

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
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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.) ☒ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information		
1a	Name of plan GOLDEN GATE NATIONAL PARKS CONSERVANCY RETIREMENT PLAN	1b	Three-digit plan number (PN) ▶ 001
		1c	Effective date of plan 08/11/1981
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) GOLDEN GATE NATIONAL PARKS CONSERVANCY 201 FORT MASON 3RD FLR SAN FRANCISCO, CA 94123	2b	Employer Identification Number (EIN) 94-2781708
		2c	Plan Sponsor's telephone number 415-561-3544
		2d	Business code (see instructions) 813000

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2023	KERRY O'DONNELL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2022)
v. 220413

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
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		3c Administrator's telephone number 4b EIN 4d PN	
5 Total number of participants at the beginning of the plan year		5	802
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)	565
a(2) Total number of active participants at the end of the plan year		6a(2)	361
b Retired or separated participants receiving benefits		6b	0
c Other retired or separated participants entitled to future benefits.....		6c	166
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	527
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	527
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g	398
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2F 2G 2L 2T 3D			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☐ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ 2 A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan GOLDEN GATE NATIONAL PARKS CONSERVANCY RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 GOLDEN GATE NATIONAL PARKS CONSERVANCY	D Employer Identification Number (EIN) 94-2781708	

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

(a) Name of insurance carrier AMERICAN UNITED LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
35-0145825	60895	G76371	317	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	1553367
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	22607119

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 ▶ **GROUP ANNUITY CONTRACT**

b Balance at the end of the previous year **7b** 2237600

c Additions: (1) Contributions deposited during the year	7c(1)	26718	
(2) Dividends and credits.....	7c(2)	0	
(3) Interest credited during the year.....	7c(3)	14091	
(4) Transferred from separate account.....	7c(4)	250372	
(5) Other (specify below)	7c(5)	0	

(6) Total additions..... **7c(6)** 291181

d Total of balance and additions (add lines **7b** and **7c(6)**)..... **7d** 2528781

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	917965	
(2) Administration charge made by carrier.....	7e(2)	3553	
(3) Transferred to separate account.....	7e(3)	53896	
(4) Other (specify below)	7e(4)	0	

(5) Total deductions..... **7e(5)** 975414

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**)..... **7f** 1553367

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 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
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan GOLDEN GATE NATIONAL PARKS CONSERVANCY RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 GOLDEN GATE NATIONAL PARKS CONSERVANCY	D Employer Identification Number (EIN) 94-2781708	

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

(a) Name of insurance carrier THE LINCOLN NATIONAL LIFE INSURANCE COMPANY
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(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
35-0472300	65676	CR21301	97	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 13261	(b) Total amount of fees paid 0
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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 LINCOLN FINANCIAL ADVISORS PO BOX 2239 FORT WAYNE, IN 46801-2239
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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
13261	0	N/A	4

(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	1456631
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	2086034

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 ▶ GROUP VARIABLE ANNUITY W/GUAR FUND

b	Balance at the end of the previous year	7b	1417537
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c	Additions: (1) Contributions deposited during the year	7c(1)		
	(2) Dividends and credits	7c(2)		
	(3) Interest credited during the year	7c(3)	50549	
	(4) Transferred from separate account	7c(4)		
	(5) Other (specify below)	7c(5)	69751	
▶ LOAN REPAYMENTS FORFEITURES TAKEOVERS AND/OR ADJUSTMENTS				

(6) Total additions	7c(6)	120300
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d	Total of balance and additions (add lines 7b and 7c(6))	7d	1537837
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e Deductions:

e	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	2811	
	(2) Administration charge made by carrier	7e(2)	435	
	(3) Transferred to separate account	7e(3)		
	(4) Other (specify below)	7e(4)	77960	

▶ LOAN ISSUE FORFEITURES FEES CORRECTIVE AND/OR ADJUSTMENTS

(5) Total deductions	7e(5)	81206
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f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	1456631
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Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.	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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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 GOLDEN GATE NATIONAL PARKS CONSERVANCY RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 GOLDEN GATE NATIONAL PARKS CONSERVANCY	D Employer Identification Number (EIN) 94-2781708

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
AMERICAN UNITED LIFE INSURANCE CO
35-0145825

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
LINCOLN NATIONAL CORPORATION
35-1140070

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

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

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

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

GLOBAL RETIREMENT PARTNERS

47-1411118

(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?
26 27 28 50 51	NONE	49592	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AMERICAN UNITED LIFE INSURANCE CO

35-0145825

(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 38 50 64 66 67	NONE	640	Yes ☒ No ☐	Yes ☐ No ☒	27980	Yes ☐ No ☒

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

LINCOLN NATIONAL CORPORATION

35-1140070

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13	SERVICE PROVIDER	2295	Yes ☒ No ☐	Yes ☒ No ☐	0	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
AMERICAN UNITED LIFE INSURANCE CO	66 67	27980

(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.
AMERICAN UNITED LIFE INSURANCE CO 35-0145825	ASSET CHARGE

(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.
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan GOLDEN GATE NATIONAL PARKS CONSERVANCY RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 GOLDEN GATE NATIONAL PARKS CONSERVANCY	D Employer Identification Number (EIN) 94-2781708	

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: AUL AMERICAN UNIT TRUST		
b Name of sponsor of entity listed in (a): AMERICAN UNITED LIFE INSURANCE CO		
c EIN-PN 35-0145825-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 22607119
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>		
A Name of plan <u>GOLDEN GATE NATIONAL PARKS CONSERVANCY RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GOLDEN GATE NATIONAL PARKS CONSERVANCY</u>	D Employer Identification Number (EIN) <u>94-2781708</u>	

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	0	0
(2) Participant contributions.....	1b(2)	0	40455
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	0	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common.....	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants).....	1c(7)	0	0
(8) Participant loans.....	1c(8)	0	0
(9) Value of interest in common/collective trusts.....	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts.....	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	30871340	24693153
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	3655137	3009998
(15) Other	1c(15)	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	34526477	27743606

Liabilities

g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	34526477	27743606
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Part II Income and Expense Statement

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

Income

a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	0	
(B) Participants.....	2a(1)(B)	1207328	
(C) Others (including rollovers).....	2a(1)(C)	618	
(2) Noncash contributions.....	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	0	
(B) U.S. Government securities.....	2b(1)(B)	0	
(C) Corporate debt instruments.....	2b(1)(C)	0	
(D) Loans (other than to participants).....	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	0	
(F) Other.....	2b(1)(F)	64640	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	0	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents.....	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)	0	
(B) Other.....	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-5702655
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total	2d		-4430069
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2300345	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		2300345
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	2865	
(3) Investment advisory and management fees	2i(3)	49592	
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		52457
j Total expenses. Add all expense amounts in column (b) and enter total	2j		2352802
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-6782871
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: **ARMANINO LLP**

(2) EIN: **94-6214841**

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a	X		1076014

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		735000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 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 GOLDEN GATE NATIONAL PARKS CONSERVANCY RETIREMENT PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 GOLDEN GATE NATIONAL PARKS CONSERVANCY		D Employer Identification Number (EIN) 94-2781708
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): 35-0145825 35-1140070 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 6
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☐ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....		6a
b Enter the amount contributed by the employer to the plan for this plan year.....		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock?..... ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)..... ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2022 v. 220413		

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 _____

**Golden Gate National Parks Conservancy
Retirement Plan**

Financial Statements
and Supplemental Schedules

December 31, 2022 and 2021
and For the Year Ended December 31, 2022



TABLE OF CONTENTS

	<u>Page No.</u>
Independent Auditor's Report	1 - 4
Statements of Net Assets Available for Benefits	5
Statement of Changes in Net Assets Available for Benefits	6
Notes to Financial Statements	7 - 15
Supplemental Schedules	
Schedule H, Part IV, Line 4(a) - Schedule of Delinquent Participant Contributions	17
Schedule H, Part IV, Line 4(i) - Schedule of Assets (Held at End of Year)	18 - 19



INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator
Golden Gate National Parks Conservancy Retirement Plan
San Francisco, California

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

We have performed audits of the accompanying financial statements of Golden Gate National Parks Conservancy Retirement 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, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of Golden Gate National Parks Conservancy Retirement 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 audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified 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 3 to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these 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) audits 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 Golden Gate National Parks Conservancy Retirement Plan's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audits of the Financial Statements

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

In performing audits in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audits.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audits in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Golden Gate National Parks Conservancy Retirement Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Golden Gate National Parks Conservancy Retirement Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter - Supplemental Schedules Required by ERISA

The supplemental schedules of delinquent participant contributions for the year ended December 31, 2022, and of assets (held at end of year) as of December 31, 2022, (collectively, "supplemental schedules") are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

Armanino LLP

Armanino^{LLP}
St. Louis, Missouri

October 10, 2023

Golden Gate National Parks Conservancy Retirement Plan
Statements of Net Assets Available for Benefits
December 31, 2022 and 2021

	<u>2022</u>	<u>2021</u>
ASSETS		
Investments		
Investments, at fair value	\$ 24,732,446	\$ 30,871,340
Investments, at contract value	<u>3,011,160</u>	<u>3,655,137</u>
Net assets available for benefits	<u>\$ 27,743,606</u>	<u>\$ 34,526,477</u>

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

Golden Gate National Parks Conservancy Retirement Plan
Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2022

Additions to net assets	
Contributions	
Participant	\$ 1,207,328
Rollovers	<u>618</u>
Total contributions	<u>1,207,946</u>
Investment income (loss)	
Net depreciation in fair value of investments	(5,702,655)
Interest and dividends	<u>64,640</u>
Net investment income (loss)	<u>(5,638,015)</u>
Total additions to net assets, including net investment income (loss)	<u>(4,430,069)</u>
Deductions from net assets	
Benefits paid to participants	2,300,345
Administrative expenses	<u>52,457</u>
Total deductions from net assets	<u>2,352,802</u>
Net decrease in net assets available for benefits	(6,782,871)
Net assets available for benefits, beginning of year	<u>34,526,477</u>
Net assets available for benefits, end of year	<u>\$ 27,743,606</u>

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

Golden Gate National Parks Conservancy Retirement Plan
Notes to Financial Statements
December 31, 2022 and 2021

1. DESCRIPTION OF THE PLAN

The following description of the Golden Gate National Parks Conservancy Retirement Plan (the "Plan") provides only general information. Participants should refer to the plan documents for a more complete description of the Plan's provisions.

General

The Plan, a defined contribution savings plan sponsored by Golden Gate National Parks Conservancy (the "Organization," "Employer," or "Plan Sponsor"), pursuant to Section 403(b) and the related provisions of the Internal Revenue Code ("IRC") was established August 11, 1981, and restated May 1, 2019. The Plan is designed to provide participants with a means to defer a portion of their compensation for retirement and to provide benefits in the event of disability, death, termination or financial hardship. The Plan covers all eligible employees of the Organization, as defined in the plan documents. The Plan is subject to the provisions of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA") and subsequent amendments.

Effective March 27, 2020, the Plan administratively adopted the provisions of the Coronavirus Aid, Relief, and Economic Security ("CARES") Act, related to participant loans and distributions. The Organization has until December 31, 2025, to amend the Plan for changes allowed by the CARES Act. The Plan has not been formally amended to adopt these provisions as of December 31, 2022.

An expansion of Setting Every Community Up for Retirement Enhancement Act of 2019 ("SECURE 2.0") was signed into law on December 29, 2022, as part of the Consolidated Appropriations Act of 2023. The effective dates of provisions within SECURE 2.0 vary through 2026. The Plan Sponsor has until the end of the first Plan year beginning on or after January 1, 2025, to amend the Plan for the changes related to SECURE 2.0. The Plan has not been formally amended to adopt these provisions as of the date the financial statements were available to be issued.

Plan administration

The Organization is the administrator of the Plan and, as such, carries out the duties imposed by ERISA. The Organization has delegated certain responsibilities for the operation and administration of the Plan. Custodial and recordkeeping services are provided by American United Life Insurance Company ("AUL"), a OneAmerica company, and The Lincoln National Life Insurance Company ("Lincoln") (collectively the "Custodians"). Effective July 1, 2009, participant and Employer contributions to assets managed by Lincoln ceased, and all contributions thereafter are paid to AUL for investment in the appropriate investment fund or portfolio in accordance with the participant's directives and terms of the Plan.

Golden Gate National Parks Conservancy Retirement Plan
Notes to Financial Statements
December 31, 2022 and 2021

1. DESCRIPTION OF THE PLAN (continued)

Eligibility

All employees of the Organization, except employees who normally work less than 20 hours per week, are eligible to make elective deferral contributions upon hire. After completing one year of service, employees are eligible to receive Employer discretionary matching contributions and nonelective contributions, if any.

Contributions

Participants may elect to contribute through payroll deductions amounts up to 100% of their annual compensation, as defined by the Plan, on a pre-tax basis or after-tax basis (as Roth contributions), up to a maximum amount allowed by the IRC. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions up to the IRC limit. Participants are also allowed to make rollover contributions received from other tax-qualified employer-sponsored retirement plans. Such contributions are deposited in the appropriate investment funds in accordance with the participant's direction and the Plan's provisions.

The Organization may make discretionary matching contributions and discretionary nonelective contributions to Plan participants. There were no discretionary matching or nonelective contributions made by the Company for the year ended December 31, 2022.

Participant accounts

Each participant's account is credited with the participant's contributions, rollover contributions, the Employer's matching or nonelective contributions, if any, and charged with Plan losses and an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined in the plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in all contributions, plus actual earnings thereon.

Forfeitures

Forfeitures may occur as a result of excess Employer contributions. These funds may be allocated as additional discretionary contributions, used to reduce the Organization's discretionary matching or nonelective contributions or to reduce administrative expenses if elected by the Employer, in accordance with the plan document. For the year ended December 31, 2022, no forfeitures were used or allocated to plan participants. Unallocated forfeiture balances as of December 31, 2022 and 2021 were \$81 and \$80, respectively.

Golden Gate National Parks Conservancy Retirement Plan
Notes to Financial Statements
December 31, 2022 and 2021

1. DESCRIPTION OF THE PLAN (continued)

Plan loans

Plan loans (or "policy loans") are available to participants through Lincoln, subject to certain limitations. Plan loans are issued directly from the funds owned by Lincoln and loan proceeds are not removed from a participant's account balance. A portion of a participant's fixed account balance is reserved, or held as collateral, to cover the outstanding loan amount for the period of time the loan is outstanding. Management has determined that these loans are not Plan assets and that such arrangements are exempt transactions. Principal and interest is paid ratably monthly or quarterly by the participant to Lincoln. Policy loans outstanding totaled \$187,665 and \$139,983 as of December 31, 2022 and 2021, respectively. Plan loans outstanding at December 31, 2022, bear interest at rates ranging from 3.75% to 7.00%, and mature at various dates through September 2038.

Payment of benefits

Distributions and withdrawals are payable upon retirement, termination of employment, disability, death, or financial hardship. If a participant's vested account balance is equal to or less than \$1,000 upon termination, the balance is immediately distributed as a lump-sum payment. Upon termination, if a participant's vested account balance is greater than \$1,000 and less than or equal to \$5,000, their balance shall be automatically rolled over into an individual retirement account designated by the plan administrator, unless otherwise elected. If the account balance is greater than \$5,000 upon termination, the participant can consent to either a distribution paid in the form of a lump-sum cash payment, partial payments, a directed rollover into another qualified plan, or to postpone payments to a later date and remain in the Plan as described in the plan documents.

Upon attaining the age of 59 ½ the participant may, while still employed by the Organization, request a withdrawal from their account balance. In certain circumstances as described in the plan document and in accordance with IRS regulations, participants may qualify for a hardship withdrawal.

Administrative expenses

Certain administrative expenses of the Plan, including record-keeping and audit fees, were paid directly by the Organization but may, at the discretion of the plan administrator, be paid by the Plan. The Plan is not required to reimburse the Organization for expenses paid on its behalf. Investment fees, which may vary according to the individual funds selected, are paid out of the assets of the Plan. Transaction fees for certain participant-initiated activity are charged to the specific account of the participant initiating any such transaction.

Golden Gate National Parks Conservancy Retirement Plan
Notes to Financial Statements
December 31, 2022 and 2021

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of accounting

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

Use of estimates

The preparation of financial statements in conformity with U.S. GAAP requires Plan management to make estimates and assumptions that affect the reported amounts of certain reported amounts. Accordingly, actual results could differ from those estimates.

Risks and uncertainties

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

Investment valuation and income recognition

The Plan's investments are reported at fair value, except for the fully benefit-responsive investment contracts, which are reported at contract value. The Custodians certify the accuracy and completeness of all investments and related activity.

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 4 for a description of fair value measurements.

Contract value is the relevant measurement for assets invested in fully benefit-responsive investment contracts because contract value is the amount participants normally receive if they were to initiate permitted transactions under the terms of the Plan. See Note 5 for discussion of the Plan's fully benefit-responsive investment contracts.

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

Contributions and receivables

Contributions from participants are recorded based on the date the contributions have been separated from a participant's pay by the Organization, which is the pay date.

Golden Gate National Parks Conservancy Retirement Plan
Notes to Financial Statements
December 31, 2022 and 2021

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Contributions and receivables (continued)

Employer contributions are recorded in the year they are earned and to coincide with the year in which the Organization records the contribution in its general ledger. The Plan records receivables based upon the contributions recognized, less amounts received by the Plan as of the last day of the Plan year.

Contributions representing participant rollovers from other qualified defined benefit or defined contribution plans are recorded when received by AUL.

Payment of benefits

Benefits are recorded when paid.

Administrative expenses

Administrative expenses are recorded when incurred.

Reclassifications

Certain amounts in the prior period have been reclassified to conform to the current period financial statements and notes to the financial statements' presentation. Investments in the amount of \$30,871,340 were reclassified from fair value Level 1 investments to fair value Level 2 investments. Investments of \$139,983 were reclassified from notes receivable to participants to investments at contract value, to reflect plan loans held as of December 31, 2021. These reclassifications have no effect on the previously reported change in net assets available for benefits.

Subsequent events

The Plan has evaluated subsequent events through October 10, 2023, the date the financial statements were available to be issued. No subsequent events have occurred that would have a material impact on the presentation of the Plan's financial statements.

3. INFORMATION PREPARED AND CERTIFIED BY THE CUSTODIANS (UNAUDITED)

The plan administrator, 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 ERISA. Accordingly, the Custodians, determined to be qualified institutions by the plan administrator, have certified to the completeness and accuracy of:

- Investments reflected on the accompanying statements of net assets available for benefits as of December 31, 2022 and 2021.

Golden Gate National Parks Conservancy Retirement Plan
Notes to Financial Statements
December 31, 2022 and 2021

3. INFORMATION PREPARED AND CERTIFIED BY THE CUSTODIANS (UNAUDITED)
(continued)

- Net depreciation in fair value of investments and interest and dividends reflected on the accompanying statement of changes in net assets available for benefits for the year ended December 31, 2022, and;
- Investments reflected on the schedule of assets (held at end of year) as of December 31, 2022.

Accordingly, as requested by the plan administrator, the Plan's independent auditor performed no audit procedures on the certified information other than to agree the certified information to the related information included in the Plan's financial statements and supplemental schedule of assets (held at end of year).

4. FAIR VALUE MEASUREMENTS

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

The fair value hierarchy levels of inputs that may be used to measure fair value are as follows:

- *Level 1* - Asset value is based on actual quoted prices in active markets for identical assets or liabilities that the Plan has the ability to access at the measurement date.
- *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 full term of the assets or liabilities.
- *Level 3* - Significant unobservable inputs (including management's own assumptions in determining the fair value of investments) are used to arrive at fair value.

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

Following is a description of the valuation methodology used for assets measured at fair value. The valuation methodology used at December 31, 2022 and 2021 has been updated. The update does not have a material effect on the Plan's financial statements.

Golden Gate National Parks Conservancy Retirement Plan
Notes to Financial Statements
December 31, 2022 and 2021

4. FAIR VALUE MEASUREMENTS (continued)

Separate accounts: The investments in Lincoln and AUL separate accounts are valued at the daily closing price as reported by the accumulation unit published each day. Separate accounts held by the Plan are in the form of accumulation units. The value of the accumulation unit is determined at the close of each business day and is directly related to the net asset value of the shares of underlying investment adjusted for any dividends or distributions received and the daily equivalent of any fee charged pursuant to the contract. The value of each accumulation unit is published each business day. Each investment account is invested exclusively in shares of a specific mutual fund or other investment entities as directed by the contract holder and/or the participant. Separate accounts are recorded as Level 2 investments in the fair value hierarchy.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although Plan management believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets, by type, at fair value as of December 31, 2022:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>
Separate accounts	<u>\$ -</u>	<u>\$ 24,732,446</u>	<u>\$ -</u>	<u>\$ 24,732,446</u>

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

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>
Separate accounts	<u>\$ -</u>	<u>\$ 30,871,340</u>	<u>\$ -</u>	<u>\$ 30,871,340</u>

5. INVESTMENT CONTRACTS

The Plan offers the AUL Stable Value Fund ("Stable Value Fund") and the Lincoln Financial Group ("LFG") Fixed Account ("Fixed Account"), fully benefit-responsive investment contracts, as investment options for the Plan's participants. These contracts are included in the financial statements at contract value, as reported by AUL and Lincoln. LFG is an affiliate of Lincoln. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

Contributions to these accounts are maintained in the general accounts of AUL and LFG ("issuers"). The accounts are credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The contract value approximates fair value for these investments as of December 31, 2022 and 2021. The Plan Administrator is not aware of reserves against contract value for credit risk of the contract issuers or otherwise.

Golden Gate National Parks Conservancy Retirement Plan
Notes to Financial Statements
December 31, 2022 and 2021

5. INVESTMENT CONTRACTS (continued)

Certain events limit the ability of the Plan to transact at contract value with the issuers. Such events include the following: (1) amendments to the plan documents (including complete or partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the Plan Sponsor or other Plan Sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the Plan's trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA. The plan administrator does not believe that any events which would limit the Plan's ability to transact at contract value with participants or the issuer are probable of occurring.

The fixed annuity contracts in the Fixed Account are guaranteed against loss of principal, less all withdrawals, including charges and adjustments. The guarantee is based on LFG's ability to meet its financial obligations from the general assets of LFG. Interest is credited daily at an interest rate that will not be less than the guaranteed account minimum interest rate, as defined in the contract. The interest crediting rate is declared on a quarterly basis. The accumulating crediting interest rate was 3.5% as of December 31, 2022 and 2021.

The fixed annuity contracts in the Stable Value Fund are guaranteed against loss of principal, less all withdrawals, including charges and adjustments. The guarantee is based on AUL's ability to meet its financial obligations from the general assets of AUL. Interest is credited daily at an interest rate that will not be less than the guaranteed account minimum interest rate, as defined in the contract. The interest crediting rate is declared on an annual basis. The average accumulating crediting interest rates were 0.77% and 0.80% as of December 31, 2022 and 2021, respectively.

Total fully benefit-responsive funds measured at contract value at December 31 were as follows:

	<u>2022</u>	<u>2021</u>
AUL stable value account	\$ 1,554,529	\$ 2,237,600
Lincoln fixed account	<u>1,456,631</u>	<u>1,417,537</u>
	<u>\$ 3,011,160</u>	<u>\$ 3,655,137</u>

6. TAX STATUS

Effective May 1, 2019, the Plan adopted the OneAmerica Financial Partners, Inc. Volume Submitter 403(b) Plan (the "volume submitter plan"). The Internal Revenue Service informed OneAmerica Financial Partners, Inc. by a letter dated November 22, 2017, stating that the written form of the volume submitter plan is designed in accordance with the applicable sections of the IRC, and is appropriate for use by employers for the benefit of its employees. The plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC and therefore, believes that the Plan is qualified and is tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Golden Gate National Parks Conservancy Retirement Plan
Notes to Financial Statements
December 31, 2022 and 2021

7. RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

ERISA defines party-in-interest similar to a related party under U.S. GAAP, except that ERISA's definition is broader and includes all entities and individuals that provide services to the Plan; however, these entities may not necessarily be related parties. Plan management did not identify any related parties to the Plan that were not also considered to be a party-in-interest. The Plan did not enter into any material related party transactions during the Plan year related to compensation, arrangements, expense allowances or similar items.

Party-in-interest are defined by ERISA as any fiduciary of the Plan, any party rendering services to the Plan, the Employer and certain others. As such, transactions include those with fiduciaries or employees of the Plan, any person who provides services to the Plan, an employer whose employees are covered by the Plan, an employee organization whose members are covered by the Plan, and a person who owns 50% or more of such an employer or employee association or relatives of such persons. Certain fees and expenses of the Plan are paid by the Organization. The Plan is not required to repay expenses paid by the Organization on its behalf.

Certain fees and expenses of the Plan are paid by the Organization. The Plan is not required to repay expenses paid by the Organization on its behalf.

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

Certain Plan investments are owned and managed by the Custodians or their affiliates, therefore, these investment transactions qualify as exempt party-in-interest transactions.

8. PLAN TERMINATION

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

9. DELINQUENT PARTICIPANT CONTRIBUTIONS

As disclosed in the accompanying supplemental schedule, certain participant contributions totaling \$1,076,014 were not remitted to the Plan within the timeframe required by ERISA during the year ended December 31, 2022. The Organization has not made the corrections for the late contributions for the year ended December 31, 2022. The Organization intends to take all measures necessary to protect Plan assets and the tax preferred status of the Plan.

SUPPLEMENTAL SCHEDULES

Golden Gate National Parks Conservancy Retirement Plan
 EIN: 94-2781708; Plan: 001
 Schedule H, Part IV, Line 4(a) - Schedule of Delinquent Participant Contributions
 December 31, 2022

Participant Contributions Transferred Late to Plan	Total that Constitutes Nonexempt Prohibited Transactions				Total Fully Corrected Under VFCP and PTE 2002-51
Check Here if Late Participant Loan Repayments are included:	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP		
☐	\$ 1,076,014	\$ -	\$ -	\$ -	\$ -

Golden Gate National Parks Conservancy Retirement Plan
 EIN: 94-2781708; Plan: 001
 Schedule H, Part IV, Line 4(i) - 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 Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
*	AUL- Stable Value Account	Fully Benefit-Responsive Investment Contract	**	\$ 1,554,529
*	LVIP- Fixed Account	Fully Benefit-Responsive Investment Contract	**	1,456,631
*	AUL- AB VPS Sustainable Global Thematic Portfolio Fund	Separate accounts	**	30,546
*	AUL- American Funds AMCAP Fund	Separate accounts	**	2,160,190
*	AUL- American Funds American Balanced Fund	Separate accounts	**	1,121,304
*	AUL- American Funds Washington Mutual Fund	Separate accounts	**	936,276
*	AUL- American Funds Global Growth Fund	Separate accounts	**	51,379
*	AUL- American Funds Growth Fund	Separate accounts	**	247,211
*	AUL- American Funds Growth-Income Fund	Separate accounts	**	136,354
*	AUL- American Funds International Fund	Separate accounts	**	56,618
*	AUL- DFA International Core Equity Fund	Separate accounts	**	107
*	AUL- DFA Global Equity Fund	Separate accounts	**	1,168,103
*	AUL- Goldman Sachs Small Cap Value Fund	Separate accounts	**	444,987
*	AUL- PGIM Total Return Bond Fund	Separate accounts	**	900,670
*	AUL- TIAA-CREF Lifecycle Index 2010 Fund	Separate accounts	**	3,990
*	AUL- TIAA-CREF Lifecycle Index 2015 Fund	Separate accounts	**	19,031
*	AUL- TIAA-CREF Lifecycle Index 2020 Fund	Separate accounts	**	1,111,628
*	AUL- TIAA-CREF Lifecycle Index 2025 Fund	Separate accounts	**	334,961
*	AUL- TIAA-CREF Lifecycle Index 2030 Fund	Separate accounts	**	1,738,071
*	AUL- TIAA-CREF Lifecycle Index 2035 Fund	Separate accounts	**	424,513
*	AUL- TIAA-CREF Lifecycle Index 2040 Fund	Separate accounts	**	3,520,648
*	AUL- TIAA-CREF Lifecycle Index 2045 Fund	Separate accounts	**	1,053,169
*	AUL- TIAA-CREF Lifecycle Index 2050 Fund	Separate accounts	**	906,372
*	AUL- TIAA-CREF Lifecycle Index 2055 Fund	Separate accounts	**	994,797
*	AUL- TIAA-CREF Lifecycle Index 2060 Fund	Separate accounts	**	332,344
*	AUL- TIAA-CREF Lifecycle Index 2065 Fund	Separate accounts	**	25,683
*	AUL- TIAA-CREF Large-Cap Value Index Institutional Fund	Separate accounts	**	76,185
*	AUL- TIAA-CREF International Equity Index Institutional Fund	Separate accounts	**	35,285
*	AUL- TIAA-CREF Lifecycle Index Inc Fund	Separate accounts	**	1,565
*	AUL- Vanguard 500 Index Admiral Fund	Separate accounts	**	1,461,801
*	AUL- Vanguard Mid-Cap Growth Inv Fund	Separate accounts	**	514,100
*	AUL- Vanguard International Growth Admiral Fund	Separate accounts	**	574,700
*	AUL- Vanguard Emerging Markets Stock Index Admiral Fund	Separate accounts	**	328,634
*	AUL- Vanguard High-Yield Corporate Admiral Fund	Separate accounts	**	418,313
*	AUL- Vanguard Real Estate Index Admiral Fund	Separate accounts	**	193,313
*	AUL- Vanguard Explorer Admiral Fund	Separate accounts	**	267,676
*	AUL- Vanguard Intermediate-Term Treasury Index Admiral Fund	Separate accounts	**	242,790
*	AUL- Vanguard Growth Index Admiral Fund	Separate accounts	**	428,642
*	AUL- Vanguard Mid-Cap Index Admiral Fund	Separate accounts	**	260,963
*	AUL- Vanguard Small Cap Index Admiral Fund	Separate accounts	**	158,295
*	AUL- Vanguard Selected Value Investor Fund	Separate accounts	**	97,855
*	AUL- Vanguard Developed Markets Index Admiral Fund	Separate accounts	**	17,566

Golden Gate National Parks Conservancy Retirement Plan
 EIN: 94-2781708; Plan: 001
 Schedule H, Part IV, Line 4(i) - 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 Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
*	AUL- Vanguard FTSE Social Index Admiral Fund	Separate accounts	**	75,323
*	AUL- Vanguard Lifestrat Growth Investment Fund	Separate accounts	**	167,397
*	AUL- Vanguard Lifestrategy Conservative Growth Investor Fund	Separate accounts	**	24,928
*	AUL- Delaware VIP Smid Cap Core Series Fund	Separate accounts	**	95,338
*	AUL- DFA US Large Company Fund	Separate accounts	**	55,985
*	AUL- DFA World ex US Government Fixed Income Fund	Separate accounts	**	41,823
*	AUL- DFA US Targeted Value Fund	Separate accounts	**	1,761
*	AUL- DFA Global 60/40 Fund	Separate accounts	**	4,669
*	AUL- Delaware VIP High Yield Fund	Separate accounts	**	48,765
*	AUL- Delaware VIP Small Cap Value Fund	Separate accounts	**	38,302
*	AUL- Delaware VIP Diversified Income Fund	Separate accounts	**	35,504
*	AUL- Delaware VIP Value Fund	Separate accounts	**	21,122
*	AUL- Delaware VIP Real Estate Investment Trust Fund	Separate accounts	**	32,504
*	AUL- Fidelity VIP Contrafund Fund	Separate accounts	**	414
*	AUL- Fidelity VIP Growth Fund	Separate accounts	**	3,100
*	AUL- MFS Utilities Fund	Separate accounts	**	1,120
*	LVIP- SSGA Bond Index Fund	Separate accounts	**	12,261
*	LVIP- SSGA S&P 500 Index Fund	Separate accounts	**	146,041
*	LVIP- Delaware Social Awareness Fund	Separate accounts	**	400,386
*	LVIP- Dimensional U.S. Core Equity Fund	Separate accounts	**	210,008
*	LVIP- Delaware Wealth Builder Fund	Separate accounts	**	48,210
*	LVIP- BlackRock Dividend Value Managed Volatility Fund	Separate accounts	**	98,961
*	LVIP- Blended Large Cap Growth Managed Volatility Fund	Separate accounts	**	92,715
*	LVIP- JPMorgan Retirement Income Fund	Separate accounts	**	44,346
*	LVIP- SSGA Small Cap Index Fund	Separate accounts	**	41,907
*	LVIP- T. Rowe Price Structured Mid-Cap Growth Fund	Separate accounts	**	41,238
*	LVIP- Delaware Bond Fund	Separate accounts	**	61,125
*	LVIP- Global Growth Allocation Managed Risk Fund	Separate accounts	**	894
*	LVIP- BlackRock Inflation Protected Bond Fund	Separate accounts	**	1,927
*	LVIP- SSGA Global Tactical Allocation Fund	Separate accounts	**	10,933
*	LVIP- LVIP Baron Growth Opportunities Fund	Separate accounts	**	8,179
*	LVIP- T. Rowe Price 2030 Fund	Separate accounts	**	2,127
*	LVIP- Government Money Market Fund	Separate accounts	**	3,612
*	LVIP- T. Rowe Price Mid Cap Growth Fund	Separate accounts	**	2,744
*	LVIP- T. Rowe Price 2040 Fund	Separate accounts	**	55,470
*	LVIP- Delaware Mid Cap Value Fund	Separate accounts	**	4,672
				<u>\$ 27,743,606</u>

* Indicated party-in-interest to the Plan

** Cost information not provided as all investments are participant directed

Schedule H, Line 4i
Schedule of Assets (Held At End of Year)

Name of Plan: GOLDEN GATE NATIONAL PARKS CONSERVANCY RETIREMENT PLAN
Employer Identification Number: 94-2781708
For plan year (beginning/ending): 01-01-2022 TO 12-31-2022 Plan number: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	AMERICAN FUNDS	AMERFDS AMCAP R6 MUTUAL FUND SHARES	0	2,157,835
	AMERICAN FUNDS	AMERFDS AMERICAN BALANCED R6 MUTUAL FUND SHARES	0	1,120,162
	AMERICAN FUNDS	AMERFDS WASHINGTON MUTUAL R6 MUTUAL FUND SHARES	0	935,886
*	AMERICAN UNITED LIFE INS CO	AUL STABLE VALUE ACCOUNT	0	1,553,367
	DFA	DFA GLOBAL 60/40 I MUTUAL FUND SHARES	0	4,630
	DFA	DFA GLOBAL EQTY I MUTUAL FUND SHARES	0	1,166,974
	DFA	DFA INTL CORE EQUITY I MUTUAL FUND SHARES	0	107
	DFA	DFA US LARGE COMPANY I MUTUAL FUND SHARES	0	55,985
	DFA	DFA US TARGETED VAL I MUTUAL FUND SHARES	0	1,761
	DFA	DFA WORLD EX US GOVT FXD INC I MUTUAL FUND SHARES	0	41,699
	GOLDMAN SACHS	GOLDMANSACHS SMCAPVAL R6 MUTUAL FUND SHARES	0	444,177
	PRUDENTIAL	PGIM TOTAL RETURN BOND R6 MUTUAL FUND SHARES	0	898,947
	TIAA-CREF	TIAA-CREF INTL EQTY INDX INSTL MUTUAL FUND SHARES	0	35,250
	TIAA-CREF	TIAA-CREF LGCAP VAL INDX INSTL MUTUAL FUND SHARES	0	76,072
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2010 I MUTUAL FUND SHARES	0	3,990
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2015 I MUTUAL FUND SHARES	0	18,961
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2020 I MUTUAL FUND SHARES	0	1,109,940
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2025 I MUTUAL FUND SHARES	0	334,961
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2030 I MUTUAL FUND SHARES	0	1,735,198
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2035 I MUTUAL FUND SHARES	0	423,617
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2040 I MUTUAL FUND SHARES	0	3,517,607
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2045 I MUTUAL FUND SHARES	0	1,050,212
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2050 I MUTUAL FUND SHARES	0	902,984
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2055 I MUTUAL FUND SHARES	0	990,971
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2060 I MUTUAL FUND SHARES	0	330,118
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX INC I MUTUAL FUND SHARES	0	1,565
	TIAA-CREF	TIAA-CREF LIFECYCLE IDX 2065 I MUTUAL FUND SHARES	0	24,673
	VANGUARD	VANGUARD 500 INDEX ADM MUTUAL FUND SHARES	0	1,457,930
	VANGUARD	VANGUARD DEV MKTS IDX ADM MUTUAL FUND SHARES	0	17,489
	VANGUARD	VANGUARD EMRG MKTS STK IDX ADM MUTUAL FUND SHARES	0	328,452
	VANGUARD	VANGUARD EXPLORER ADM MUTUAL FUND SHARES	0	267,179
	VANGUARD	VANGUARD FTSE SOCIAL INDEX ADM MUTUAL FUND SHARES	0	74,926
	VANGUARD	VANGUARD GROWTH INDEX ADM MUTUAL FUND SHARES	0	427,425
	VANGUARD	VANGUARD HIGH-YIELD CORP ADM MUTUAL FUND SHARES	0	417,965
	VANGUARD	VANGUARD INT-TERM TREASURY ADM MUTUAL FUND SHARES	0	242,565
	VANGUARD	VANGUARD INTL GR ADM MUTUAL FUND SHARES	0	574,013
	VANGUARD	VANGUARD LIFESTRAT CSRV GR INV MUTUAL FUND SHARES	0	24,687
	VANGUARD	VANGUARD LIFESTRAT GRTH INV MUTUAL FUND SHARES	0	167,301
	VANGUARD	VANGUARD MID CAP GROWTH INV MUTUAL FUND SHARES	0	513,537

	VANGUARD	VANGUARD MID CAP INDEX ADM MUTUAL FUND SHARES	0	260,575
	VANGUARD	VANGUARD REIT INDEX ADM MUTUAL FUND SHARES	0	193,030
	VANGUARD	VANGUARD SELECTED VALUE INV MUTUAL FUND SHARES	0	97,751
	VANGUARD	VANGUARD SMALL CAP INDEX ADM MUTUAL FUND SHARES	0	158,012
	LINCOLN FINANCIAL GROUP	AB VPS GLOBAL THEMATIC GROWTH	0	30,546
	LINCOLN FINANCIAL GROUP	AMERICAN FUNDS GLOBAL GROWTH	0	51,379
	LINCOLN FINANCIAL GROUP	AMERICAN FUNDS GROWTH	0	247,211
	LINCOLN FINANCIAL GROUP	AMERICAN FUNDS GROWTH-INCOME	0	136,354
	LINCOLN FINANCIAL GROUP	AMERICAN FUNDS INTERNATIONAL	0	56,618
	LINCOLN FINANCIAL GROUP	DELAWARE VIP DIVERSIFIED INCOME	0	35,504
	LINCOLN FINANCIAL GROUP	DELAWARE VIP HIGH YIELD	0	48,765
	LINCOLN FINANCIAL GROUP	DELAWARE VIP REIT	0	32,504
	LINCOLN FINANCIAL GROUP	DELAWARE VIP SMALL CAP VALUE	0	38,302
	LINCOLN FINANCIAL GROUP	DELAWARE VIP SMID CAP CORE SERIES	0	95,338
	LINCOLN FINANCIAL GROUP	DELAWARE VIP VALUE	0	21,122
	LINCOLN FINANCIAL GROUP	FIDELITY VIP CONTRAFUND	0	415
	LINCOLN FINANCIAL GROUP	FIDELITY VIP GROWTH	0	3,100
*	LINCOLN FINANCIAL GROUP	FIXED ACCOUNT	0	1,456,631
	LINCOLN FINANCIAL GROUP	LVIP BARON GROWTH OPPORTUNITIES	0	8,179
	LINCOLN FINANCIAL GROUP	LVIP BLACKROCK DIVIDEND VALUE MNGDVLTLTY	0	98,961
	LINCOLN FINANCIAL GROUP	LVIP DELAWARE MID CAP VALUE FUND	0	4,672
	LINCOLN FINANCIAL GROUP	LVIP BLENDED LRG CAP GROWTH MNGD VOLTLY	0	92,715
	LINCOLN FINANCIAL GROUP	LVIP DELAWARE BOND	0	61,125
	LINCOLN FINANCIAL GROUP	LVIP DELAWARE SOCIAL AWARENESS	0	400,386
	LINCOLN FINANCIAL GROUP	LVIP SSGA BOND INDEX	0	12,261
	LINCOLN FINANCIAL GROUP	LVIP DELAWARE WEALTH BUILDER FUND	0	48,210
	LINCOLN FINANCIAL GROUP	LVIP DIMENSIONAL U.S. CORE EQUITY 1	0	210,008
	LINCOLN FINANCIAL GROUP	LVIP GLOBAL GROWTH ALLOCATION MANGD RISK	0	894
	LINCOLN FINANCIAL GROUP	LVIP GOVERNMENT MONEY MARKET	0	3,612
	LINCOLN FINANCIAL GROUP	LVIP JPMORGAN RETIREMENT INCOME FUND	0	44,346
	LINCOLN FINANCIAL GROUP	LVIP T ROWE PRICE 2030 FUND	0	2,127
	LINCOLN FINANCIAL GROUP	LVIP T ROWE PRICE 2040 FUND	0	55,470
	LINCOLN FINANCIAL GROUP	LVIP MONDRIAN INTERNATIONAL VALUE	0	1,927
	LINCOLN FINANCIAL GROUP	LVIP SSGA GLBL TACTICAL ALLOCTN MGD VLTY	0	10,933
	LINCOLN FINANCIAL GROUP	LVIP SSGA S&P 500 INDEX	0	146,041
	LINCOLN FINANCIAL GROUP	LVIP SSGA SMALL-CAP INDEX	0	41,907
	LINCOLN FINANCIAL GROUP	LVIP T. ROWE PRICE MID CAP GROWTH	0	2,744
	LINCOLN FINANCIAL GROUP	LVIP T. ROWE PRICE STRUCTURED MID CAP GROWTH	0	41,238
	LINCOLN FINANCIAL GROUP	MFS UTILITIES	0	1,120