

<p style="text-align: center;">Form 5500</p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p style="font-size: x-small;">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).</p> <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; font-weight: bold; text-align: center;">2023</p> <hr/> <p style="text-align: center; font-weight: bold;">This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information
 For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide 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

<p>1a Name of plan <u>NATIONAL WOMEN'S LAW CENTER DC PLAN</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>001</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>NATIONAL WOMEN'S LAW CENTER</u></p> <p><u>11 DUPONT CIR NW STE 800</u> <u>WASHINGTON, DC 20036-1209</u></p>	<p>1c Effective date of plan <u>07/01/1981</u></p> <p>2b Employer Identification Number (EIN) <u>52-1213010</u></p> <p>2c Plan Sponsor's telephone number <u>202-588-5180</u></p> <p>2d Business code (see instructions) <u>541190</u></p>

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.	04/15/2025	ALEX BRAHA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> 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	259
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1)	155
	6a(2)	185
	6b	0
	6c	101
	6d	286
	6e	0
	6f	286
	6g(1)	256
6g(2)	282	
6h	0	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
 2L 2M 2T 2S 3D

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

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) <input checked="" type="checkbox"/> Insurance	(1) <input checked="" type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> 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	b General Schedules
(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> I (Financial Information – Small Plan)
(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input checked="" type="checkbox"/> A (Insurance Information) – Number Attached <u> 2 </u>
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> C (Service Provider Information)
(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	(5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> 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 2023 Form M-1 annual report. If the plan was not required to file the 2023 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

2023

This Form is Open to Public Inspection

For calendar plan year 2023 or fiscal plan year beginning **07/01/2023** and ending **06/30/2024**

A Name of plan NATIONAL WOMEN'S LAW CENTER DC PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL WOMEN'S LAW CENTER		D Employer Identification Number (EIN) 52-1213010

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

1 Coverage Information:

(a) Name of insurance carrier

TIAA-CREF

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1624203	69345	369405	184	07/01/2023	06/30/2024

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

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

(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	2322460
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	14723532

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** 3121607

c Additions: (1) Contributions deposited during the year	7c(1)	45573
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	101788
(4) Transferred from separate account.....	7c(4)	283997
(5) Other (specify below)	7c(5)	32305

▶ PLAN SERVICING CREDIT

(6) Total additions..... **7c(6)** 463663

d Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 3585270

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	65173
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account.....	7e(3)	1197440
(4) Other (specify below)	7e(4)	197

▶ FEES

(5) Total deductions..... **7e(5)** 1262810

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**) **7f** 2322460

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 <input type="checkbox"/> Health (other than dental or vision) | b <input type="checkbox"/> Dental | c <input type="checkbox"/> Vision | d <input type="checkbox"/> Life insurance |
| e <input type="checkbox"/> Temporary disability (accident and sickness) | f <input type="checkbox"/> Long-term disability | g <input type="checkbox"/> Supplemental unemployment | h <input type="checkbox"/> Prescription drug |
| i <input type="checkbox"/> Stop loss (large deductible) | j <input type="checkbox"/> HMO contract | k <input type="checkbox"/> PPO contract | l <input type="checkbox"/> Indemnity contract |
| m <input type="checkbox"/> 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 <input type="checkbox"/> paid in cash, or <input type="checkbox"/> 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

2023

This Form is Open to Public Inspection

For calendar plan year 2023 or fiscal plan year beginning **07/01/2023** and ending **06/30/2024**

A Name of plan NATIONAL WOMEN'S LAW CENTER DC PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL WOMEN'S LAW CENTER	D Employer Identification Number (EIN) 52-1213010

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

1 Coverage Information:

(a) Name of insurance carrier
VOYA RETIREMENT INSURANCE AND ANNUITY COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
71-0294708	86509	VC2311	15	07/01/2023	06/30/2024

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 2309	(b) Total amount of fees paid 29
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
ALICIA S KONG
3448 ELLICOTT CENTER DR
STE 202
ELLICOTT CITY, MD 21043

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2309	29	ALLOCATED NON-CASH COMP	3

(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	3314
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	2557689

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 ▶ UNALLOCATED ANNUITY CONTRACT

b Balance at the end of the previous year **7b** 3217

c Additions: (1) Contributions deposited during the year	7c(1)	
	7c(2)	
	7c(3)	128
	7c(4)	
	7c(5)	

(6) Total additions **7c(6)** 128

d Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 3345

e Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
	7e(2)	31
	7e(3)	
	7e(4)	

(5) Total deductions **7e(5)** 31

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**) **7f** 3314

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 <input type="checkbox"/> paid in cash, or <input type="checkbox"/> 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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning **07/01/2023** and ending **06/30/2024**

A Name of plan NATIONAL WOMEN'S LAW CENTER DC PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL WOMEN'S LAW CENTER	D Employer Identification Number (EIN) 52-1213010	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

VOYA RETIREMENT INSURANCE

71-0294708

(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

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

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

TIAA

13-1624203

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64 65	RECORDKEEPER	11633	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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:	ROGERS & COMPANY CPAS PLLC	b EIN:	58-2676261
c Position:	AUDITOR		
d Address:	8300 BOONE BLVD SUITE 600 VIENNA, VA 22182	e Telephone:	703-893-0300

Explanation: CHANGE IN AUDITOR

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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	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.	<small>OMB No. 1210-0110</small> 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024

A Name of plan <u>NATIONAL WOMEN'S LAW CENTER DC PLAN</u>	B Three-digit plan number (PN)	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>NATIONAL WOMEN'S LAW CENTER</u>	D Employer Identification Number (EIN) <u>52-1213010</u>	

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:	<u>TIAA REAL ESTATE</u>		
b Name of sponsor of entity listed in (a):	<u>TIAA-CREF</u>		
c EIN-PN	<u>13-1624203-004</u>	d Entity code	<u>P</u>
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>659776</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>VARIABLE ANNUITY ACCOUNT C</u>		
b Name of sponsor of entity listed in (a):	<u>VOYA RETIREMENT INSURANCE AND ANNUITY COMPANY</u>		
c EIN-PN	<u>71-0294708-000</u>	d Entity code	<u>P</u>
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>2557011</u>		
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, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

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

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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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024	
A Name of plan NATIONAL WOMEN'S LAW CENTER DC PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL WOMEN'S LAW CENTER	D Employer Identification Number (EIN) 52-1213010

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.

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	75280
(2) Participant contributions	1b(2)	0	63922
(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)	56917	67761
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	597514	659776
(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)	18373916	25733589
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	3124823	2325774
(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	22153170	28926102
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	22153170	28926102

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)	1677739	
(B) Participants	2a(1)(B)	1499620	
(C) Others (including rollovers)	2a(1)(C)	537840	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		3715199
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)	3800	
(F) Other	2b(1)(F)	101915	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		105715
(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)	149434	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		149434
(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)		
(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)		

		(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)		-78372
(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)		3417203
c Other income	2c		32305
d Total income. Add all income amounts in column (b) and enter total	2d		7341484

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	556869	
(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)		556869
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances.....	2i(1)		
(2) Contract administrator fees.....	2i(2)	11633	
(3) Recordkeeping fees.....	2i(3)		
(4) IQPA audit fees.....	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	50	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		11683
j Total expenses. Add all expense amounts in column (b) and enter total	2j		568552

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		6772932
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: GRF CPAS & ADVISORS

(2) EIN: 52-1392008

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
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	
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	
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	
e Was this plan covered by a fidelity bond?	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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	
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	
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		
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	
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	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		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.			

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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024

A Name of plan <u>NATIONAL WOMEN'S LAW CENTER DC PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>NATIONAL WOMEN'S LAW CENTER</u>	D Employer Identification Number (EIN) <u>52-1213010</u>	

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
---	----------	----------

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

EIN(s): 82-2826183 71-0294708

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

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

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

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

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

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

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

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a	
b Enter the amount contributed by the employer to the plan for this plan year	6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c	

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

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

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

Part III	Amendments
-----------------	-------------------

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. Complete as many entries as needed to report all applicable employers.

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment)	14a	
b The plan year immediately preceding the current plan year. <input type="checkbox"/> 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. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14c	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment.....

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment.....

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:
 Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%
 High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
 0-5 years 5-10 years 10-15 years 15 years or more

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.....

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? Yes No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).
 Design-based safe harbor method
 "Prior year" ADP test
 "Current year" ADP test
 N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 08 / 07 / 2017 (MM/DD/YYYY) and the Opinion Letter serial number J600957A.

FINANCIAL STATEMENTS

NATIONAL WOMEN'S LAW CENTER DC PLAN

**FOR THE YEARS ENDED
JUNE 30, 2024 AND 2023**

NATIONAL WOMEN'S LAW CENTER DC PLAN

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CPAs & ADVISORS

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
National Women's Law Center DC Plan
Washington, D.C.

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

We have performed the audit of the financial statements of National Women's Law Center DC Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statement of net assets available for benefits as of June 30, 2024, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of the Plan's 2024 financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a State or Federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from the qualified institutions as of and for the year ended June 30, 2024, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Opinion on the 2024 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the 2024 Financial Statements section —

- The amounts and disclosures in the 2024 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 2024 financial statements related to assets held by and certified to by a qualified institution agrees to or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

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Basis for Opinion on the 2024 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the 2024 Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. 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 2024 Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the 2024 Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

Our audit 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 Matters - 2024 Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at Year End) for the year ended June 30, 2024 (the supplemental schedule), is presented for purposes of additional analysis and is not a required part of the financial statements, but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. 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 GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the 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, is 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 an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Auditor's Report on the 2023 Financial Statements

The financial statements of the Plan as of June 30, 2023, were audited by predecessor auditors. 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 the Employee Retirement Income Security Act of 1974 (ERISA), the prior year audit did not extend to any statements or information related to assets held for investment of the Plan that were certified by qualified institutions. Their report, dated April 8, 2024, indicated that in their opinion (a) the amounts and disclosures in the 2023 financial statements, other than those agreed to or derived from the certified investment information, were presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America, and (b) the information in the 2023 financial statements related to assets held by and certified to by the qualified institutions agrees to, or is derived from, in all material respects the information prepared and certified by institutions that management determined meet the requirements of ERISA Section 103(a)(3)(C).

Their report also indicated that the form and content of the 2023 supplemental schedule, other than the information in the 2023 supplemental schedule that agrees to or is derived from the certified investment information, was presented, in all material respects, in conformity with the the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, and the information in the 2023 supplemental schedule 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 determined meet the requirements of ERISA Section 103(a)(3)(C).

Gelman Rosenberg & Friedman

April 14, 2025

NATIONAL WOMEN'S LAW CENTER DC PLAN
STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF JUNE 30, 2024 AND 2023

	2024	2023
INVESTMENTS		
Registered investment companies, at fair value	\$ 25,733,589	\$ 18,373,915
Non benefit-responsive investment contract, at fair value	659,909	581,520
Fully benefit-responsive investment contracts, at contract value	1,665,865	2,543,304
Pooled separate account, at net asset value	659,776	597,514
Total investments	28,719,139	22,096,253
RECEIVABLES		
Employee contributions receivable	63,922	-
Employer contributions receivable	75,280	-
Notes receivable from participants	67,761	56,917
Total receivables	206,963	56,917
NET ASSETS AVAILABLE FOR BENEFITS	\$ 28,926,102	\$ 22,153,170

NATIONAL WOMEN'S LAW CENTER DC PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEARS ENDED JUNE 30, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
ADDITIONS		
Investment income:		
Net appreciation in fair value of investments	\$ 3,338,831	\$ 2,093,244
Interest and dividends	<u>251,349</u>	<u>137,237</u>
Total investment income	<u>3,590,180</u>	<u>2,230,481</u>
Contributions:		
Employee contributions	1,499,620	1,129,912
Employer contributions	1,677,739	950,183
Rollover contributions	<u>537,840</u>	<u>272,443</u>
Total contributions	<u>3,715,199</u>	<u>2,352,538</u>
Plan servicing credits	32,305	23,241
Participant loan interest	<u>3,800</u>	<u>3,265</u>
Total additions	<u>7,341,484</u>	<u>4,609,525</u>
DEDUCTIONS		
Benefits paid to participants or their beneficiaries	556,869	1,075,189
Administrative fees	<u>11,683</u>	<u>2,515</u>
Total deductions	<u>568,552</u>	<u>1,077,704</u>
Increase in net assets available for benefits before other item	<u>6,772,932</u>	<u>3,531,821</u>
OTHER ITEM		
Transfer of assets due to merger	<u>-</u>	<u>12,060,717</u>
Increase in net assets available for benefits	<u>6,772,932</u>	<u>15,592,538</u>
Net assets available for benefits, beginning of year	<u>22,153,170</u>	<u>6,560,632</u>
NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR	<u>\$ 28,926,102</u>	<u>\$ 22,153,170</u>

NATIONAL WOMEN'S LAW CENTER DC PLAN

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2024 AND 2023

1. DESCRIPTION OF THE PLAN

The following description of National Women's Law Center DC Plan (the Plan) is provided for general information purposes only. Participants should refer to the Plan agreement for more complete information.

General -

The Plan is a defined contribution plan covering substantially all full-time employees of National Women's Law Center (NWLC), which was originally adopted on July 1, 1981. Effective on July 1, 2022, NWLC merged its two retirement plans and transferred assets from the terminated retirement plan into this Plan. NWLC most recently amended and restated the Plan on January 1, 2023. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The Secure 2.0 Act of 2022 was signed into law on December 29, 2022. This legislation includes a vast array of provisional changes to retirement plans, becoming effective in 2023 and beyond. Plan management is evaluating the impact of the adoption and implementation of this legislation on the Plan. Although NWLC has until December 31, 2026, to adopt formal plan amendments related to SECURE 2.0, the provisions that will become effective in 2023 and beyond will still need to be administered by the Plan's management prior to adoption of the amendments.

Eligibility -

All employees are eligible to participate in the Plan for purposes of nonelective contributions. Employees who have completed three consecutive months from their date of employment during which employees must complete one hour of service each month, as defined by the Plan, are eligible to participate in the Plan. An eligible employee who has satisfied the eligibility requirements will become a participant in the Plan as of the first day of the month coinciding with or next following date eligibility requirements are met.

Contributions -

Under the terms of the Plan, participants may make voluntary contributions to the Plan up to 50% of their annual compensation, as defined by the Plan, and up to 100% of their paid incentive compensation bonuses, subject to Federal limitations. The Plan also allows for catch up contributions for participants who are 50 and older. All contributions are subject to certain IRS limitations. The Plan also includes auto-enrollment with a default contribution rate of 3%. Participants were provided proper notice and time to opt out, or make a deferral election, other than the auto-enrollment default contribution rate.

NWLC makes an employer matching contribution in an amount equal to 100% of the first 3% of each participant's compensation. Participants may also contribute amounts representing distributions from other qualified plans (rollover).

NWLC also makes fixed nonelective contribution of 6% of each participant's compensation, and may make an additional discretionary contribution subject to approval by the Board of Directors. For the years ended June 30, 2024 and 2023, no discretionary contribution was made.

Vesting -

Participants are fully vested in their contributions, rollover contributions, and employer matching and qualified nonelective contributions, plus actual earnings thereon.

NATIONAL WOMEN'S LAW CENTER DC PLAN

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2024 AND 2023

1. DESCRIPTION OF THE PLAN (Continued)

Participant accounts -

Each participant's account is credited with the participant's contributions, the employer's contributions, and an allocation of the investment earnings and losses. Allocations of investment earnings and losses are based on account balances as defined in the Plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Investment options -

Contributions are remitted to accounts held by Teachers Insurance and Annuity Association of America (TIAA) and College Retirement Equities Fund (CREF). Participants may direct contributions to be invested in several investment fund options offered by TIAA and CREF including registered investment funds, TIAA investment contracts, and a pooled separate account. Participants are able to change their investment options directly with TIAA and CREF.

Plan assets are also held by The Voya Retirement Insurance and Annuity Company (Voya). The accounts held by Voya are closed to new investments or contributions. These assets are also participant directed, as Plan participants may withdraw amounts from these funds.

Payment of benefits -

Participants are entitled to receive a distribution of their vested account in the Plan upon termination of their employment; retirement; death or disability and termination of the Plan without the establishment of a successor plan. A participant may elect to receive a lump sum amount equal to the value of his or her account, or a series of cash payments, in substantially equal installments. Required minimum distributions may be necessary for some participants and hardship withdrawals are permitted from the Plan.

Notes receivable from participants -

Participants may borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. Principal and interest is paid ratably through payroll deductions. Note terms are up to five years, except for notes to fund the purchase of a principal residence, for which the note may be repaid over a reasonable period that may exceed five years. All notes receivable from participants are secured by the balance in the participant's account. Interest rates on loans to participants range from 4.25% to 9.50%, with various maturities through March 15, 2029.

Plan termination -

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

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of accounting -

The financial statements are prepared on the accrual basis of accounting and in accordance with FASB ASC 962, *Plan Accounting Defined Contribution Pension Plans*.

NATIONAL WOMEN'S LAW CENTER DC PLAN

**NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2024 AND 2023**

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Use of estimates -

The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Valuation of investments -

Investments in registered investment companies 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 8 for discussion on fair value measurements.

Investments in the guaranteed investment contract that is non benefit-responsive is stated at fair value, which is determined by the insurance carrier by discounting the related cash flows based on current yields of similar instruments with comparable durations and considering the creditworthiness of the issuers. Participants transact at contract value during the year, but fair value is determined annually for financial statement reporting purposes.

Investments in the guaranteed investment contracts that are fully benefit-responsive are stated at contract value, which is the amount participants would receive if they were to initiate permitted transactions in accordance with the contract.

Investments in the pooled separate account are stated at net asset value. Under the pooled investment concept, investment managers account for the Plan's share of the total portfolio on a unit basis, which is the net asset value.

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

Notes receivable from participants -

Notes receivable from participants are measured at their unpaid principal balance, plus accrued interest. Delinquent loans are treated as distributions based upon the terms of the Plan document. Delinquent loans are loans for which any scheduled repayment remains unpaid at the end of the period specified in the loan documents and any loans for which there is an outstanding principal balance existing after the last scheduled repayment date.

Plan servicing credits -

The Plan's service agreement with TIAA and CREF provides for revenue credit arrangements, whereby TIAA and CREF makes quarterly deposits into the Plan for certain excess revenues earned in connection with plan services. These credits are Plan assets that may be used to reimburse the Plan for fees and expenses.

Benefit payments -

Benefits are recorded when paid.

NATIONAL WOMEN'S LAW CENTER DC PLAN

**NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2024 AND 2023**

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Administrative expenses -

Certain expenses of maintaining the Plan are paid directly by the employer and some are paid by the Plan, which are included in these financial statements. Investment-related expenses are included as a reduction in the net appreciation of fair value of investments presented in the accompanying Statement of Changes in Net Assets Available for Benefits. Expenses that are paid by the Plan Sponsor are excluded from these financial statements.

Reclassifications -

Certain amounts in the prior year's financial statements have been reclassified to conform to the current year's presentation. These reclassifications had no effect on the previously reported changes in net assets available for benefits.

3. INCOME TAX STATUS

The Plan has a volume submitter opinion letter dated August 7, 2017, in which the Internal Revenue Service (the IRS) indicated that the prototype Plan document, as then designed, was in compliance with the applicable requirements of the IRC and was qualified and tax-exempt. Management believes the Plan is currently designed and operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service.

The Plan Administrator has analyzed the tax positions taken by the Plan, and has concluded that as of June 30, 2024 and 2023, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

4. INFORMATION CERTIFIED BY QUALIFIED INSTITUTIONS

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the Plan's Administrator instructed the Plan's independent auditors not to perform, and they did not perform, such auditing procedures with respect to the information certified by a) Voya Retirement Insurance and Annuity Company and b) Teachers Insurance Association of America (TIAA) and College Retirement Equities Fund (CREF), the qualified institutions collectively referred to as "The Custodians". The Custodians issued Certification Statements, certifying the information presented in the Schedule of Assets (Held at End of Year) and the Statement of Changes in Net Assets Available for Benefits for the years ended June 30, 2024 and 2023.

NATIONAL WOMEN'S LAW CENTER DC PLAN

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2024 AND 2023

5. PARTY-IN-INTEREST TRANSACTIONS

The Plan's investments are held by TIAA and CREF and Voya, the qualified institutions. TIAA and CREF, in particular, provide record keeping, Plan management, and day-to-day support to the Plan. Therefore, transactions with the qualified institutions qualify as party-in-interest transactions.

6. RISKS AND UNCERTAINTIES

The Plan invests in investment securities, which are exposed to various risks such as interest rates, market and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the participant account balances and the amounts reported in the Statement of Net Assets Available for Benefits.

7. GUARANTEED INVESTMENT CONTRACTS

The Plan has both fully benefit-responsive and non benefit-responsive investment contracts with TIAA, which maintains the contributions in a general account. The Plan also has a fully benefit-responsive investment contract with Voya, which maintains the contributions in a fixed account. The general and fixed accounts are credited with earnings on the underlying investments and charged for participant withdrawals and administrative fees. The guaranteed investment contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan. There are no reserves against contract value for credit risk of the contract issuer or otherwise.

The TIAA Traditional guaranteed investment contract has both a fully benefit-responsive and a non benefit-responsive option offered by the Plan. The TIAA Stable Value guaranteed annuity contract only has a fully benefit-responsive option offered by the Plan. The Voya Fixed Account is a fully benefit-responsive option, which is closed to new investments. These fund options are referred to as guaranteed investment contracts in the Plan's financial statements.

Contract Information

The Plan has a fixed annuity contract that is guaranteed by TIAA and CREF. TIAA and CREF provides a guarantee of principal, a guaranteed minimum rate of interest (generally 3%, but in some recent contracts, between 1% and 3%), and the potential for additional interest if declared by TIAA and CREF. Additional interest, when declared, remains in effect for the "declaration year," which begins each March 1. Additional interest is not guaranteed for future years. When the accumulation in TIAA Traditional Annuity is converted to an annuity based on life expectancy, the present value of the stream of payments is equal to the accumulation.

Contract Information - TIAA Traditional

TIAA Traditional is an annuity option that can provide a guarantee because it is a form of an insurance contract. Like all insurance products, the ability to satisfy guarantees is subject to what is referred to as the "claims-paying ability" of the insurance company that issues the contract. Thus, TIAA Traditional is a fixed annuity product backed by the claims-paying ability of TIAA, an insurance carrier.

NATIONAL WOMEN'S LAW CENTER DC PLAN

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2024 AND 2023

7. GUARANTEED INVESTMENT CONTRACTS (Continued)

Contract Information - TIAA Traditional (Continued)

TIAA guarantees a participant's principal and a contractually specified minimum interest rate. Any additional amounts that may be earned beyond the guaranteed minimums are not guaranteed beyond the period for which they are declared.

On March 1, the interest rates for all existing time periods (referred to as "renewal rates") are reviewed for possible reset. Rates are then guaranteed until the end of the following February (i.e., through the "declaration year"). TIAA's Board of Trustees determines the interest rate in excess of the guaranteed minimum rates for a particular time period based on various factors.

TIAA provides a guarantee of principal, a guaranteed minimum rate of interest (generally 3%, but in some recent contracts, between 1% and 3%), 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 TIAA Traditional insurance contracts do not permit the insurance carrier to terminate the agreements prior to their scheduled maturity dates.

Contract Information - TIAA Stable Value

TIAA Stable Value, a fixed annuity providing capital preservation and income, is designed to provide safety, liquidity, competitive interest and the option to receive guaranteed income for life during retirement. During the accumulation phase, the annuity's guarantees are supported by a pooled separate account of TIAA. If the separate account's assets are insufficient to meet these guarantees in the accumulation phase, the financial strength and claims-paying ability of TIAA provides a second layer of support to cover any shortfall.

With TIAA Stable Value, participants receive a guaranteed minimum interest rate of between 1% and 3%, the potential for interest crediting rates to be declared above the guaranteed minimum and the assurance that their accumulation will never decline in value. In addition, because TIAA Stable Value is a liquid account, participants can access their money to make transfers and withdrawals. At retirement, participants can choose from a variety of income options, including lifetime annuities guaranteed by TIAA.

Contract Information - Voya Fixed Account

The Voya Fixed Account, a fixed annuity providing capital preservation and income, is designed to provide safety, liquidity, competitive interest and the option to receive guaranteed income for life during retirement. With the Voya Fixed Account, participants receive a guaranteed minimum interest rate of 4% and the assurance that their accumulation will never decline in value. In addition, because Voya Fixed Account is a liquid account, participants can access their money to make transfers and withdrawals. At retirement, participants can withdraw their account balance.

Contract Value and Fair Value

Contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the fully benefit-responsive contract. Contract value, as reported by the insurance carriers to the Plan, represents contributions made 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 contract value of the fully benefit-responsive contracts totaled \$1,665,865 and \$2,543,304 as of June 30, 2024 and 2023, respectively.

NATIONAL WOMEN'S LAW CENTER DC PLAN

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2024 AND 2023

7. GUARANTEED INVESTMENT CONTRACTS (Continued)

Contract Value and Fair Value (Continued)

Fair value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the non benefit-responsive contracts. Fair value, as reported by TIAA to the Plan, represents the discounted cash flows based on current yields of similar instruments with comparable durations considering the creditworthiness of the issuers. The fair value of the non benefit-responsive contracts totaled \$659,909 and \$581,520 as of June 30, 2024 and 2023, respectively.

Events

Certain events limit the ability of the Plan to transact at contract value with the insurance carriers. Such events include the following: (i) amendments to the Plan documents (including complete or partial Plan termination or merger with another Plan); (ii) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions; (iii) bankruptcy of the Plan Sponsor or other Plan Sponsor events (e.g., divestitures or spin-offs of a subsidiary), which cause a significant withdrawal of from the Plan; or (iv) the failure of the trust to qualify for exemption from Federal income taxes or any required prohibited transaction exemption under ERISA. The Plan Administrator does not believe that the occurrence of any events, which would limit the Plan's ability to transact at contract value with participants invested in the fully benefit-responsive contract are probable of occurring.

Interest Crediting Rates

For TIAA Traditional, the average yield and crediting interest rates were 3.96% and 3.22% for the years ended June 30, 2024 and 2023, respectively. For TIAA Stable Value, the average yield and crediting interest rates were between 1% and 3% for both years ended June 30, 2024 and 2023. For Voya Fixed Account, the average yield and crediting interest rate was 4.0% for both years ended June 30, 2024 and 2023.

8. FAIR VALUE MEASUREMENT

In accordance with FASB ASC 820, *Fair Value Measurement*, the Plan has categorized its financial instruments, based on the priority of the inputs to the valuation technique, into a three-level fair value hierarchy. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). If the inputs used to measure the financial instruments fall within different levels of hierarchy, the categorization is based on the lowest level input that is significant to the fair value measurement of the instrument.

Investments recorded in the Statement of Net Assets Available for Benefits are categorized based on the inputs to valuation techniques as follows:

Level 1. These are investments where values are based on unadjusted quoted prices for identical assets in an active market the Plan has the ability to access.

Level 2. These are investments where values are based on quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active, or model-based valuation techniques that utilize inputs that are observable either directly or indirectly for substantially the full-term of the investments.

NATIONAL WOMEN'S LAW CENTER DC PLAN

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2024 AND 2023

8. FAIR VALUE MEASUREMENT (Continued)

Level 3. These are investments where inputs to the valuation methodology are unobservable and significant to the fair value measurement.

Following is a description of the valuation methodology used for investments measured at fair value.

- *Registered Investment Companies (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 SEC. Mutual funds are required to publish their daily value and to transact at that price. Mutual funds held by the Plan are deemed to be actively traded.
- *Guaranteed Investment Contract (Non Benefit-Responsive)* - Valued at fair value and includes the non benefit-responsive option of the TIAA Traditional guaranteed insurance contract. Fair value is determined by TIAA, the insurance carrier, by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the creditworthiness of the issuers. Because the participants transact at contract value, fair value is determined annually for financial statement reporting purposes. Benefits under the non benefit-responsive options have liquidity restrictions. Distributions, withdrawals, and transfers out of the non benefit-responsive options are made in accordance with the terms of the contracts.
- *Guaranteed Investment Contracts (Fully Benefit-Responsive)* - Valued at contract value and includes the fully benefit-responsive option of the TIAA Traditional guaranteed insurance contract and the Stable Value guaranteed annuity contract in addition to the Voya Fixed Account. Contract value is the relevant measurement attribute for a fully benefit-responsive investment contract because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The contract value of the fully benefit-responsive investment contract represents contributions plus earnings, less participant withdrawals and administrative expenses. In determining the reasonableness of the methodology, a number of factors are considered, such as economic conditions, industry and market developments and overall credit ratings.
- *Pooled Separate Account* - Valued at the number of participation units held at year-end multiplied by the current participation-unit value. Investments in the pooled separate account represent ownership of units of participation rather than ownership of specific assets. The value of a unit of participation is the total value of the separate account divided by the number of units outstanding, which is the net asset value.

The fair value of the Plan's investments in the pooled separate account have been determined using net asset value (NAV) per share as a practical expedient because the fair value is not readily determinable. In accordance with GAAP, NAV may be used unless it is probable that the investment will be sold at a price other than NAV. GAAP also requires disclosure of certain attributes by major category for investments allowed to elect the practical expedient, regardless of whether the practical expedient was used.

The Plan's investments that were measured at net asset value and contract value have not been categorized in the fair value hierarchy. However, the net asset value and contract value amounts presented in the tables below are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the Statement of Changes in Net Assets Available for Benefits.

NATIONAL WOMEN'S LAW CENTER DC PLAN

**NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2024 AND 2023**

8. FAIR VALUE MEASUREMENT (Continued)

The table below summarizes, by level within the fair value hierarchy, the Plan's investments as of June 30, 2024:

Asset Class:	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Investments Measured at NAV</u>	<u>Investments Measured at Contract Value</u>	<u>Total</u>
Registered investment companies, at fair value	\$ 25,733,589	\$ -	\$ -	\$ -	\$ -	\$ 25,733,589
Non benefit-responsive investment contract, at fair value	-	-	659,909	-	-	659,909
Fully benefit-responsive investment contracts, at contract value	-	-	-	-	1,665,865	1,665,865
Pooled separate account, at net asset value	<u>-</u>	<u>-</u>	<u>-</u>	<u>659,776</u>	<u>-</u>	<u>659,776</u>
TOTAL INVESTMENTS	<u>\$ 25,733,589</u>	<u>\$ -</u>	<u>\$ 659,909</u>	<u>\$ 659,776</u>	<u>\$ 1,665,865</u>	<u>\$ 28,719,139</u>

The table below summarizes, by level within the fair value hierarchy, the Plan's investments as of June 30, 2023:

Asset Class:	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Investments Measured at NAV</u>	<u>Investments Measured at Contract Value</u>	<u>Total</u>
Registered investment companies, at fair value	\$ 18,373,915	\$ -	\$ -	\$ -	\$ -	\$ 18,373,915
Non benefit-responsive investment contract, at fair value	-	-	581,520	-	-	581,520
Fully benefit-responsive investment contracts, at contract value	-	-	-	-	2,543,304	2,543,304
Pooled separate account, at net asset value	<u>-</u>	<u>-</u>	<u>-</u>	<u>597,514</u>	<u>-</u>	<u>597,514</u>
TOTAL	<u>\$ 18,373,915</u>	<u>\$ -</u>	<u>\$ 581,520</u>	<u>\$ 597,514</u>	<u>\$ 2,543,304</u>	<u>\$ 22,096,253</u>

The following is a rollforward of the Level 3 investments as of June 30, 2024 and 2023:

	<u>2024</u>	<u>2023</u>
Beginning balance	\$ 581,520	\$ 586,299
Investment income	29,485	30,863
Contributions	67,216	3,161
Deductions	<u>(18,312)</u>	<u>(38,803)</u>
Ending Balance	<u>\$ 659,909</u>	<u>\$ 581,520</u>

Transfers between levels are recorded at the end of the reporting period, if applicable.

NATIONAL WOMEN'S LAW CENTER DC PLAN

**NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2024 AND 2023**

8. FAIR VALUE MEASUREMENT (Continued)

The following is a summary of the Plan's investments valued using Level 3 inputs, the valuation techniques used to measure fair value, and the significant unobservable inputs and the ranges of values for those inputs as of June 30, 2024 and 2023:

	<u>2024 Fair Value</u>	<u>2023 Fair Value</u>	<u>Principal Valuation Technique</u>	<u>Significant Unobservable Inputs</u>	<u>Range</u>
TIAA Traditional Annuity	\$ <u>659,909</u>	\$ <u>581,520</u>	Risk Adjusted Discounted Cash Flow	Discount Rate Applied	1.00% to 3.00%

The following is a summary of the investments valued using NAV as a practical expedient and the related unfunded commitments and redemption restrictions associated with each major category at June 30, 2024 and 2023:

	<u>2024 Net Asset Value</u>	<u>2023 Net Asset Value</u>	<u>Redemption Frequency</u>	<u>Full Redemption Notice Period</u>
TIAA Real Estate Account	\$ <u>659,776</u>	\$ <u>597,514</u>	Daily	30 Days

Withdrawals from the TIAA Real Estate fund option are limited to one per calendar quarter. There were no unfunded commitments as of June 30, 2024 and 2023.

9. SUBSEQUENT EVENTS

In preparing these financial statements, the Plan has evaluated events and transactions for potential recognition or disclosure through April 14, 2025, the date the financial statements were issued.

SUPPLEMENTAL INFORMATION

NATIONAL WOMEN'S LAW CENTER DC PLAN

SCHEDULE H, LINE 4I, SCHEDULE OF ASSETS (HELD AT END OF YEAR)
FOR THE YEAR ENDED JUNE 30, 2024

EIN: 52-1213010

Plan Number: 001

(a)	(b)	(c)	(d)	(e)
Party-in-Interest	Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment	Cost	Current Value
	Registered Investment Companies:			
*	TIAA and CREF	CREF Money Market R1	N/A	\$ 2,093,966
*	TIAA and CREF	CREF Equity Index R1	N/A	1,829,451
*	TIAA and CREF	CREF Stock R1	N/A	1,596,172
*	TIAA and CREF	Nuveen Lifecycle 2055 R6	N/A	1,182,025
*	TIAA and CREF	CREF Growth R1	N/A	1,007,712
*	Voya	Voya Growth and Income Port I	N/A	950,391
*	TIAA and CREF	CREF Global Equities R1	N/A	929,674
*	TIAA and CREF	Nuveen Lifecycle 2050 R6	N/A	925,697
*	TIAA and CREF	TIAA Access Lifecycle 2045 T4	N/A	924,965
*	TIAA and CREF	Nuveen Large Cap Responsible Eq R6	N/A	917,136
	Vanguard	Vanguard 500 Index Fund	N/A	888,635
*	TIAA and CREF	CREF Bond Market R1	N/A	803,431
*	TIAA and CREF	CREF Social Choice R1	N/A	725,078
*	TIAA and CREF	Nuveen Lifecycle 2045 R6	N/A	712,075
*	TIAA and CREF	TIAA Access Nuveen International Equity Fund T4	N/A	670,835
*	TIAA and CREF	Nuveen Lifecycle 2040 R6	N/A	634,633
*	TIAA and CREF	TIAA Access Lifecycle 2050 T4	N/A	524,905
*	TIAA and CREF	Nuveen Lifecycle 2060 R6	N/A	523,405
	Vanguard	Vanguard Total Intl Stock Index Admiral	N/A	518,046
*	TIAA and CREF	TIAA Access Lifecycle 2040 T4	N/A	456,401
*	TIAA and CREF	Nuveen Lifecycle 2025 R6	N/A	425,740
*	TIAA and CREF	Nuveen Lifecycle 2035 R6	N/A	393,599
	Fidelity	Fidelity VIP Contrafund Pt I	N/A	376,177
*	TIAA and CREF	TIAA Access Lifecycle 2055 T4	N/A	366,356
*	Voya	Voya Small Company Port I	N/A	363,702
*	TIAA and CREF	TIAA Access Nuveen Large Cap Value Fund T4	N/A	362,869
	Cohen & Steers	Cohen & Steers Instl Realty Shares	N/A	342,895
*	TIAA and CREF	Nuveen Lifecycle 2030 R6	N/A	321,635
	JPMorgan	JPMorgan Large Cap Growth R6	N/A	314,279
*	TIAA and CREF	TIAA Access Nuveen Equity Index Fund T4	N/A	296,137
*	Voya	Voya TRwPr Divr MdCp Gr Pt I	N/A	284,896
*	Voya	Voya Inv Glob Portf - Init CI	N/A	205,866
*	TIAA and CREF	TIAA Access Lifecycle 2060 T4	N/A	201,914
*	TIAA and CREF	TIAA Access Nuveen Quant Small Cap Equity Fund T4	N/A	200,945
*	TIAA and CREF	TIAA Access Nuveen Mid Cap Value Fund T4	N/A	195,582
	Vanguard	Vanguard Total Bond Market Index Fund	N/A	190,769
	Fidelity	Fidelity VIP Growth Port I	N/A	184,636
*	TIAA and CREF	Nuveen Lifestyle Aggressive Gr R6	N/A	148,133
	Vanguard	Vanguard Small Cap Index Admiral Shares	N/A	147,945
*	TIAA and CREF	TIAA Access Nuveen Real Estate Securities Select Fund T4	N/A	144,000
*	TIAA and CREF	TIAA Access Sm-Cap BI Idx T4	N/A	133,598
*	TIAA and CREF	TIAA Access Lifecycle 2030 T4	N/A	133,428
*	TIAA and CREF	TIAA Access Nuveen Mid Cap Growth Fund T4	N/A	126,348
*	TIAA and CREF	TIAA Access Nuveen Core Equity Fund T4	N/A	113,671
	John Hancock	JHancock Disciplined Value Mid Cap R6	N/A	110,961
*	TIAA and CREF	TIAA Access Lifecycle 2035 T4	N/A	107,165
*	TIAA and CREF	Nuveen Lifecycle 2065 R6	N/A	99,416
	BlackRock	BlackRock Equity Dividend CI K	N/A	94,243

NATIONAL WOMEN'S LAW CENTER DC PLAN

**SCHEDULE H, LINE 4I, SCHEDULE OF ASSETS (HELD AT END OF YEAR)
FOR THE YEAR ENDED JUNE 30, 2024**

EIN: 52-1213010
Plan Number: 001

(a) Party-in-Interest	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
<u>Registered Investment Companies (Continued):</u>				
*	Voya	Voya Index Plus LargeCap Prt I	N/A	\$ 62,686
*	TIAA and CREF	CREF Inflation-Linked Bond R1	N/A	61,717
	American Funds	American Funds New World R6	N/A	55,856
	Fidelity	Fidelity VIP Eqty-Inc Prt I	N/A	54,438
	Vanguard	Vanguard Mid Cap Index Admiral	N/A	47,813
	Dodge & Cox	Dodge & Cox Intl Stock Fund	N/A	44,132
	Vanguard	Vanguard Explorer Fund	N/A	30,342
	Invesco	Invesco VI Amr Franchise Fd I	N/A	26,590
	BlackRock	BlackRock Mid Cap Growth Eq K	N/A	24,200
*	TIAA and CREF	TIAA Access Nuveen Large Cap Growth Fund T4	N/A	23,262
*	Voya	Voya Intermediate Bond Prt I	N/A	19,860
*	TIAA and CREF	Nuveen Core Plus Bond Fund	N/A	17,564
*	Voya	Voya Small Company Port I	N/A	11,515
	PIMCO	PIMCO Total Return Instl	N/A	11,014
*	TIAA and CREF	Tiaa Access Nuveen Large Cap Res Eq T4	N/A	9,456
*	TIAA and CREF	TIAA Access Lifecycle 2025 T4	N/A	7,067
*	Voya	Voya Index Plus MidCap Prt I	N/A	6,357
	American Century	American Century Small Cap Value R6	N/A	6,149
	Calvert	Calvert VP SRI Balanced Port	N/A	5,718
*	Voya	Voya Glo Hi Div Low Vol Prtf I	N/A	1,954
*	Voya	VoyIntlHiDivLow Vol Port-In	N/A	1,582
	Vanguard	Vanguard International Growth Adm	N/A	1,371
*	Voya	Voya Strategic Alloc Grw Prt I	N/A	677
	Invesco	Invesco VI Core Eqty Fund SI	N/A	405
*	Voya	Voya Invesco Eqty & Inc Pt I	N/A	239
*	TIAA and CREF	TIAA Access Lifecycle 2010 T4	N/A	87
<u>Non Benefit-Responsive Investment Contract:</u>				
*	TIAA and CREF	TIAA Traditional Non Benefit-Responsive	N/A	659,909
<u>Fully Benefit-Responsive Investment Contracts:</u>				
*	TIAA and CREF	TIAA Traditional Benefit-Responsive	N/A	1,514,689
*	TIAA and CREF	TIAA Stable Fund	N/A	147,862
*	Voya	Voya Fixed Account	N/A	3,314
<u>Pooled Separate Account:</u>				
*	TIAA and CREF	TIAA Real Estate	N/A	659,776
<u>Notes Receivable from Participants:</u>				
	Participants	Loans with interest rates ranging from 4.25% to 9.50% and maturities through March 15, 2029	-0-	67,761
			<u>\$ 28,786,900</u>	

* Denotes a party-in-interest.

N/A - Cost information is not required for participant directed investments.

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

Name of Plan:

▶ National Women's Law Center DC Plan

Employer Identification Number: ▶ 52-1213010

For plan year (beginning/ending): ▶

7/1/2023 to 6/30/2024

Plan number: ▶ 001

(a)	(b) Identity of issuer, 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		\$ 1,456,332.98
*	College Retirement Equities Fund variable annuities	TIAA Traditional Non Benefit Responsive		\$ 631,127.64
*	College Retirement Equities Fund variable annuities	TIAA Traditional Benefit Responsive 2		\$ 58,356.38
*	College Retirement Equities Fund variable annuities	TIAA Traditional Non Benefit Responsive 2		\$ 28,781.58
*	College Retirement Equities Fund variable annuities	TIAA Stable Value		\$ 147,861.55
*	College Retirement Equities Fund variable annuities	CREF Stock R1		\$ 1,596,172.30
*	College Retirement Equities Fund variable annuities	CREF Money Market R1		\$ 2,093,964.89
*	College Retirement Equities Fund variable annuities	CREF Social Choice R1		\$ 725,077.52
*	College Retirement Equities Fund variable annuities	CREF Global Equities R1		\$ 929,673.76
*	College Retirement Equities Fund variable annuities	CREF Growth R1		\$ 1,007,712.30
*	College Retirement Equities Fund variable annuities	CREF Equity Index R1		\$ 1,829,450.11
*	College Retirement Equities Fund variable annuities	CREF Inflation-Linked Bond R1		\$ 61,717.26
*	College Retirement Equities Fund variable annuities	TIAA Real Estate		\$ 659,775.80
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv Core Pl Bd T4		\$ 17,563.91
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv Equity Idx T4		\$ 296,137.21
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv Core Equity T4		\$ 113,671.39
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv Intl Equity T4		\$ 670,834.86
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv Lrg Cap Gr T4		\$ 23,261.75
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv Lrg Cap Val T4		\$ 362,869.38
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv LfCyc 2010 T4		\$ 86.54
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv LfCyc 2025 T4		\$ 7,066.61
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv LfCyc 2030 T4		\$ 133,428.27
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv LfCyc 2035 T4		\$ 107,165.15
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv LfCyc 2040 T4		\$ 456,401.29
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv LfCyc 2045 T4		\$ 924,965.46
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv LfCyc 2050 T4		\$ 524,905.15
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv Mid Cap Grw T4		\$ 126,347.82
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv Mid Cap Val T4		\$ 195,582.06
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv RlEstSecSel T4		\$ 143,999.91
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv Sm Cp Bl lx T4		\$ 133,598.38
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv Qt Sm Cp Eq T4		\$ 200,944.89
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv LgCp Res Eq T4		\$ 9,456.35
	College Retirement Equities Fund variable annuities	Participant Loan Fund		\$ 52,965.91
	College Retirement Equities Fund variable annuities	Participant Loan Fund (Deemed Distributed)		\$ 14,795.15
*	College Retirement Equities Fund variable annuities	CREF Core Bond R1		\$ 803,431.30
	College Retirement Equities Fund variable annuities	Nuveen Lifecycle 2025 R6		\$ 425,739.95
	College Retirement Equities Fund variable annuities	Nuveen Lifecycle 2030 R6		\$ 321,635.25
	College Retirement Equities Fund variable annuities	Nuveen Lifecycle 2035 R6		\$ 393,598.67
	College Retirement Equities Fund variable annuities	Nuveen Lifecycle 2040 R6		\$ 634,632.81
	College Retirement Equities Fund variable annuities	Nuveen Lifecycle 2045 R6		\$ 712,074.95
	College Retirement Equities Fund variable annuities	Nuveen Lifecycle 2050 R6		\$ 925,697.15
	College Retirement Equities Fund variable annuities	Nuveen Lifecycle 2055 R6		\$ 1,182,024.85
	College Retirement Equities Fund variable annuities	Nuveen Large Cap Resp Eq R6		\$ 917,135.85
	College Retirement Equities Fund variable annuities	Cohen&Steers Intl Realty Shar		\$ 342,895.41
	College Retirement Equities Fund variable annuities	PIMCO Total Return Instl		\$ 11,013.53
	College Retirement Equities Fund variable annuities	Vanguard Explorer Adm		\$ 30,342.24
	College Retirement Equities Fund variable annuities	Vanguard Small-Cap Idx Adm		\$ 147,945.04
	College Retirement Equities Fund variable annuities	Vanguard Ttl Bd Mkt Idx Adm		\$ 190,768.81
	College Retirement Equities Fund variable annuities	Vanguard Mid-Cap Idx Adm		\$ 47,812.62
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv LfCyc 2055 T4		\$ 366,355.76
*	College Retirement Equities Fund variable annuities	TIAA Access Nuv LfCyc 2060 T4		\$ 201,914.29
	College Retirement Equities Fund variable annuities	American Century Sm Cap Val R6		\$ 6,149.00
	College Retirement Equities Fund variable annuities	BlackRock Mid Cap Growth Eq K		\$ 24,200.26
	College Retirement Equities Fund variable annuities	Dodge & Cox Intl Stock Fund I		\$ 44,132.01
	College Retirement Equities Fund variable annuities	John Hancock Discip V Md Cp R6		\$ 110,961.02
	College Retirement Equities Fund variable annuities	BlackRock Equity Dividend Cl K		\$ 94,243.01
	College Retirement Equities Fund variable annuities	American Funds New World R6		\$ 55,856.22
	College Retirement Equities Fund variable annuities	Nuveen Lifecycle 2060 R6		\$ 523,404.94
	College Retirement Equities Fund variable annuities	Nuveen Lifecycle 2065 R6		\$ 99,416.14
	College Retirement Equities Fund variable annuities	Vanguard 500 Idx Adm		\$ 888,635.25
	College Retirement Equities Fund variable annuities	Vanguard Ttl Intl Stk Idx Adm		\$ 518,045.50
	College Retirement Equities Fund variable annuities	Vanguard Intl Growth Adm		\$ 1,370.62
	College Retirement Equities Fund variable annuities	JPMorgan Large Cap Growth R6		\$ 314,279.43
	College Retirement Equities Fund variable annuities	Nuveen Lifestyle Aggr Gr R6		\$ 148,133.03
	TIAA Total			\$ 26,225,896.42
	Voya Retirement Insurance and Annuity	Voya Growth and Income Port I		\$ 950,390.86
	Voya Retirement Insurance and Annuity	Voya Intermediate Bond Prt I		\$ 19,859.59
	Voya Retirement Insurance and Annuity	Voya Strategic Alloc Grw Prt I		\$ 677.93
	Voya Retirement Insurance and Annuity	Voya Index Plus LargeCap Prt I		\$ 62,685.96
	Voya Retirement Insurance and Annuity	Voya Glob Insights Fort Inst		\$ 205,866.02
	Voya Retirement Insurance and Annuity	VY TRwPr Divr MdCp Gr Pt I		\$ 284,897.51
	Voya Retirement Insurance and Annuity	VY Invesco Eqty & Inc Pt I		\$ 238.87
	Voya Retirement Insurance and Annuity	Voya Large Cap Growth Prt Ins		\$ 363,701.87
	Voya Retirement Insurance and Annuity	Voya Small Company Port I		\$ 11,514.78
	Voya Retirement Insurance and Annuity	Voya Index Plus MidCap Prt I		\$ 6,356.85
	Voya Retirement Insurance and Annuity	Invesco VI Core Eqty Fund Sl		\$ 404.58
	Voya Retirement Insurance and Annuity	Calvert VP SRI Balanced Port		\$ 5,717.65
	Voya Retirement Insurance and Annuity	VoyIntlHiDivLow Vol Port-In		\$ 1,582.23
	Voya Retirement Insurance and Annuity	Voya Glo Hi Div Low Vol Prft I		\$ 1,953.99
	Voya Retirement Insurance and Annuity	Fidelity VIP Eqty-Inc Prt I		\$ 54,437.84
	Voya Retirement Insurance and Annuity	Fidelity VIP Growth Port I		\$ 184,636.11
	Voya Retirement Insurance and Annuity	Fidelity VIP Contrafund Pt I		\$ 376,176.80
	Voya Retirement Insurance and Annuity	Invesco VI Amr Franchise Fd I		\$ 26,589.75
	Voya Retirement Insurance and Annuity	Voya Fixed Account (4550)		\$ 3,313.62
	Voya Total			\$2,561,002.81
	Grand Total			\$ 28,786,900