

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 OTTAWA UNIVERSITY DC PLAN	1b Three-digit plan number (PN) ▶ 001
	1c Effective date of plan 08/01/1975
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) OTTAWA UNIVERSITY 1001 SOUTH CEDAR SUITE 20 OTTAWA, KS 66067-3341	2b Employer Identification Number (EIN) 48-0543772 2c Plan Sponsor's telephone number 785-229-1082 2d Business code (see instructions) 611000

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2023	CRAIG KISPERT
	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
		3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN
5 Total number of participants at the beginning of the plan year		5 695
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) 349
a(2) Total number of active participants at the end of the plan year		6a(2) 496
b Retired or separated participants receiving benefits		6b 2
c Other retired or separated participants entitled to future benefits.....		6c 364
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 862
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 14
f Total. Add lines 6d and 6e		6f 876
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g 660
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h 14
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: 2L 2M 2F 2G		
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 OTTAWA UNIVERSITY DC PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 OTTAWA UNIVERSITY	D Employer Identification Number (EIN) 48-0543772

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

(a) Name of insurance carrier TIAA-CREF
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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
13-1624203	69345	365968	420	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
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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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

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

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

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

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

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

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

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

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

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

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	7756583
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	13473190

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount..... Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☒ guaranteed investment (4) ☐ other ▶

b Balance at the end of the previous year	7b	8237396
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c Additions: (1) Contributions deposited during the year	7c(1)	38705	
(2) Dividends and credits	7c(2)		
(3) Interest credited during the year	7c(3)	327502	
(4) Transferred from separate account	7c(4)	404843	
(5) Other (specify below)	7c(5)	12084	
▶ PLAN SERVICING CREDIT			

(6) Total additions	7c(6)	783134
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d Total of balance and additions (add lines 7b and 7c(6))	7d	9020530
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	790142	
(2) Administration charge made by carrier	7e(2)		
(3) Transferred to separate account	7e(3)	473805	
(4) Other (specify below)	7e(4)		

(5) Total deductions	7e(5)	1263947
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	7756583
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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 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 OTTAWA UNIVERSITY DC PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 OTTAWA UNIVERSITY	D Employer Identification Number (EIN) 48-0543772

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 LINCOLN NATIONAL CORPORATION

(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	89630100007	341	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.
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(a) Total amount of commissions paid	(b) Total amount of fees paid

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

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end.....	4	834033
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	12852065

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount..... Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year	7b	391110
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c	Additions: (1) Contributions deposited during the year	7c(1)	28574	
	(2) Dividends and credits.....	7c(2)		
	(3) Interest credited during the year.....	7c(3)	8522	
	(4) Transferred from separate account.....	7c(4)	582135	
	(5) Other (specify below)	7c(5)	49677	

▶ REVENUE CREDIT

(6) Total additions.....	7c(6)	668908
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d	Total of balance and additions (add lines 7b and 7c(6))	7d	1060018
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	6617
(2) Administration charge made by carrier.....	7e(2)	1704
(3) Transferred to separate account.....	7e(3)	
(4) Other (specify below)	7e(4)	217664

▶ OTHER: UNALLOCATED CONTRACTS

(5) Total deductions.....	7e(5)	225985
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f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	834033
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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 OTTAWA UNIVERSITY DC PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 OTTAWA UNIVERSITY	D Employer Identification Number (EIN) 48-0543772	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
LINCOLN NATIONAL CORPORATION
35-0472300

(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)

LINCOLN NATIONAL CORPORATION

P.O. BOX 7877
FORT WAYNE, IN 46802

35-0472300

(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?
64 65	RECORDKEEPER	68960	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(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 OTTAWA UNIVERSITY DC PLAN	B Three-digit plan number (PN) ►	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 OTTAWA UNIVERSITY	D Employer Identification Number (EIN) 48-0543772	

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

a Name of MTIA, CCT, PSA, or 103-12 IE: TIAA REAL ESTATE		
b Name of sponsor of entity listed in (a): TIAA-CREF		
c EIN-PN 13-1624203-004	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 743265
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 01/01/2022 and ending 12/31/2022		
A Name of plan OTTAWA UNIVERSITY DC PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 OTTAWA UNIVERSITY	D Employer Identification Number (EIN) 48-0543772	

Part I	Asset and Liability Statement
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.	
Assets	(a) Beginning of Year (b) End of Year
a Total noninterest-bearing cash.....	1a
b Receivables (less allowance for doubtful accounts):	
(1) Employer contributions.....	1b(1)
(2) Participant contributions.....	1b(2)
(3) Other.....	1b(3)
c General investments:	
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)
(2) U.S. Government securities	1c(2)
(3) Corporate debt instruments (other than employer securities):	
(A) Preferred	1c(3)(A)
(B) All other	1c(3)(B)
(4) Corporate stocks (other than employer securities):	
(A) Preferred	1c(4)(A)
(B) Common.....	1c(4)(B)
(5) Partnership/joint venture interests	1c(5)
(6) Real estate (other than employer real property)	1c(6)
(7) Loans (other than to participants).....	1c(7)
(8) Participant loans.....	1c(8)
(9) Value of interest in common/collective trusts.....	1c(9)
(10) Value of interest in pooled separate accounts	1c(10)
(11) Value of interest in master trust investment accounts.....	1c(11)
(12) Value of interest in 103-12 investment entities	1c(12)
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)
(15) Other	1c(15)

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	44821189	34985478

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	44821189	34985478
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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) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	156232	
(B) Participants	2a(1)(B)	1458294	
(C) Others (including rollovers)	2a(1)(C)	55132	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1669658
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	2335	
(F) Other	2b(1)(F)	545186	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		547521
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	395487	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		395487
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		65067
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-6924678
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		-4246945
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	5513824	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		5513824
f Corrective distributions (see instructions)	2f		4365
g Certain deemed distributions of participant loans (see instructions)	2g		1617
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	68960	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		68960
j Total expenses. Add all expense amounts in column (b) and enter total	2j		5588766
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-9835711
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: RUBINBROWN, LLP

(2) EIN: 43-0865316

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
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.)		X	
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.)		X	
4d		X	
e Was this plan covered by a fidelity bond?	X		1000000
4e	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
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?		X	
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 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 OTTAWA UNIVERSITY DC PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 OTTAWA UNIVERSITY		D Employer Identification Number (EIN) 48-0543772
Part I Distributions		
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 82-2826183 35-0472300		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....		3
Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)		
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....		6a
b Enter the amount contributed by the employer to the plan for this plan year.....		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A		
Part III Amendments		
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No		
Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.		
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock?..... ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)..... ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 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
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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 _____

OTTAWA UNIVERSITY DC PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2022

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Independent Auditors' Report

Plan Administrator
Ottawa University DC Plan
Ottawa, Kansas

Scope And Nature Of The ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of Ottawa University DC Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statement of net assets available for benefits as of December 31, 2022 and 2021, and the related statement of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of Ottawa University DC 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 Ottawa University DC 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 and for the years ended December 31, 2022 and 2021, 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 Auditors' Responsibilities For The Audit Of The Financial Statements section:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying financial statements related to assets held by and certified to by qualified institutions agrees to, or is derived from, in all material respects, the information prepared and certified by institutions that management has determined meet 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 Auditors' Responsibilities For The Audit Of The Financial Statements section of our report. We are required to be independent of Ottawa University DC 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 for the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Ottawa University DC Plan's ability to continue as a going concern for 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.

Auditors' Responsibilities For The Audit Of The Financial Statements

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

In performing an audit in accordance with auditing standards generally accepted in the United States of America, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Ottawa University DC 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 Ottawa University DC 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 certifications, 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 audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Other Matter - Supplemental Schedule Required By ERISA

The supplemental schedule of assets held at end of year as of December 31, 2022 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the 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 schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit 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 auditing standards generally accepted in the United States of America. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

RubinBrown LLP

October 13, 2023

OTTAWA UNIVERSITY DC PLAN

STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	2022	2021
Assets		
Investments - At Fair Value		
Variable annuity accounts	\$ 13,473,191	\$ 18,497,972
Mutual funds	12,852,065	17,969,235
Guaranteed investment accounts	6,536,751	6,789,918
Total Investments - At Fair Value	32,862,007	43,257,125
Fully Benefit-Responsive Investment Contracts - At Contract Value	2,053,865	1,447,478
Receivables		
Participant contributions	—	76,685
Notes receivable from participants	69,606	39,901
Total Receivables	69,606	116,586
Net Assets Available For Benefits	\$ 34,985,478	\$ 44,821,189

OTTAWA UNIVERSITY DC PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	For The Years Ended December 31,	
	2022	2021
Additions To Net Assets Attributed To:		
Contributions		
Employer	\$ 156,232	\$ 292,197
Participants	1,458,294	1,301,602
Rollovers	55,132	149,459
Total Contributions	1,669,658	1,743,258
Deductions From Net Assets Attributed To:		
Benefits paid to participants	5,518,220	2,071,606
Administrative expenses	72,382	54,848
Total Deductions	5,590,602	2,126,454
Investment Income (Loss)		
Interest and dividends	79,346	36,705
Net change in fair value of investments	(5,995,549)	4,862,105
Net Investment Income (Loss)	(5,916,203)	4,898,810
Interest Income On Notes Receivable From Participants	718	893
Net Increase (Decrease)	(9,835,711)	4,517,400
Net Assets Available For Benefits - Beginning Of Year	44,821,189	40,303,789
Net Assets Available For Benefits - End Of Year	\$ 34,985,478	\$ 44,821,189

OTTAWA UNIVERSITY DC PLAN

NOTES TO FINANCIAL STATEMENTS

December 31, 2022 And 2021

1. Description Of The Plan

The following description of the Ottawa University DC Plan (the Plan) provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan sponsored by Ottawa University (the University) for the benefit of its employees. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Teachers Insurance And Annuity Association (TIAA) served as a Plan custodian and recordkeeper through March 29, 2021. Effective March 29, 2021, certain Plan assets were transferred to Lincoln Financial Group Trust Company, Inc. (Lincoln) and Lincoln became the Plan's recordkeeper. After March 29, 2021, all employee and employer contributions were remitted to Lincoln. At the end of 2022 and 2021, Plan investments were held at both TIAA and Lincoln.

TIAA serves as the issuer of various annuity contracts held by the Plan and prior to March 30, 2021, was the recordkeeper of the Plan. Effective March 29, 2021, Lincoln is the recordkeeper of the Plan.

Eligibility

Employees are immediately eligible to participate in the Plan as a contributing participant upon commencement of employment with the University. Seasonal employees, interns, adjuncts, employees who normally work less than 20 hours per week and students who are employed by the University are generally excluded from participation in the Plan. Participants are required to have one day of service to qualify for employer matching contributions.

Contributions

The Plan permits eligible employees through a salary deferral election to make annual contributions of up to 100% of eligible pretax compensation. The Plan also permits participants to make after-tax (Roth) contributions. Upon completing three years of service and attaining the age of 30, the employee is required to make mandatory employee salary deferral contributions in the amount of 5% of eligible compensation. Participants may elect to contribute more than the mandatory 5% of eligible compensation.

OTTAWA UNIVERSITY DC PLAN

Notes To Financial Statements (*Continued*)

Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). The Plan allows for special code section 403(b) catch-up contributions for those participants with 15 years of service.

Contributions are subject to certain Internal Revenue Service (IRS) limitations.

The University may make discretionary contributions to the Plan as determined annually. For the years ended December 31, 2022 and 2021, the discretionary matching contributions was 100% of participant contributions up to 2% of eligible compensation.

Participant Investment Account Options

Investment account options available include variable annuity accounts, mutual funds and guaranteed investment accounts. Each participant has the option of directing their deferrals, rollover and employer contributions into any of the investment account options selected by the University, and may change the allocation to the extent permitted by the individual agreements.

Vesting

Participants are immediately vested in their voluntary contributions plus actual earnings thereon. The portion of the participants' accounts attributable to the University's discretionary contributions vests as follows:

Years Of Service	Vesting Percentage
1	0%
2	0%
3	100%

Forfeited Accounts

Forfeitures of nonvested balances in participants' accounts are used to reduce the University's discretionary contributions. During the year ended December 31, 2022, \$165,341 of forfeitures were used to reduce University contributions. No forfeitures were used to reduce University contributions during the year ended December 31, 2021. As of December 31, 2021, forfeited nonvested accounts totaled \$156,172. There are no forfeited nonvested accounts available for use at December 31, 2022.

OTTAWA UNIVERSITY DC PLAN

Notes To Financial Statements (*Continued*)

Participant Accounts

Each participant's account is credited with the participant's contributions, the University's contributions and allocations of Plan earnings and charged with withdrawals, an allocation of Plan losses and administrative expenses. Allocations are based on participant earnings or account balances, as defined by the Plan. The benefits to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Notes Receivable From Participants

The Plan allows participants to borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of the participant's vested account balance. A participant may not have more than three loans outstanding at any time. The loans are secured by the balance in the participant's accounts and bear annual interest at the prime rate in effect in the month the loan is initiated plus 1%. Rates on outstanding loans at December 31, 2022 range from 4.25% to 7.25% per annum. Loans must be repaid within five years. Principal and interest are paid ratably through periodic payroll deductions.

Benefits

Amounts in a participant's account and earnings or losses thereon are distributed upon retirement, death, disability or other termination of employment. The form of retirement benefit payments are either a lump-sum payment, partial or installment payments or the purchase of an annuity.

Active participants who experience a qualifying financial hardship may withdraw all or part of their account. Hardship withdrawals will be approved only if they conform to Plan provisions and established IRS safe harbors.

Prior to termination, a participant may withdraw all or any portion of their vested account balance if the participant has attained age 59 ½. Additionally, active participants may also take a withdrawal from their rollover account.

Administrative Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the University.

2. Summary Of Significant Accounting Policies

Basis Of Accounting

The financial statements of the Plan are presented on the accrual basis of accounting.

Estimates And Assumptions

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of additions to and deductions from net assets during the reporting period. Actual results could differ from those estimates.

Investment Valuation And Income Recognition

The Plan's investments are stated at fair value, which 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 discussion of fair value measurements.

Investment contracts held by a defined contribution plan are generally reported at contract value except for those contracts that are non-fully benefit-responsive. In that instance, these contracts are required to be reported at fair value. A portion of the Plan's investment in the TIAA Traditional Annuity account is not a fully benefit-responsive investment contract and is reported at fair value in the statement of net assets available for benefits. The remainder of the balance in the TIAA Traditional Annuity and the investments in the TIAA Stable Value investment and the Lincoln Stable Value Account are fully-benefit responsive and have been reported at contract value in the statement of net assets available for benefits.

Interest income is recorded as earned on the accrual basis. Dividends are recorded on the ex-dividend date. Purchases and sales of securities are recorded on a trade date basis. Net change in fair value of investments represents the difference between the aggregate fair value of investments at year end and the values at the beginning of the year and includes any realized gains and losses in securities that were bought and sold during the year.

Notes Receivable From Participants

For notes receivable from participants that are issued by the Plan, these notes receivable are measured at their unpaid principal balance plus any accrued, but unpaid interest. Delinquent participant notes are reclassified as distributions based upon the terms of the Plan Agreement.

Prior to the Plan permitting loans beginning in 2020, TIAA issued loans to Plan participants outside the scope of the Plan. Participants pledged, as security, a portion of their balance in the TIAA Traditional Annuity account, which represents 110% of the outstanding loan balance. These loans are not considered Plan assets. Participant account balances held as collateral for loans at December 31, 2022 and 2021 were approximately \$41,400 and \$39,900, respectively. In the event that a participant defaults on one of these loans, TIAA will continue to track the outstanding balance on the loan and include it on the statements of net assets available for benefits. Defaulted loans reported on the statement of net assets available for benefits totaled \$37,678 and \$36,228 at December 31, 2022 and 2021, respectively.

Payment Of Benefits

Benefits are recorded when paid.

Subsequent Events

Management evaluates subsequent events through the date financial statements were available for issue, which is the date of the Independent Auditors' Report.

3. Certified Investment Information

Certain information related to investments and notes receivable from participants disclosed in the accompanying financial statements and supplemental schedule, including investments and notes receivable from participants held at December 31, 2022 and 2021, and net change in fair value of investments and interest and dividends for the years then ended, was obtained or derived from information supplied to the Plan Administrator and certified as complete and accurate by Teachers Insurance And Annuity Association and College Retirement Equities Fund (TIAA-CREF) and by Lincoln. This information has not been audited by the Plan's independent auditors.

OTTAWA UNIVERSITY DC PLAN

Notes To Financial Statements (*Continued*)

Accordingly, as permitted by CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information that appears throughout the financial statements and supplemental schedule related to the following assets as of December 31:

	<u>2022</u>	<u>2021</u>
Investments at fair value:		
Guaranteed investment accounts	\$ 6,536,751	\$ 6,789,918
Mutual funds	12,852,065	17,969,235
Variable annuity accounts	13,473,191	18,497,972
Fully benefit-responsive investment contracts at contract value	2,053,865	1,447,478
Notes receivable from participants	69,606	39,901

TIAA-CREF and Lincoln also certified to the completeness and accuracy related the following investment income (loss) and interest income on notes receivable from participants for the years ended December 31:

	<u>2022</u>	<u>2021</u>
Interest and dividends	\$ 79,346	\$ 36,705
Net change in fair value of investments	(5,995,549)	4,862,105
Interest income on notes receivable from participants	718	893

Guaranteed Investment Contracts

The Plan offers as investment options the TIAA Stable Value and the TIAA Traditional Annuity. The TIAA Traditional Annuity is offered through a variety of contract types, including: the Group Retirement Annuity (GRA); Retirement Choice Annuity (RC); Group Supplemental Retirement Annuity (GSRA); Supplemental Retirement Annuity (SRA); and the Retirement Choice Plus Annuity (RCP).

The TIAA Traditional Annuity and the TIAA Stable Value (collectively, the Annuities) are fixed-dollar annuity and investment products offered by TIAA, an insurance company. The Annuities are maintained in the TIAA general account. Contributions to one of the Annuities purchases a contractual or guaranteed amount of future benefits for the participants and are secured by the general assets of TIAA.

Group Retirement Annuity And Retirement Choice Annuity

The GRA and RC are not fully benefit-responsive and reported at fair value, which approximates contract value as estimated by TIAA. The GRA and RC contain liquidity restrictions where lump-sum withdrawals are permitted within 120 days following termination of employment, are subject to a 2.5% surrender charge, and contain certain limitations on the number of periodic installment payments.

Group Supplemental Retirement Annuity, Supplemental Retirement Annuity, And Retirement Choice Plus Annuity

The GSRA, SRA and RCP are fully benefit-responsive and are reported at contract value. The contract value equals the accumulated cash contributions, interest credited to the Plan's contracts, and transfers, if any, less any withdrawals and transfers, if any.

The GSRA and SRA provide a guarantee of principal, a guaranteed minimum rate of interest of 3% and the potential for additional interest, if declared by TIAA. The RCP provides a guarantee of principal, a guaranteed minimum rate of interest between 1% to 3% redetermined annually each March 1, and the potential for additional interest, if declared by TIAA. Additional interest, when declared, remains in effect for the "declaration year," which begins each March 1. Additional interest is not guaranteed for future years. The crediting rate is supported by the investment performance of a large, diversified portfolio, is correlated with the highest quality debt security yields, and is adjusted for contract liquidity.

TIAA Stable Value

The TIAA Stable Value is fully benefit-responsive and reported at contract value. The contract value equals the accumulated cash contributions, interest credited to the Plan's contracts, and transfers, if any, less any withdrawals and transfers, if any.

The TIAA Stable Value provides a guarantee of principal, a guaranteed minimum rate of interest between 1% to 3% redetermined annually each March 1, and the potential for additional interest, if declared by TIAA. Additional interest, when declared, remains in effect for the "declaration year," which begins each March 1. Additional interest is not guaranteed for future years. The crediting rate is supported by the investment performance of a large, diversified portfolio, is correlated with the highest quality debt security yields, and is adjusted for contract liquidity.

Lincoln Stable Value Account

The Plan has a fully benefit-responsive investment contract (FBRIC) with Lincoln. Lincoln maintains the contributions in a general account. The accounts are credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. Lincoln is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan.

The contract meets the FBRIC criteria and, therefore, is reported at contract value. Contract value, as reported to the Plan by Lincoln, represents contributions under the contract plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

The minimum guaranteed annual interest rate is 1% for all premiums remitted to the Plan under the contract. The crediting interest rate is calculated on a quarterly basis.

4. Fair Value Measurements

The Plan utilizes an established framework for measuring fair value. That framework 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 unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described below:

- | | |
|---------|---|
| Level 1 | Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access. |
| Level 2 | Inputs to the valuation methodology include: <ul style="list-style-type: none">• Quoted prices for similar assets or liabilities in active markets;• Quoted prices for identical or similar assets or liabilities in inactive markets;• Inputs other than quoted prices that are observable for the asset or liability; |

- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

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

The following is a description of the valuation methodologies used for assets measured at fair value:

Guaranteed Investment Account

Valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer.

Mutual Funds

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

Variable Annuity Accounts

Certain variable annuity accounts are valued at the daily closing price as reported by the investment. These variable annuity accounts held by the Plan are open-end registered investment companies that are registered with the Securities and Exchange Commission. These investments are required to publish their daily NAV and to transact at that price. These variable annuity accounts held by the Plan are deemed to be actively traded.

OTTAWA UNIVERSITY DC PLAN

Notes To Financial Statements (*Continued*)

The remainder of the variable annuity accounts are valued at the NAV of units held by the Plan at year end. The individual variable annuity accounts are comprised, primarily, of shares of registered investment companies held through subaccounts of a separate account of an insurance company at December 31, 2022 and 2021, respectively. The Plan has concluded that the NAV as adjusted (for mutual fund dividends, mutual fund splits and administrative maintenance charges and other items) and reported by the insurance company approximates fair value of the investments. The investments are redeemable daily at the adjusted NAV under agreements with the insurance company. However, it is possible that the redemption rights may be restricted or eliminated in the future. Due to the nature of the investments, changes in the market conditions, liquidity requirements, and the economic environment may significantly affect the NAV of the variable annuity accounts and, consequently, the fair value of the Plan's investments.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2022 and 2021:

	December 31, 2022			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 12,852,065	\$ —	\$ —	\$ 12,852,065
Variable annuity accounts	11,386,001	—	—	11,386,001
Guaranteed investment accounts	—	—	6,536,751	6,536,751
Total investments in the fair value hierarchy	\$ 24,238,066	\$ —	\$ 6,536,751	30,774,817
Investments measured at net asset value per share/unit (a)				2,087,190
Total Investments At Fair Value				\$ 32,862,007

OTTAWA UNIVERSITY DC PLAN

Notes To Financial Statements (*Continued*)

	December 31, 2021			Total
	Level 1	Level 2	Level 3	
Mutual funds	\$ 17,969,235	\$ —	\$ —	\$ 17,969,235
Variable annuity accounts	15,714,808	—	—	15,714,808
Guaranteed investment accounts	—	—	6,789,918	6,789,918
Total investments in the fair value hierarchy	\$ 33,684,043	\$ —	\$ 6,789,918	40,473,961
Investments measured at net asset value per share/unit (a)				2,783,164
Total Investments At Fair Value				\$ 43,257,125

- (a) Certain investments that are measured at fair value using the net asset value per share (or its equivalent) as a practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statement of net assets available for benefits.

During 2022 and 2021, there were no transfers of assets into or out of Level 3 of the Fair Value hierarchy. During 2022 and 2021, there were \$175,227 and \$282,463, respectively, purchases or issues of level 3 assets.

The following table represents the Plan's Level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments, the significant unobservable inputs and the ranges of values for those inputs as of December 31, 2022:

Instrument	Fair Value	Principal Valuation Technique	Unobservable Inputs	Range Of Significant Input Values
Guaranteed Investment Accounts	\$ 6,536,751	Discounted cash flow	Risk-adjusted discount rate applied	3.00% - 6.50%
		Theoretical transfer (exit value)		

OTTAWA UNIVERSITY DC PLAN

Notes To Financial Statements (*Continued*)

The following table represents the Plan's Level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments, the significant unobservable inputs and the ranges of values for those inputs as of December 31, 2021:

Instrument	Fair Value	Principal Valuation Technique	Unobservable Inputs	Range Of Significant Input Values
Guaranteed Investment Accounts	\$ 6,789,918	Discounted cash flow Theoretical transfer (exit value)	Risk-adjusted discount rate applied	2.00% - 3.90%

There have been no changes in the methodologies used at December 31, 2022 or 2021.

5. Income Tax Status

The Plan adopted a volume submitter 403(b) plan document sponsored by New Pinnacle Consulting Group. New Pinnacle Consulting Group received an opinion letter dated March 31, 2017 from the IRS stating that the volume submitter 403(b) plan is designed in accordance with applicable sections of the Internal Revenue Code (IRC). The University has determined that it is eligible to, and has chosen to, rely on the current IRS volume submitter 403(b) plan opinion letter. The Plan Administrator believes that the Plan is currently designed and being operated in compliance with applicable requirements of the IRC and, as such, is exempt from Federal income taxes.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan. Management evaluated the Plan's tax positions and concluded that the Plan had maintained its tax exempt status and had taken no uncertain tax positions that require recognition or disclosure in the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits in progress for any tax periods.

6. Plan Termination

Although it has not expressed any intent to do so, the University has the right under the Plan to terminate the Plan at any time subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

7. Party In Interest Transactions

Certain Plan investments are managed by Lincoln and certain Plan investments managed by entities related to TIAA; both Lincoln and TIAA are Plan custodians. The Plan's investments in annuities are maintained in TIAA's general account. The related transactions with Lincoln and TIAA and their related entities qualify as allowable party in interest transactions.

Certain employees have outstanding loans with the Plan as of December 31, 2022 and 2021. These loans are considered party in interest transactions.

8. Risks And Uncertainties

The Plan invests in various investment securities, which in general 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 statement of net assets available for benefits.

Supplemental Schedule

OTTAWA UNIVERSITY DC PLAN

E.I.N.: 48-0543772 PLAN NUMBER: 001 SCHEDULE OF ASSETS HELD AT END OF YEAR

Page 1 Of 2
December 31, 2022

Identity Of Issuer, Borrower, Lessor Or Similar Party	Description Of Investment	Units	Cost ⁽¹⁾	Current Value
Guaranteed Investment Accounts				
Teachers Insurance And Annuity Association *	TIAA Traditional Non Benefit Responsive	—	\$	6,536,751
Teachers Insurance And Annuity Association *	TIAA Traditional Benefit Responsive	—		1,158,202
Teachers Insurance And Annuity Association *	TIAA Traditional Benefit Responsive 2	—		23,952
Teachers Insurance And Annuity Association *	Plan Loan Default Fund	—		37,678
Total Guaranteed Investment Accounts				<u>7,756,583</u>
Variable Annuity Accounts				
Teachers Insurance And Annuity Association *	TIAA Real Estate	1,335		743,265
Teachers Insurance And Annuity Association *	TIAA Access Lifecycle 2010 T4	1		2
Teachers Insurance And Annuity Association *	TIAA Access Lifecycle 2015 T4	201		9,417
Teachers Insurance And Annuity Association *	TIAA Access Lifecycle 2020 T4	1		61
Teachers Insurance And Annuity Association *	TIAA Access Lifecycle 2025 T4	9		450
Teachers Insurance And Annuity Association *	TIAA Access Lifecycle 2030 T4	444		22,455
Teachers Insurance And Annuity Association *	TIAA Access Lifecycle 2035 T4	2,455		129,505
Teachers Insurance And Annuity Association *	TIAA Access Lifecycle 2040 T4	171		9,486
Teachers Insurance And Annuity Association *	TIAA Access Lifecycle 2045 T4	961		52,843
Teachers Insurance And Annuity Association *	TIAA Access Lifecycle 2050 T4	350		19,139
Teachers Insurance And Annuity Association *	TIAA Access Lfcyle Rtmt Inc T4	1		2
Teachers Insurance And Annuity Association *	TIAA Access Core Bond T4	1,676		61,608
Teachers Insurance And Annuity Association *	TIAA Access Core Bond Plus T4	2,520		93,831
Teachers Insurance And Annuity Association *	TIAA Access Equity Index T4	3,791		300,760
Teachers Insurance And Annuity Association *	TIAA Access Growth & Income T4	115		9,980
Teachers Insurance And Annuity Association *	TIAA Access Infl-Lnkd Bond T4	644		24,024
Teachers Insurance And Annuity Association *	TIAA Access International Equity T4	2,841		88,363
Teachers Insurance And Annuity Association *	TIAA Access Lg-Cap Gr T4	1,191		113,525
Teachers Insurance And Annuity Association *	TIAA Access Lg-Cap Val T4	3,158		182,732
Teachers Insurance And Annuity Association *	TIAA Access Mid-Cap Gr T4	578		38,602
Teachers Insurance And Annuity Association *	TIAA Access Mid-Cap Val T4	982		58,169
Teachers Insurance And Annuity Association *	TIAA Access Money Market T4	1		28
Teachers Insurance And Annuity Association *	TIAA Access Real Est Secs T4	665		29,217
Teachers Insurance And Annuity Association *	TIAA Access Sm-Cap Bl Idx T4	494		30,514
Teachers Insurance And Annuity Association *	TIAA Access Quant Sml Cp Eq T4	481		31,570
Teachers Insurance And Annuity Association *	TIAA Access Social Ch Eq T4	481		37,642
College Retirement Equities Fund *	CREF Stock R1	7,021		4,419,702
College Retirement Equities Fund *	CREF Money Market R1	20,916		555,801
College Retirement Equities Fund *	CREF Social Choice R1	1,695		490,647
College Retirement Equities Fund *	CREF Global Equities R1	5,479		1,266,607
College Retirement Equities Fund *	CREF Growth R1	9,722		2,606,278
College Retirement Equities Fund *	CREF Equity Index R1	2,762		900,505
College Retirement Equities Fund *	CREF Inflation-Linked Bond R1	7,101		545,200
College Retirement Equities Fund *	CREF Core Bond R1	4,960		601,261
Total Variable Annuity Accounts				<u>\$ 13,473,191</u>

OTTAWA UNIVERSITY DC PLAN

E.I.N.: 48-0543772 PLAN NUMBER: 001 SCHEDULE OF ASSETS HELD AT END OF YEAR

Page 2 Of 2
December 31, 2022

Identity Of Issuer, Borrower, Lessor Or Similar Party	Description Of Investment	Units	Cost ⁽¹⁾	Current Value
Mutual Funds				
Teachers Insurance And Annuity Association *	TIAA-CREF Lfcyle Idx 2010-Inst	1,013	\$	15,172
Teachers Insurance And Annuity Association *	TIAA-CREF Lfcyle Idx 2015-Inst	6,390		100,513
Teachers Insurance And Annuity Association *	TIAA-CREF Lfcyle Idx 2020-Inst	67,316		1,141,675
Teachers Insurance And Annuity Association *	TIAA-CREF Lfcyle Idx 2025-Inst	133,789		2,477,771
Teachers Insurance And Annuity Association *	TIAA-CREF Lfcyle Idx 2030-Inst	44,281		887,837
Teachers Insurance And Annuity Association *	TIAA-CREF Lfcyle Idx 2035-Inst	72,874		1,566,784
Teachers Insurance And Annuity Association *	TIAA-CREF Lfcyle Idx 2040-Inst	75,618		1,715,020
Teachers Insurance And Annuity Association *	TIAA-CREF Lfcyle Idx 2045-Inst	44,549		1,043,342
Teachers Insurance And Annuity Association *	TIAA-CREF Lfcyle Idx 2050-Inst	30,340		718,763
Teachers Insurance And Annuity Association *	TIAA-CREF Lfcyle Idx 2055-Inst	15,958		304,646
Teachers Insurance And Annuity Association *	TIAA-CREF Lfcyle Idx 2060-Inst	8,869		130,997
Teachers Insurance And Annuity Association *	TIAA Access Lfcyle Idx RtlN-Inst	2,621		51,810
American Funds	American EuroPac Growth Class R6	3,514		172,288
Vanguard Funds	Vanguard 500 Idx Adm	1,377		487,538
Vanguard Funds	Vanguard Small-Cap Idx Adm	2,162		190,158
Vanguard Funds	Vanguard Mid-Cap Idx Adm	621		156,842
MFS Mutual Funds	MFS Growth Fund Class R6	2,184		291,480
MFS Mutual Funds	MFS Value Fund Class R6	1,786		84,766
Victory Capital	Victory Sycamore Established Value Class R6	2,526		113,040
Victory Capital	Victory Sophus Emerging Markets Class R6	5,276		91,805
Wasatch Funds	Wasatch Core Growth Fund Inst	273		17,983
Vanguard Funds	Vanguard Ttl Intl Stk Idx Adm	4,194		116,844
Prudential	PGIM Total Return Bond R6	31,151		365,709
Parnassus	Parnassus Core Equity Inst.	2,918		137,232
JP Morgan	Undiscovered Managers Behavioral Value Class R6	1,980		150,009
Eaton Vance	Eaton Vance Atl Cap SMID Ca R6	5,661		195,356
Cohen & Steers	Cohen & Steers Real Est Sec Z	8,351		126,685
Total Mutual Funds				<u>12,852,065</u>
Separately Managed Accounts				
Lincoln Financial Group *	Fixed group annuity contract	718,065		834,033
				<u>834,033</u>
Plan Participants *				
	Notes receivable bearing interest at rates ranging from 4.25% to 7.25% with maturity dates through January 2028	—		69,606
				<u>\$ 34,985,478</u>

* Indicates allowable party in interest

The above information is a required disclosure for IRS Form 5500, Schedule H, Part IV, line 4i.

⁽¹⁾ Cost information has been omitted for investments that are participant directed.

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

Name of Plan:

► Ottawa University DC Plan

Employer Identification Number: ► 48-0543772

For plan year (beginning/ending): ► 1/1/2022 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
*	College Retirement Equities Fund variable annuities	TIAA Traditional Benefit Responsive		\$ 1,158,202.33
*	College Retirement Equities Fund variable annuities	TIAA Traditional Non Benefit Responsive		\$ 6,536,751.19
*	College Retirement Equities Fund variable annuities	TIAA Traditional Benefit Responsive 2		\$ 23,951.59
	College Retirement Equities Fund variable annuities	Plan Loan Default Fund		\$ 37,677.73
*	College Retirement Equities Fund variable annuities	CREF Stock R1		\$ 4,419,702.34
*	College Retirement Equities Fund variable annuities	CREF Money Market R1		\$ 555,801.62
*	College Retirement Equities Fund variable annuities	CREF Social Choice R1		\$ 490,647.40
*	College Retirement Equities Fund variable annuities	CREF Global Equities R1		\$ 1,266,606.79
*	College Retirement Equities Fund variable annuities	CREF Growth R1		\$ 2,606,278.01
*	College Retirement Equities Fund variable annuities	CREF Equity Index R1		\$ 900,504.64
*	College Retirement Equities Fund variable annuities	CREF Inflation-Linked Bond R1		\$ 545,199.97
*	College Retirement Equities Fund variable annuities	TIAA Real Estate		\$ 743,264.54
*	College Retirement Equities Fund variable annuities	TIAA Access Core Bond Plus T4		\$ 93,831.19
*	College Retirement Equities Fund variable annuities	TIAA Access Core Bond T4		\$ 61,607.74
*	College Retirement Equities Fund variable annuities	TIAA Access Equity Index T4		\$ 300,759.52
*	College Retirement Equities Fund variable annuities	TIAA Access Growth & Income T4		\$ 9,979.89
*	College Retirement Equities Fund variable annuities	TIAA Access Infl-Lnkd Bond T4		\$ 24,023.91
*	College Retirement Equities Fund variable annuities	TIAA Access Intl Equity T4		\$ 88,363.39
*	College Retirement Equities Fund variable annuities	TIAA Access Lfcyle Rtmt Inc T4		\$ 1.99
*	College Retirement Equities Fund variable annuities	TIAA Access Lg-Cap Gr T4		\$ 113,525.05
*	College Retirement Equities Fund variable annuities	TIAA Access Lg-Cap Val T4		\$ 182,731.93
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2010 T4		\$ 2.28
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2015 T4		\$ 9,416.87
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2020 T4		\$ 61.26
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2025 T4		\$ 450.06
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2030 T4		\$ 22,455.29
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2035 T4		\$ 129,504.50
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2040 T4		\$ 9,485.77
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2045 T4		\$ 52,843.23
*	College Retirement Equities Fund variable annuities	TIAA Access Lifecycle 2050 T4		\$ 19,139.29
*	College Retirement Equities Fund variable annuities	TIAA Access Mid-Cap Gr T4		\$ 38,601.88
*	College Retirement Equities Fund variable annuities	TIAA Access Mid-Cap Val T4		\$ 58,168.73
*	College Retirement Equities Fund variable annuities	TIAA Access Money Market T4		\$ 27.81
*	College Retirement Equities Fund variable annuities	TIAA Access Real Est Secs T4		\$ 29,217.09
*	College Retirement Equities Fund variable annuities	TIAA Access Sm-Cap Bl Idx T4		\$ 30,513.85
*	College Retirement Equities Fund variable annuities	TIAA Access Quant Sml Cp Eq T4		\$ 31,570.35
*	College Retirement Equities Fund variable annuities	TIAA Access Social Ch Eq T4		\$ 37,641.66
*	College Retirement Equities Fund variable annuities	CREF Core Bond R1		\$ 601,260.62
	TIAA Total			\$ 21,229,773
	Lincoln	PARNSUS CORE EQTY REGISTERED INVESTMENTS		\$ 137,232.00
	Lincoln	AM FDS EUPAC GRWTH REGISTERED INVESTMENTS		\$ 172,288.00
	Lincoln	VNGRD 500 INDX REGISTERED INVESTMENTS		\$ 487,538.00
	Lincoln	VNGRD MIDCP INDX REGISTERED INVESTMENTS		\$ 156,842.00
	Lincoln	VNGRD SMCP INDX REGISTERED INVESTMENTS		\$ 190,159.00
	Lincoln	MFS GRWTH REGISTERED INVESTMENTS		\$ 291,480.00
	Lincoln	VNGRD TTL INTL STCK INDX REGISTERED INVESTMENTS		\$ 116,844.00
	Lincoln	MFS VALUE REGISTERED INVESTMENTS		\$ 84,766.00
	Lincoln	PGIM TTL RTRN BOND REGISTERED INVESTMENTS		\$ 365,709.00
	Lincoln	VICTORY SYCMRE ESTBLS VALUE REGISTERED INVESTMENTS		\$ 113,040.00
*	Lincoln	LINCOLN STABLE VALUE ACCOUNT		\$ 834,034.00
	Lincoln	UNDSCVR MNGRS BHVRL VALUE REGISTERED INVESTMENTS		\$ 150,009.00
	Lincoln	ETN VNC ATLNT CPTL SMID CP REGISTERED INVESTMENTS		\$ 195,356.00
	Lincoln	VICTORY SOPHUS EMRG MRKTS REGISTERED INVESTMENTS		\$ 91,805.00
	Lincoln	CHN STRS REAL ESTAT SECTR REGISTERED INVESTMENTS		\$ 126,685.00
	Lincoln	TIAA CRF LIFECYCLE INDX 2015 REGISTERED INVESTMENTS		\$ 100,513.00
	Lincoln	TIAA CRF LIFECYCLE INDX 2020 REGISTERED INVESTMENTS		\$ 1,141,675.00
	Lincoln	TIAA CRF LIFECYCLE INDX 2025 REGISTERED INVESTMENTS		\$ 2,477,771.00
	Lincoln	TIAA CRF LIFECYCLE INDX 2030 REGISTERED INVESTMENTS		\$ 887,837.00
	Lincoln	TIAA CRF LIFECYCLE INDX 2035 REGISTERED INVESTMENTS		\$ 1,566,784.00
	Lincoln	TIAA CRF LIFECYCLE INDX 2040 REGISTERED INVESTMENTS		\$ 1,715,020.00
	Lincoln	TIAA CRF LIFECYCLE INDX 2045 REGISTERED INVESTMENTS		\$ 1,043,343.00
	Lincoln	TIAA CRF LIFECYCLE INDX 2050 REGISTERED INVESTMENTS		\$ 718,763.00
	Lincoln	TIAA CRF LIFECYCLE INDX 2055 REGISTERED INVESTMENTS		\$ 304,646.00
	Lincoln	TIAA CRF LIFECYCLE INDX 2060 REGISTERED INVESTMENTS		\$ 130,997.00
	Lincoln	TIAA CRF LIFECYCLE INDX RTRMT INCM REGISTERED INVESTMENTS		\$ 51,810.00
	Lincoln	WASATCH CORE GRWTH REGISTERED INVESTMENTS		\$ 17,983.00
	Lincoln	TIAA CRF LFCYCL INDX 2010 REGISTERED INVESTMENTS		\$ 15,172.00
	Lincoln	PARTICIPANT LOANS		\$ 69,606.00
	Lincoln Total			\$ 13,755,707
	Grand Total			\$ 34,985,478