutual funds	#	3,315,528
*	VANGUARD INST IDX INST PLUS WK	Registered investment company - Institutional mutual funds	#	30,478,419
*	VANGUARD TARGET RETIRE INCOME ML	Registered investment company - Institutional mutual funds	#	47,245,562
*	VANGUARD DEVLOPD MKTS IDX INS BS	Registered investment company - Institutional mutual funds	#	8,439,575
*	VANGUARD EXTEND MKIDX INST PL BT	Registered investment company - Institutional mutual funds	#	7,329,617
*	VANGUARD TTL BD MKT IDX INSTPL BV	Registered investment company - Institutional mutual funds	#	23,751,276
*	VANGUARD TTL INTL BND IDX ADM BW	Registered investment company - Institutional mutual funds	#	279,612
*	VANGUARD TOTAL INT ST IX ISPLS BX	Registered investment company - Institutional mutual funds	#	156,692
*	VANGUARD TOTAL ST MK IX IN PL BY	Registered investment company - Institutional mutual funds	#	25,629,869
*	VANGUARD SHRT-TERM IP SEC ID I CC	Registered investment company - Institutional mutual funds	#	2,535,654
*	VANGUARD REAL ESTATE IDX INST BD	Registered investment company - Institutional mutual funds	#	13,826,268
*	VANGUARD INST TG RTM 2020 INST BF	Registered investment company - Institutional mutual funds	#	40,247,750
*	VANGUARD INST TG RTM 2025 INST BG	Registered investment company - Institutional mutual funds	#	49,676,552
*	VANGUARD INST TG RTM 2030 INST BH	Registered investment company - Institutional mutual funds	#	51,082,036
*	VANGUARD INST TG RTM 2035 INST BI	Registered investment company - Institutional mutual funds	#	57,087,183
*	VANGUARD INST TG RTM 2040 INST BJ	Registered investment company - Institutional mutual funds	#	56,033,517
*	VANGUARD INST TG RTM 2045 INST BK	Registered investment company - Institutional mutual funds	#	36,280,446
*	VANGUARD INST TG RTM 2050 INST BL	Registered investment company - Institutional mutual funds	#	20,379,353
*	VANGUARD INST TG RTM 2055 INST BM	Registered investment company - Institutional mutual funds	#	6,888,725
*	VANGUARD INST TG RTM 2060 INST BN	Registered investment company - Institutional mutual funds	#	2,716,227
*	VANGUARD INST TG RTM 2065 INST BO	Registered investment company - Institutional mutual funds	#	257,258
*	VANGUARD INST TG RTM 2070 INST CA	Registered investment company - Institutional mutual funds	#	549
	Subtotal		105,584,532	3,449,796,690
	Calvert Trust Company			
	CALVERT INCOME I AQ	Registered investment company - Mutual funds	#	6,028,545
	CALVERT US LRGCAPCO RESP IDX I AT	Registered investment company - Mutual funds	#	28,932,109
	Subtotal			34,960,654
	Total investments		$ 105,584,532	3,484,757,344
*	Notes receivable from participants - Vanguard	Interest rates ranging from 4.25% to 6.5%; Maturity dates ranging from 2022 to 2031		5,667,620
*	Notes receivable from participants - TIAA	Interest rates ranging from 4.25% to 6.5%; Maturity dates ranging from 2022 to 2031		9,372,410
	Total notes receivable from participants			15,040,030
	Total assets held at the end of the year			$ 3,499,797,374

* These are permitted party-in-interest transactions as defined by ERISA.

\# These are participant-directed investments; IRS and Department of Labor regulations do not require the cost value to be reported for participant-directed investments, except where noted.

The above information was derived from data certified accurate and complete by Vanguard Fiduciary Trust Company, custodian, and Teachers Insurance and Annuity Association and College Retirement Equities Fund, insurance companies.

Plan Name	**COLUMBIA UNIVERSITY VOLUNTARY RETIREMENT SAVINGS PLAN**
Plan Sponsor EIN	**13-5598093**
ERISA Plan #	**009**
Plan Year Ending	**12/31/2022**

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

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