

<p>Form 5500</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p>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>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
---	---	--

Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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>XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT 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>XAVIER UNIVERSITY OF LOUISIANA</u></p> <p><u>1 DREXEL DRIVE</u> <u>NEW ORLEANS, LA 70125</u></p>	<p>1c Effective date of plan <u>11/01/1947</u></p> <p>2b Employer Identification Number (EIN) <u>72-0635884</u></p> <p>2c Plan Sponsor's telephone number <u>504-520-7667</u></p> <p>2d Business code (see instructions) <u>611000</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.	10/15/2025	EDWARD J. PHILLIPS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2025	EDWARD J. PHILLIPS
	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	883
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)	571
	6a(2)	563
	6b	0
	6c	304
	6d	867
	6e	5
	6f	872
	6g(1)	819
	6g(2)	796
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:
2G 2L 2M 2T 3D

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

9a Plan funding arrangement (check all that apply)	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 2024 Form M-1 annual report. If the plan was not required to file the 2024 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

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 XAVIER UNIVERSITY OF LOUISIANA	D Employer Identification Number (EIN) 72-0635884

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	151243	625	01/01/2024	12/31/2024

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
---	--------------------------------------

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	27164057
5	Current value of plan's interest under this contract in separate accounts at year end.....	57131994
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) <input type="checkbox"/> individual policies (2) <input type="checkbox"/> group deferred annuity (3) <input type="checkbox"/> other (specify) ▶	
f	If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ <input type="checkbox"/>	
7	Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)	
a	Type of contract: (1) <input type="checkbox"/> deposit administration (2) <input type="checkbox"/> immediate participation guarantee (3) <input checked="" type="checkbox"/> guaranteed investment (4) <input type="checkbox"/> other ▶	
b	Balance at the end of the previous year	7b 27929792
c	(1) Contributions deposited during the year	7c(1) 399716
	(2) Dividends and credits.....	7c(2)
	(3) Interest credited during the year.....	7c(3) 1255931
	(4) Transferred from separate account	7c(4) 3495172
	(5) Other (specify below)..... ▶	7c(5)
	(6) Total additions	7c(6) 5150819
d	Total of balance and additions (add lines 7b and 7c(6))	7d 33080611
e	Deductions:	
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1) 3433228
	(2) Administration charge made by carrier.....	7e(2)
	(3) Transferred to separate account	7e(3) 2453528
	(4) Other (specify below)..... ▶ MISCELLANEOUS DEBITS, INCLUDING INVESTMENT LOSSES AND TRANSFERS FROM FULLY ALLOCATED CONTRACTS	7e(4) 29798
(5) Total deductions	7e(5) 5916554	
f	Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f 27164057

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)
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)
	(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)
	(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

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 XAVIER UNIVERSITY OF LOUISIANA	D Employer Identification Number (EIN) 72-0635884

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	666342	242	01/01/2024	12/31/2024

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 42377	(b) Total amount of fees paid 0
---	--

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
SPALLUTO MISSE CHARLA **2424 EDENBORN AVE**
STE 680
METAIRIE, LA 70001

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
19247			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
TRAHAN KENNETH R **2424 EDENBORN AVE**
STE 680
METAIRIE, LA 70001

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
13349			3

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

GOLL C BRANDON

5525 GALERIA DR
STE A
BATON ROUGE, LA 70816

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9906			3

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

DARCE SHIRL J

2424 EDENBORN AVE
STE 680
METAIRIE, LA 70001

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
21			3

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

DESSELLE JOHN B

3025 NEW HIGHWAY 51
STE B
LA PLACE, LA 70068

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-146			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	

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	1729209
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	20757502

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 ACCOUNT

b Balance at the end of the previous year **7b** 1741895

c Additions: (1) Contributions deposited during the year	7c(1)	150322
	7c(2)	
	7c(3)	45429
	7c(4)	
	7c(5)	5349
▶ MISCELLANEOUS LOAN REPAYMENTS		

(6) Total additions **7c(6)** 201100

d Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 1942995

e Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	157929
	7e(2)	196
	7e(3)	55661
	7e(4)	
(4) Other (specify below)		

(5) Total deductions **7e(5)** 213786

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**)..... **7f** 1729209

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)
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)
	(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)
	(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> 2024 This Form is Open to Public Inspection.
--	--	---

For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 XAVIER UNIVERSITY OF LOUISIANA	D Employer Identification Number (EIN) 72-0635884	

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 & ANNUITY

71-0294708

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

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

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

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

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

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

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

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

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

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

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

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

VOYA RETIREMENT INSURANCE & ANNUITY

71-0294708

(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	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	204	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:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <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> 2024 This Form is Open to Public Inspection.
---	--	---

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT 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>XAVIER UNIVERSITY OF LOUISIANA</u>	D Employer Identification Number (EIN) <u>72-0635884</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	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
<u>13-1624203-004</u>	<u>P</u>		<u>4198305</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)

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)

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> 2024 This Form is Open to Public Inspection
--	--	--

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 XAVIER UNIVERSITY OF LOUISIANA	D Employer Identification Number (EIN) 72-0635884

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)	155483	157970
(2) Participant contributions	1b(2)	236441	222598
(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)	490577	601743
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	4206300	4198305
(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)	94232754	106756674
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	29671687	28893266
(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	128993242	140830556
Liabilities			
g Benefit claims payable.....	1g	1457116	1774843
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	1457116	1774843
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	127536126	139055713

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)	2015508	
(B) Participants.....	2a(1)(B)	2230211	
(C) Others (including rollovers).....	2a(1)(C)	168129	
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		4413848
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)	30297	
(F) Other.....	2b(1)(F)	1301360	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		1331657
(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)	2736175	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		2736175
(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)		-174137
(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)		11562290
c Other income	2c		23214
d Total income. Add all income amounts in column (b) and enter total	2d		19893047

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	6788798	
(2) To insurance carriers for the provision of benefits	2e(2)	1583162	
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		8371960
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)	1500	
(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)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		1500
j Total expenses. Add all expense amounts in column (b) and enter total	2j		8373460

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		11519587
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: SEAN BRUNO, CPAS

(2) EIN: 26-4006936

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:

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.)

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.)

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.)

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.)

e Was this plan covered by a fidelity bond?

f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?

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?

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?

i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)

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.)

k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?

l Has the plan failed to provide any benefit when due under the plan?

m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)

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.

	Yes	No	Amount
4a	X		968992
4b		X	
4c		X	
4d		X	
4e	X		500000
4f		X	
4g		X	
4h		X	
4i	X		
4j		X	
4k		X	
4l		X	
4m		X	
4n			

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

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

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

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

SCHEDULE R (Form 5500) <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> 2024 This Form is Open to Public Inspection.
--	---	---

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>XAVIER UNIVERSITY OF LOUISIANA DEFINED CONTRIBUTION RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>XAVIER UNIVERSITY OF LOUISIANA</u>	D Employer Identification Number (EIN) <u>72-0635884</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		0
---	--	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 82-2826183 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 J500954A.

**XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
EIN: 72-0635884 PLAN NUMBER: 001**

**FINANCIAL AUDITS TOGETHER WITH
INDEPENDENT AUDITORS' REPORT
FOR THE YEARS ENDED
DECEMBER 31, 2024 AND 2023**

Sean M. Bruno
Certified Public Accountants, LLC

TABLE OF CONTENTS

	<u>PAGE</u>
INDEPENDENT AUDITORS' REPORT	1
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS AS OF DECEMBER 31, 2024 AND 2023.....	7
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2024	8
NOTES TO THE FINANCIAL STATEMENTS	9
SUPPLEMENTAL SCHEDULES:	
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF THE YEAR)	33
SCHEDULE H, LINE 4j - SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)	35
FINANCIAL SCHEDULES	37

Sean M. Bruno
Certified Public Accountants, LLC

Member
American Institute of
Certified Public Accountants
Society of Louisiana
Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

To the Plan Administrator and Participants of
the **Xavier University of Louisiana Defined Contribution Retirement Plan**

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

I have performed audits of the financial statements of **Xavier University of Louisiana Defined Contribution Plan 151243 (the Plan)**, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

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

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

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with 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** 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 maintain 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 Financial Statements

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

Auditor's Responsibilities for the Audit of the Financial Statements, continued

In performing an audit in accordance with GAAS, I:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risk of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risk. 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** 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 my judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about **the Plan** ability to continue as a going concern for a reasonable period of time.

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

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

I am 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 I identified during the audit.

Other Matter - Supplemental Schedules Required by ERISA

The supplemental schedules of (1) assets held at the end of year as of December 31, 2024; (2) assets acquired and disposed of within the year for the year ended December 31, 2024; (3) financial transactions schedule for the year ended December 31, 2024, beginning at page 33, are presented for purposes of additional analysis and are not a required part of the financial statements, but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, I compared such information to the related certified investment information.

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

In my opinion –

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

To the Plan Administrators and Participants
Xavier University of Louisiana Defined Contribution Plan 151243
Page 6

Supplemental Schedules Required by ERISA, continued

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



Sean M. Bruno
CERTIFIED PUBLIC ACCOUNTANTS
New Orleans, Louisiana

October 13, 2025

Sean M. Bruno
Certified Public Accountants, LLC

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
Assets:		
Investments, at fair value (NOTES 3, 5 and 8)	\$ 139,848,245	\$ 128,110,741
Loans receivable (NOTE 1)	<u>601,743</u>	<u>490,577</u>
Total investments	<u>140,449,988</u>	<u>128,601,318</u>
Contributions receivable (NOTE 2):		
Employer	157,970	155,483
Participants	<u>222,598</u>	<u>236,441</u>
Total contributions receivable	<u>380,568</u>	<u>391,924</u>
Total Assets	<u><u>140,830,556</u></u>	<u><u>128,993,242</u></u>
Liabilities:		
Due to the Voluntary Supplemental Retirement Plan (NOTE 11)	<u>1,774,843</u>	<u>1,457,116</u>
Total Liabilities	<u>1,774,843</u>	<u>1,457,116</u>
Net Assets:		
Net assets available for benefits	<u>139,055,713</u>	<u>127,536,126</u>
Total Liabilities and Net Assets	<u><u>\$ 140,830,556</u></u>	<u><u>\$ 128,993,242</u></u>

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

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS
AVAILABLE FOR BENEFITS FOR THE
YEAR ENDED DECEMBER 31, 2024

Investment Income:

Net appreciation in fair value of investments and realized gains	\$ 11,416,419
Interest	1,731,411
Dividends	2,336,421
Other investment income	23,214
Subtotal	<u>15,507,465</u>
Less investment expenses	(415,965)
Total investment income	<u>15,091,500</u>

Contributions:

Employer	2,015,508
Participants	2,230,211
Participants rollovers and other	168,129
Total contributions	<u>4,413,848</u>

Deductions:

Benefits paid to participants	(7,957,495)
Transfers out	(28,267)
Total deductions	<u>(7,985,762)</u>

Net increase in net assets available for benefits	11,519,587
--	------------

Net assets available for benefits:

Beginning of year	<u>127,536,126</u>
End of year	<u><u>\$ 139,055,713</u></u>

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

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 1 - Description of Plan:

The following description of the **Xavier University of Louisiana Defined Contribution Retirement Plan (the Plan)** provides only general information. Participants should refer to **the Plan** agreement for a more complete description of **the Plan's** provisions.

General

The Plan is a 403(b) defined contribution plan covering all full-time employees of **Xavier University of Louisiana (the University)**. **The Plan** is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). **The Plan** has an effective date of November 1, 1947 and was amended and restated effective January 1, 2012.

The responsibility for operation and administration of **the Plan** (except for investment management and control of assets) is vested in **the Plan Administrator**, an officer of **Xavier University of Louisiana**.

The Custodian function of **the Plan** is performed by Teachers Insurance and Annuity Association - College Retirement Equities Fund (TIAA-CREF) and VOYA Financial Advisers (**the Custodians**). **The Custodians** receive and hold contributions made to **the Plan** in trust and invest those contributions as directed by participants and according to the policies established by **the Plan** documents. **The Custodians** also make payouts from **the Plan** in accordance with **the Plan** document.

Eligibility

Full-time employees are eligible to participate in **the Plan** and elect to have elective deferrals or Roth 403(b) contributions made on their behalf hereunder immediately upon becoming employed by **the University**. For **University** contributions and employee mandatory contributions, each employee who has met the applicable age and service requirements, if any, as specified in **the Plan** provisions section, shall be eligible to have such contribution(s) made to their account under **the Plan**.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 1 - Description of Plan, Continued:

Contributions

Each year participants may contribute up to six (6) percent of pretax annual compensation each pay period, as defined in **the Plan**. Participants are eligible to make catch-up contributions before the end of **the Plan** year and may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of their contributions into various investment options offered by **the Plan**.

The Plan currently offers mutual funds, variable annuity funds, and two guaranteed annuity accounts as investment options for participants. **The University** contributes a match up to six (6) percent of the employees' base compensation. The matching **University** and employee contributions are invested directly with **the Custodians**.

Participant's Accumulation Account

Each participant's accumulation account is credited with the participant's contribution and allocations of (a) **the University's** contribution and, (b) **the Plan's** earnings, and also charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's accumulation account. Participants may direct their contributions into a variety of investment options offered by **the Custodians**.

Vesting

Participants are immediately fully vested in their contributions and **the University's** contributions plus actual earnings thereon.

Participant Loans

Loans shall be permitted under **the Plan** to the extent elected by **the University** in **the Plan** provisions section and to the extent permitted by the individual agreements controlling the account assets from which the loan is made and by which the loan will be secured.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 1 - Description of Plan, Continued:

Participant Loans, Continued

- No loan to a participant under the Plan may exceed the lesser \$50,000, reduced by the greater of (i) the outstanding balance on any loan from **the Plan** to the participant on the date the loan is made or (ii) the highest outstanding balance on loans from **the Plan** to the participant during the one-year period ending on the day before the date the loan is approved by **the Plan Administrator** (not taking into account any payments made during such one-year period); or
- One half of the value of the participant's vested account balance (as of the valuation date immediately preceding the date on which such loan is approved by **the Plan Administrator**). For purposes of Section 4.3 of the Plan document, any loan from any other plan maintained by **the University**, and any related employer shall be treated as if it were a loan made from **the Plan**, and the participant's vested interest under any such other plan shall be considered a vested interest under this **Plan**; provided, however, that the provisions of Section 4.3 of the Plan shall not be applied so as to allow the amount of a loan to exceed the amount that would otherwise be permitted in the absence of Section 4.3 of **the Plan**.

At December 31, 2024 and 2023, participants had outstanding **Plan** loan balances totaling \$601,743 and \$490,577, respectively.

Payment of Benefits

On termination of service due to death, disability or retirement, a participant may elect to receive either a one-time, lump-sum amount equal to ten (10) percent of the participant's accumulation account, or annual installments either under the Joint and Survivor Annuity, Minimum Distribution Annuity or the Limited Periodic Withdrawal Option. If a participant dies before the start of retirement benefit payments, the full current value of the accumulation account is payable to the beneficiary (ies) from the investment option selected by the participant.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 1 - Description of Plan, Continued:

Payment of Benefits, Continued

In the event of financial hardship, a participant may receive a distribution from their account. Any distribution of this type must be on account of the employee's immediate and heavy financial need as described in **the Plan** document. Participants receiving hardship distributions must cease making elective deferrals for a period of six months following such distributions.

Forfeited Accounts

As of December 31, 2024 and 2023, **the Plan** did not have a forfeited non-vested accumulation account.

NOTE 2 - Summary of Significant Accounting Principles:

Basis of Accounting

The financial statements of **the Plan** are prepared on the accrual basis of accounting. **The Plan** follows accounting standards set by the Financial Accounting Standards Board (FASB), which establishes accounting principles generally accepted in the United States of America (U.S. GAAP) that are followed in reporting the statements of net assets available for benefits and the statement of changes in net assets available for benefits. References to U.S. GAAP issued by the FASB in these notes are to the FASB Accounting Standards Codification, referred to as the ASC.

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 2 - Summary of Significant Accounting Principles, Continued:

Investment Valuation and Income Recognition

The Plan follows the fair value measurement and disclosure requirements of FASB ASC 820. See Note 5 for a discussion of fair value measurements.

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

Subsequent Events

The Plan Administrator has evaluated subsequent events through the date that the financial statements were available to be issued, September 24, 2025, and determined that no events occurred that required disclosure. No subsequent events occurring after this date have been evaluated for inclusion in these financial statements.

Benefits Paid to Participants

Benefits are recorded when paid.

Administrative Expenses

All expenses of maintaining **the Plan** are offset against the investment earnings of the participants. Such amounts totaled \$415,965 as of December 31, 2024.

Reclassifications

Certain December 31, 2023 amounts have been reclassified to conform with the December 31, 2024 financial statement presentation.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 2 - Summary of Significant Accounting Principles, Continued:

Contributions Receivable

Contributions receivable totaling \$380,568 and \$391,924 as of December 31, 2024 and 2023 represent employee deductions and the related employee match for the month of December that were transmitted to **the Custodians** by **the University** during the subsequent month.

NOTE 3 - Investments:

The Custodians hold **the Plan's** investments and execute all investment transactions. All investment information disclosed in the accompanying financial statements and schedules, including investments held at December 31, 2024 and 2023 and net appreciation/depreciation in fair value of investments, and dividends for the year ended December 31, 2024 and 2023, was obtained or derived from information supplied to **the Plan Administrator** and certified as complete and accurate by **the Custodians**.

During 2024, **the Plan's** investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by \$11,416,419.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 4- Guaranteed Investment Contract with Teachers Insurance and Annuity Association and VOYA Life Insurance and Annuity Company:

Teachers Insurance and Annuity Association

The TIAA Traditional Annuity is a non-benefit responsive guaranteed fixed annuity investment contract with Teachers Insurance and Annuity Association (TIAA). Plan participants' accounts are credited with actual earnings on the underlying investments and charged for participant withdrawals and administrative expenses. TIAA is contractually obligated to repay the principal and a specified interest rate that is guaranteed to **the Plan**. The guaranteed investment contract is presented on the face of the statement of net assets available for benefits at fair value.

Fair value represents contributions made under the contract, plus earnings, less withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investments. The fair value of the investment contract at December 31, 2024 and 2023 was \$27,164,057 and \$27,929,792 respectively.

The TIAA Traditional Annuity is offered through a variety of contracts, including Retirement Annuities (RAs), Group Retirement Annuities (GRAs), Supplemental Retirement Annuities (SRAs), Group Supplemental Retirement Annuities (GSRAs), Retirement Choice (RC) and Retirement Choice PLUS (RCP) annuities, IRAs and Keoghs. The type of contract through which a participant allocates to the TIAA Traditional Annuity determines the applicability of certain account features, such as the guaranteed minimum interest rate, additional amounts paid, the degree of liquidity of the participant's account and the options for receiving income upon retirement.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 4- Guaranteed Investment Contract with Teachers Insurance and Annuity Association and VOYA Life Insurance and Annuity Company, Continued:

Teachers Insurance and Annuity Association, Continued

The TIAA Traditional Annuity guarantees principal and pays a guaranteed minimum interest rate during the accumulation phase-generally 3%, but between 1% and 3% for some contracts.

Each participant dollar applied to the account purchases a guaranteed amount of lifetime annuity income, paid to participants when they annuitize. Under most TIAA Traditional Annuity contracts, the minimum guaranteed interest rate during the payout phase is 2.5%.

Under RA contracts, participants may only make withdrawals in the form of a life annuity or in ten (10) installments, with the first installment paid immediately so that the "10-year" withdrawal period actually occurs over a period of nine (9) years and one (1) day.

VOYA Life Insurance and Annuity Company

The VOYA Fixed Plus Account is available through an annuity contract issued by VOYA Life Insurance and Annuity Company (VLIAC). The VOYA Fixed Plus Account is an obligation of VLIAC's general account which supports all of the company's insurance and annuity commitments. The interest rate guaranteed under the contract is subject to VLIAC's claims-paying ability.

The VOYA Fixed Plus Account is intended to be a long-term investment for participants seeking stability of principal. The assets supporting it are invested by VLIAC with this goal in mind. Therefore, VLIAC may impose limitations on the ability to move funds out of this investment option. These limitations have enabled VLIAC to provide stable credited interest rates, which historically have not varied significantly from month to month despite the general market's volatility in new money interest rates.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 4- Guaranteed Investment Contract with Teachers Insurance and Annuity Association and VOYA Life Insurance and Annuity Company, Continued:

VOYA Life Insurance and Annuity Company, Continued

Transfers and partial withdrawals from the VOYA Fixed Plus Account are generally limited to 20% of a participant's VOYA Fixed Plus Account balance per year. Full withdrawals from the VOYA Fixed Plus Account may be made for death, certain retirement income payments, and small account balances. Full withdrawals from the VOYA Fixed Plus Account for other reasons are limited and generally must be made in five-installment payments over five years. Depending on the terms of a participant's contract, other waivers to the withdrawal limitations may also apply. All withdrawals are subject to Internal Revenue Code restrictions.

The VOYA Fixed Plus Account guarantees principal and a minimum guaranteed interest rate for the life of the contract, as well as featuring two declared interest rates: a current rate, determined at least monthly, and a guaranteed minimum floor rate declared for a defined period – currently one calendar year. The guaranteed minimum floor rate may change after the defined period, but it will never be lower than the minimum guaranteed interest rate. The current rate, the guaranteed minimum floor rate and the minimum guaranteed interest rate are expressed as annual effective yields. Taking the effect of compounding into account, the interest credited to a participant's account daily yields the then current credited rate.

Beginning with the tenth anniversary of the effective date of a participant's account, VOYA Fixed Plus Account balances are credited with an interest rate at least 0.25% higher than the then-declared interest rate for the participant's account before the tenth anniversary.

VLIAC's determination of credited interest rates reflects a number of factors, including mortality and expense risks, interest rate guarantees, the investment income earned on invested assets and the amortization of any capital gains and/or losses realized on the sale of invested assets. Under this option, VLIAC assumes the risk of investment gain or loss by guaranteeing the principal amount a participant allocates to this option and promising a minimum interest rate during the accumulation period and also throughout the annuity payout period, if applicable.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 4- Guaranteed Investment Contract with Teachers Insurance and Annuity Association and VOYA Life Insurance and Annuity Company, Continued:

VOYA Life Insurance and Annuity Company, Continued

As of December 31, 2024 and 2023, the fair value of the investment contract was \$1,729,209 and \$1,741,895 respectively.

NOTE 5 - Fair Value Measurements:

In accordance with ASC Topic 820, fair value is defined as the price that **the Plan** would receive to sell an asset or pay to transfer a liability in a timely transaction with an independent buyer in the principal market, or in the absence of a principal market, the most advantageous market for the asset or liability.

ASC 820 also establishes a three-tier hierarchy to distinguish between (1) inputs that reflect the assumptions market participants would use in pricing an asset or liability developed based on market data obtained from sources independent of the reporting entity (observable inputs) and (2) inputs that reflect the reporting entity's own assumptions about the assumptions market participants would use in pricing an asset or liability developed based on the best information available in the circumstances (unobservable inputs) and to establish classification of fair value measurements for disclosure purposes.

Various inputs are used in determining the value of **the Plan's** assets or liabilities. Investments measured and reported at fair value are classified and disclosed in one of the following categories:

Level 1 - Quoted prices are available in active markets for identical investments as of the reporting date.

Level 2 – Significant other observable inputs. Pricing inputs are other than quoted prices in active markets, which are either directly or indirectly observable as of the reporting date, and fair value is determined through the use of models or other valuation methodologies including inputs that are derived principally from or corroborated by observable market data by correlation or other means.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 - Fair Value Measurements, Continued:

Level 3 - Significant unobservable inputs for the investment that include situations where there is little, if any, market activity. The inputs into the determination of fair value require significant management judgment or estimation.

The availability of observable inputs can vary from security to security and is affected by a wide variety of factors, including, for example, the type of security, whether the security is new or not yet established in the marketplace, the liquidity of markets, and other characteristics particular to the security. To the extent that valuation is based on models or inputs that are less observable or unobservable in the market, the determination of fair value requires more judgment. Accordingly, the degree of judgment exercised in determining fair value is greatest for instruments categorized in Level 3. The inputs or methodology used for valuing securities are not necessarily an indication of the risk associated with investing in those securities.

A description of the valuation methodologies used for assets measured at fair value are as follows:

The fair values of the TIAA-CREF Funds, the TIAA-CREF Lifecycle Funds, College Retirement Equities Funds, the TIAA Real Estate Account, the VOYA Pooled Separate Accounts, the TIAA-CREF Traditional Annuity, and the VOYA Fixed Income Annuity are based upon the underlying holdings, which are considered to be the best approximation of fair value.

Exchange-Traded Equity Securities, Common and Preferred Stock

Equity securities listed or traded on a national market or exchange are valued based on their sale price on such market or exchange at the close of business on the date of valuation, or at the mean of the closing bid and asked prices if no sale is reported. To the extent these securities are actively traded and valuation adjustments are not applied, they are categorized in Level 1 of the fair value hierarchy. Foreign investments are valued at the last sale price or official closing price reported on the exchange where traded and converted to U.S. dollars at the prevailing rates of exchange on the date of valuation. For events affecting the value of foreign securities between the time when the exchange on which they are traded closes

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 - Fair Value Measurements, Continued:

Exchange-Traded Equity Securities, Common and Preferred Stock, Continued

and the time when the account's net assets are calculated, such securities will be valued at fair value in accordance with generally accepted procedures. Foreign securities are generally categorized in Level 2 of the fair value hierarchy.

Debt Securities

Debt securities will generally be valued using prices provided by a pricing service that may employ various indications of value including but not limited to broker-dealer quotations. Certain debt securities, other than money market instruments, are valued based on the most recent bid price or the equivalent quoted yield for such securities (or those of comparable maturity, quality and type). Debt securities are generally categorized in Level 2 of the fair value hierarchy; in instances where prices, yields or any other key inputs are unobservable, they are categorized in Level 3 of the hierarchy.

Real Estate Properties, Real Estate Joint Ventures, and Limited Partnerships (Real Estate)

Real estate underlying holdings are generally valued based upon independent third party appraisals and independent pricing sources which are considered by **the Plan Administrator** to be the best approximation of fair value. This investment is classified within Level 3 of the fair value hierarchy.

Traditional Annuity

Investments in TIAA Traditional Annuity and the VOYA Fixed Income Annuity contracts are reported at contract value, which approximates fair value. As these investments are contract-based, observable prices for identical or similar investments do not exist and, accordingly, these investments are valued using unobservable inputs (Level 3). The contract value equals the accumulated cash contributions and interest credited to the contract, less any withdrawals. See also Note 4 for a discussion of the TIAA Traditional Annuity and the VOYA Fixed Income Annuity.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 - Fair Value Measurements, Continued:

Investments in Registered Investment Companies

These investments are valued at their net asset value on the valuation date. These investments are categorized in Level 1 of the fair value hierarchy.

Investments

Short-term investments, excluding investments in registered investment companies, with maturities of 60 days or less are valued at amortized cost. Short-term investments with maturities in excess of 60 days are valued in the same manner as debt securities. Short-term investments are generally categorized in Level 2 of the fair value hierarchy.

Debt, equity securities, and the traditional annuity investments classified within Level 3 have significant unobservable inputs, as they trade infrequently or not at all. Inputs used may include the original transaction price, recent transactions in the same or a similar market, and subsequent rounds of financing. When observable prices are not available, these investments are valued using one or more valuation techniques described below:

- **Market Approach:** This approach uses prices and other relevant information generated by market transactions involving identical or comparable assets or liabilities.
- **Income Approach:** This approach determines a valuation by discounting future cash flows.
- **Cost Approach:** This approach is based on the principle of substitution and the concept that a market participant would not pay more than the amount that would currently be required to replace the asset.

Although a secondary market exists for these investments, it is not active and individual transactions are typically not observable.

The valuation methodologies previously described for **the Plan** investments may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 - Fair Value Measurements, Continued:

Investments, Continued

valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The Plan obtains the majority of the prices used in the valuation of its investments from a pricing service that is utilized by either the Investment Managers or **the Custodians**. The pricing service utilizes industry standard pricing models that consider various inputs, including benchmark yields, reported trades, broker/dealer quotes, issuer spreads and benchmark securities as well as other relevant economic measures. As a result of discussions with **the Custodians**, **the Plan Administrator** is of the opinion that the prices received from the pricing service are a reliable representation of exit prices.

ASU No. 2010-06 requires disclosures and clarifies existing disclosure requirements about fair value measurements. ASU 2010-06 requires (a) disclosure of gross significant transfers in and/or out between Levels 1 and 2 and the reasons for those transfers, (b) disclosure of all transfers in/out of Level 3 (significant transfers to be presented gross) and the reasons for those transfers, and (c) purchases, sales, issuances and settlements to be disclosed separately (i.e., gross) within the Level 3 roll forward. ASU 2010-06 also clarifies (a) the levels of disaggregation in presenting fair value disclosures for each class of assets and liabilities and (b) the disclosures about valuation techniques and inputs that are required for fair value measurements that fall within either Level 2 or 3.

ASU 2011-04, which is effective for fiscal years ending after December 15, 2011, requires additional disclosures with a particular focus on Level 3 measurements.

ASU 2011-04 stipulates that quantitative information about significant unobservable inputs used in the Level 3 fair value measurement and a description of the Level 3 valuation processes be disclosed. Additionally, for nonfinancial assets, a nonpublic entity must disclose why the asset is being used in a manner different from its highest and best use.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 - Fair Value Measurements, Continued:

Investments, Continued

In accordance with ASC 820, certain investments measured at fair value using the net asset value per share practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the Statements of assets and liabilities. The tables on the following pages summarize the valuation of **the Plan's** investments measured at fair value by the FASB ASC 820 fair value hierarchy levels as of December 31, 2024 and 2023:

Assets at Fair Value as of December 31, 2024

<u>Description</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>	<u>Total</u>
Recurring Fair Value Measurements:					
TIAA Traditional Annuity	\$ -	\$ -	\$ 27,164,057.00	\$ -	\$ 27,164,057
TIAA Real Estate					-
Real estate investment trusts	-	-	3,978,368	-	3,978,368
Marketable securities	-	219,937	-	-	219,937
Total TIAA Real Estate	-	219,937	3,978,368	-	4,198,305
TIAA-CREF Lifecycle					-
Registered Investments	14,360,478	-	-	763,855	15,124,333
Short-term investments	-	152,771	-	-	152,771
Total TIAA-CREF Lifecycle	14,360,478	152,771	-	763,855	15,277,104
TIAA-CREF Real Estate Securities					-
Common Stock	1,302,794	-	-	-	1,302,794
Short-term investments	-	6,678	-	-	6,678
Total TIAA-CREF Real Estate	1,302,794	6,678	-	-	1,309,472
TIAA-CREF Equity Funds					-
Common Stock	12,675,560	3,602,937	-	-	16,278,496
Short-term investments	-	200,411	-	-	200,411
Total TIAA-CREF Equity Funds	12,675,560	3,803,347	-	-	16,478,907
CREF-Equity Funds					-
Common Stock	33,734,732	8,488,456	-	-	42,223,188
All other	13,649	99,426	-	-	113,075
Short-term investments	-	172,898	-	-	172,898
Total CREF-Equity Funds	33,748,381	8,760,780	-	-	42,509,161

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 - Fair Value Measurements, Continued:
Investments, Continued

Assets at Fair Value as of December 31, 2024

<u>Description</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>	<u>Total</u>
CREF Social Choice					-
Bonds	-	1,237,574	-	-	1,237,574
Common Stock	1,273,389	537,771.76	-	-	1,811,161.07
All other	22,290	-	-	-	22,289.68
Short-term investments	-	12,984	-	-	12,984.45
Total CREF Social Choice	1,295,679	1,788,330	-	-	3,084,009
CREF Bond Market	4,175	3,588,185	-	-	3,592,360
CREF Inflation Linked Bond	3,177	1,708,990	-	-	1,712,167
CREF Money Market					-
Short-term investments	-	2,035,992	-	-	2,035,992
Total CREF Money Market	-	2,035,992	-	-	2,035,992
VOYA Equity Funds					-
Common and preferred stock	13,716,260	742,172	37,865	-	14,496,297
International	220,609	337,104	8,170	-	565,883
All other	31,723	37,624	-	-	69,347
Short-term investments	625,993	272,714	-	-	898,707
Total VOYA Equity Funds	14,594,585	1,389,614	46,035	-	16,030,234
VOYA Fixed Plus Annuity	-	-	1,729,209	-	1,729,209
VOYA Bond Mutual Funds	-	3,529,731	2,562	-	3,532,293
VOYA Solution					-
Equity Mutual Fund	1,194,976	-	-	-	1,194,976
Total VOYA Solution	1,194,976	-	-	-	1,194,976
Total Recurring Fair Value Measurements	\$ 79,179,804	\$ 26,984,356	\$ 32,920,230	\$ 763,855	\$ 139,848,245

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 - Fair Value Measurements, Continued:
Investments, Continued

Assets at Fair Value as of December 31, 2023

<u>Description</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>	<u>Total</u>
Recurring Fair Value Measurements:					
TIAA Traditional Annuity	\$ -	\$ -	\$ 27,929,792.13	\$ -	\$ 27,929,792.13
TIAA Real Estate					-
Real estate investment trusts	-	-	4,058,305	124,783	4,183,088
Marketable securities	-	23,212	-	-	23,212
Total TIAA Real Estate	-	23,212	4,058,305	124,783	4,206,300
TIAA-CREF Lifecycle					-
Registered Investments	13,570,109	-	-	844,168	14,414,277
Short-term investments	-	14,283	-	-	14,283
Total TIAA-CREF Lifecycle	13,570,109	14,283	-	844,168	14,428,561
TIAA-CREF Real Estate Securities					-
Common Stock	1,160,128	-	-	-	1,160,128
Short-term investments	-	5,947	-	-	5,947
Total TIAA-CREF Real Estate	1,160,128	5,947	-	-	1,166,075
TIAA-CREF Equity Funds					-
Common Stock	10,470,138	3,289,286	-	-	13,759,424
Short-term investments	-	169,783	-	-	169,783
Total TIAA-CREF Equity Funds	10,470,138	3,459,070	-	-	13,929,207
CREF-Equity Funds					-
Common Stock	28,597,473	8,087,363	-	-	36,684,836
All other	3,357	205,440	-	-	208,797
Short-term investments	-	114,752	-	-	114,752
Total CREF-Equity Funds	28,600,829	8,407,555	-	-	37,008,384

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 - Fair Value Measurements, Continued:
Investments, Continued

Assets at Fair Value as of December 31, 2023, Continued

<u>Description</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>	<u>Total</u>
CREF Social Choice					-
Bonds	-	1,220,067	-	-	1,220,067
Common Stock	1,487,906	541,520	-	-	2,029,426
All other	25,229	135,364	-	-	160,593
Short-term investments	-	826	-	-	826
Total CREF Social Choice	<u>1,513,135</u>	<u>1,897,777</u>	<u>-</u>	<u>-</u>	<u>3,410,912</u>
CREF Bond Market	<u>11,565</u>	<u>3,245,801</u>	<u>-</u>	<u>-</u>	<u>3,257,366</u>
CREF Inflation Linked Bond	<u>5,003</u>	<u>1,510,854</u>	<u>-</u>	<u>-</u>	<u>1,515,857</u>
CREF Money Market					-
Short-term investments	-	2,011,246	-	-	2,011,246
Total CREF Money Market	<u>-</u>	<u>2,011,246</u>	<u>-</u>	<u>-</u>	<u>2,011,246</u>
VOYA Equity Funds					-
Common and preferred stock	11,453,087	646,614	30,339	-	12,130,039
International	209,864	320,686	7,772	-	538,322
All other	34,883	31,938	-	-	66,821
Short-term investments	563,901	251,266	-	-	815,167
Total VOYA Equity Funds	<u>12,261,735</u>	<u>1,250,503</u>	<u>38,110</u>	<u>-</u>	<u>13,550,348</u>
VOYA Fixed Plus Annuity	<u>-</u>	<u>-</u>	<u>1,741,895</u>	<u>-</u>	<u>1,741,895</u>
VOYA Bond Mutual Funds	<u>-</u>	<u>3,165,295</u>	<u>2,211</u>	<u>-</u>	<u>3,167,506</u>
VOYA Solution					-
Equity Mutual Fund	787,291	-	-	-	787,291
Total VOYA Solution	<u>787,291</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>787,291</u>
Total Recurring Fair Value Measurements	<u>\$ 68,379,933</u>	<u>\$ 24,991,542</u>	<u>\$ 33,770,314</u>	<u>\$ 968,952</u>	<u>\$ 128,110,741</u>

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 - Fair Value Measurements, Continued:

The changes in investments measured at fair value for which **the Plan** has used Level 3 inputs to determine fair value as of December 31, 2024 are as follows:

2024

Fair Value Measurements Using Significant Unobservable Inputs (Level 3)

	TIAA Real Estate <u>Account</u>	VOYA Equity <u>Funds</u>	VOYA Bond <u>Fund</u>	TIAA <u>Traditional</u>	Voya Fixed <u>Plus</u>	Total <u>Fair Value</u>
Opening Balance	\$4,058,305	\$38,110	\$2,211	\$27,929,792	\$1,741,895	\$33,770,314
Purchases	562,294	6,491	344	4,295,935	170,177	5,035,241
Sales	(404,855)	(2,299)	-	(5,916,554)	(213,787)	(6,537,495)
Transfers in/(out)	(72,362)	729	-	-	-	(71,633)
Total gains or losses	<u>(165,014)</u>	<u>3,003</u>	<u>7</u>	<u>854,884</u>	<u>30,923</u>	<u>723,803</u>
Closing Balance	<u>\$3,978,368</u>	<u>\$46,035</u>	<u>\$2,562</u>	<u>\$27,164,057</u>	<u>\$1,729,208</u>	<u>\$32,920,230</u>
Change in unrealized gains (losses)	<u>\$ (240,503)</u>	<u>\$ 9,387</u>	<u>\$ 7</u>	<u>\$ (233,998)</u>	<u>\$ 24,342</u>	<u>\$ (440,765)</u>

As of December 31, 2024, transfers out of Level 3 into Level 2 occurred because sufficient observable inputs were available.

Quantitative information about Level 3 Fair Value Measurements as of December 31, 2024 is as follows:

<u>Description</u>	<u>Fair Value at 12/31/24</u>	<u>Valuation Technique</u>	<u>Unobservable Input</u>
TIAA Real Estate	\$3,978,368	Independent Appraisals	Market and Appraisal Risk
VOYA Equity Funds	46,035	Independent Appraisals	Market and Appraisal Risk
VOYA Bond Funds	2,562	Future Interest Rates and Discounted Cash Flow	Discount Rate
TIAA Traditional Annuity	27,164,057	Future Interest Rates and Discounted Cash Flow	Discount Rate
VOYA Fixed Plus Annuity	1,729,208	Future Interest Rates and Discounted Cash Flow	Discount Rate
Total	<u>\$32,920,230</u>		

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 - Fair Value Measurements, Continued:

The changes in investments measured at fair value for which **the Plan** has used Level 3 inputs to determine fair value as of December 31, 2023 are as follows:

2023

Fair Value Measurements Using Significant Unobservable Inputs (Level 3)

	TIAA Real Estate <u>Account</u>	VOYA Equity <u>Funds</u>	VOYA Bond <u>Fund</u>	TIAA <u>Traditional</u>	Voya Fixed <u>Plus</u>	Total <u>Fair Value</u>
Opening Balance	\$4,536,285	\$30,377	\$1,934	\$27,101,854	\$1,619,701	\$33,290,151
Purchases	388,445	6,730	240	4,030,554	218,731	4,644,699
Sales	(559,829)	(2,534)	-	(4,060,261)	(124,525)	(4,747,149)
Transfers in/(out)	326,693	-	-	-	-	326,693
Total gains or losses	<u>(633,289)</u>	<u>3,537</u>	<u>38</u>	<u>857,645</u>	<u>27,988</u>	<u>255,919</u>
Closing Balance	<u>\$4,058,305</u>	<u>\$38,110</u>	<u>\$2,211</u>	<u>\$27,929,792</u>	<u>\$1,741,895</u>	<u>\$33,770,314</u>
Change in unrealized gains (losses)	<u>\$ (748,859)</u>	<u>\$ 11,322</u>	<u>\$ 38</u>	<u>\$ 390,381</u>	<u>\$ -</u>	<u>\$ (347,118)</u>

As of December 31, 2023, transfers out of Level 3 into Level 2 occurred because sufficient observable inputs were available.

Quantitative information about Level 3 Fair Value Measurements as of December 31, 2023 is as follows

<u>Description</u>	<u>Fair Value at 12/31/23</u>	<u>Valuation Technique</u>	<u>Unobservable Input</u>
TIAA Real Estate	\$4,058,305	Independent Appraisals	Market and Appraisal Risk
VOYA Equity Funds	38,110	Independent Appraisals	Market and Appraisal Risk
VOYA Bond Funds	2,211	Future Interest Rates and Discounted Cash Flow	Discount Rate
TIAA Traditional Annuity	27,929,792	Future Interest Rates and Discounted Cash Flow	Discount Rate
VOYA Fixed Plus Annuity	1,741,895	Future Interest Rates and Discounted Cash Flow	Discount Rate
Total	<u>\$33,770,314</u>		

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 - Fair Value Measurements, Continued:

The Plan's financial instruments are generally short-term in nature and contain minimal credit risk. These instruments consist of loans and contributions receivable and accounts payable. The carrying value of those assets and liabilities in the Statements of Net Assets Available for Plan Benefits are assumed to approximate fair value.

NOTE 6- Party-In-Interest Transactions:

Certain plan investments are shares of mutual funds managed by TIAA and VOYA. TIAA and VOYA are **the Custodians** as defined by **the Plan** and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by **the Plan** for the investment management and administrative services amounted to \$415,965 for the year ended December 31, 2024.

NOTE 7- Plan Termination:

Although it has not expressed any intent to do so, **the University** has the right under **the Plan** to discontinue its contributions at any time and to terminate **the Plan** subject to the provisions of ERISA. In the event of plan termination, participants would be notified of the termination and all accumulation accounts will become non-forfeitable to the extent that benefits are accrued.

NOTE 8- Information Prepared and Certified by Custodians:

The Plan Administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosures under ERISA. Accordingly, TIAA-CREF and VOYA Financial Advisers, **the Custodians of the Plan**, have certified as being complete and accurate the investments on the statements of net assets available for benefits as of December 31, 2024 and 2023, the investment activity reflected in the statement of changes in net assets available for benefits for the year ended December 31, 2024, and the investment information included in the supplemental schedule of the financial statements as of and for the year ended December 31, 2024.

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 8- Information Prepared and Certified by Custodians, Continued:

Accordingly, as permitted under such election, **the Plan Administrator** instructed **the Plan's** independent auditors not to perform any auditing procedures with respect to the information certified as complete and accurate by **the Plan's Custodians** for their respective periods. Additionally, JP Morgan Chase Bank, N.A. (JP Morgan) has authorized TIAA to act as JP Morgan's agent for purposes of certifying the year-end financial statements required by 29 CFR 2520.103-8, except for annuity contracts.

The following information included in the accompanying financial statements and supplemental schedules was obtained from data that has been prepared and certified to as complete and accurate by **the Custodians**.

	<u>December 31,</u>	
Investments, at fair value:	2024	2023
TIAA-CREF- TIAA Traditional	\$27,164,057	\$27,929,792
TIAA-CREF-Life Cycle mutual funds	15,277,104	14,428,561
CREF-Equities:		
CREF Stock	20,579,181	18,784,180
CREF Social Choice	1,295,679	2,190,845
CREF Global Equities	9,315,793	8,201,870
CREF Growth	7,567,764	6,073,952
CREF Equity Index	5,046,423	3,948,382
CREF- Bond Market	3,592,360	3,257,366
CREF Social Choice-Debt	1,788,330	1,220,067
CREF- Money Market	2,035,992	2,011,246
TIAA-CREF- Real Estate	4,198,305	4,206,300
CREF-Inflation Linked Bonds	1,712,167	1,515,857
TIAA-CREF-Equities:		
Growth and Income	933,180	657,976
International Equity	3,908,807	3,568,495
Large-Cap Value	3,659,383	2,824,896
Mid-Cap Growth	247,041	226,058
Mid-Cap Value	1,492,035	1,426,309
Quantum Small-Cap Equities	<u>2,723,375</u>	<u>2,142,990</u>
Subtotal;	112,490,003	104,615,142

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 8- Information Prepared and Certified by Custodians, Continued:

	<u>December 31,</u>	
Investments, at fair value:	<u>2024</u>	<u>2023</u>
Social Choice	1,018,637	1,085,355
S & P 500	2,496,449	1,997,129
TIAA-CREF-Real Estate Securities	1,309,472	1,166,075
American Funds New Perspective	484,362	452,987
Invesco Developing Market Fund	565,883	538,322
Janus Overseas Fund	450,497	382,401
Lord Abbett Developing Growth Fund	1,136,861	877,439
AMG/River Road Mid-Cap Fund	1,247,629	1,105,367
Voya Mid-Cap Opportunity	526,126	385,586
JPMorgan Small-Cap Core	383,579	277,290
VIRTUS CEREDX Large-Cap	527,826	567,216
American Century Small-Mid Cap	555,363	519,707
MFS Core Equity	288,637	185,845
Voya Large Cap Growth Fund	1,810,142	1,323,832
T Rowe Price All Cap Opportunity	1,844,866	1,370,739
Invesco Diversified Dividend Fund	930,094	822,460
VIRTUS CEREDX Mid-Cap	74,745	62,616
Voya Invesco Equity	260,394	224,702
Voya Solution 2025	112,483	29,454
Voya Solution 2035	80,219	37,408
Voya Solution 2040	167,724	125,870
Voya Solution 2045	277,565	227,131
Voya Solution Income	788	743
Voya Solution 2050	147,164	95,281
Voya Solution 2055	150,456	75,465
Voya Solution 2060	44,499	26,945
Voya Solution 2065	56,715	49,048
Neuberger Berman Sustain Equity	209,341	156,799
T Rowe Price Capital Appreciation	6,697,318	6,023,216
Voya Solution 2030	157,363	119,946
Delaware Diversified Income Fund	705,276	651,544
Templeton Global Bond	456,975	487,413
Voya High Yield	406,612	302,374
Voya Fixed Plus Account	<u>1,729,209</u>	<u>1,741,895</u>
Total	<u>\$139,848,245</u>	<u>\$128,110,741</u>

XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 9- Income Tax Status:

The Plan is structured to comply with the applicable requirements of Section 403(b) of the Internal Revenue Code of 1986, as amended (IRC). A tax determination letter program is not yet available for IRC Section 403(b) plans through the Internal Revenue Service. **The Plan Administrator** believes that **the Plan** is currently designed and being operated in compliance with applicable requirements of the IRC and as such is exempt from Federal income taxes.

The Plan Administrator believes **the Plan** is no longer subject to income tax examinations for years prior to 2021.

NOTE 10- Risks and Uncertainties:

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

NOTE 11- Due to the VOYA Voluntary Supplemental Retirement Plan

Accumulated contributions and investment earnings for the VOYA Voluntary Supplemental Retirement Plan totaling \$1,774,843 and \$1,457,116 for the years ended December 31, 2024 and 2023, respectively have been included in the assets of the VOYA Defined Contribution Retirement Plan.

SUPPLEMENTAL SCHEDULES

**XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN**

**EIN: 72-0635884 PLAN NUMBER: 001 FORM 5500
ATTACHMENT TO FORM 5500
SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024**

(a)	(b)	(c)	(d)	(e)
	IDENTITY OF ISSUE, BORROWER, LESSOR or SIMILAR PARTY	DESCRIPTION OF INVESTMENT	COST	CURRENT VALUE
*	TIAA-CREF-Traditional Annuity	TIAA Traditional Non Benefit Responsive	\$20,474,630	\$27,164,057
*	TIAA Real Estate Account	TIAA Real Estate	3,437,254	4,198,305
*	College Retirement Equities Fund	CREF Stock	9,759,009	20,579,181
*	College Retirement Equities Fund	CREF Money Market	1,862,541	2,035,992
*	College Retirement Equities Fund	CREF Social Choice	2,292,201	3,084,009
*	College Retirement Equities Fund	CREF Bond Market	3,370,110	3,592,360
*	College Retirement Equities Fund	CREF Global Equities	5,047,646	9,315,793
*	College Retirement Equities Fund	CREF Growth	2,356,296	7,567,764
*	College Retirement Equities Fund	CREF Equity Index	1,955,127	5,046,423
*	College Retirement Equities Fund	CREF Inflation-Linked Bond	1,535,578	1,712,167
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2010-Rtmt	346,045	365,417
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2015-Rtmt	287,318	298,397
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2020-Rtmt	1,618,311	1,670,932
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2025-Rtmt	1,009,353	1,093,578
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2030-Rtmt	1,959,743	2,194,313
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2035-Rtmt	1,576,432	1,859,803
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2040-Rtmt	2,921,502	3,493,620
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2045-Rtmt	2,278,627	2,601,816
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2050-Rtmt	1,215,870	1,414,777
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2055-Rtmt	171,261	187,144
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2060-Rtmt	44,048	46,973
*	TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle Rtmt Inc-Rtmt	51,539	50,335
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Gr & Inc-Rtmt	856,605	933,180
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Intl Eq-Rtmt	3,487,039	3,908,807
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Lg-Cap Val-Rtmt	3,212,120	3,659,383
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Mid-Cap Gr-Rtmt	267,782	247,041
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Mid-Cap Val-Rtmt	1,518,858	1,492,035
*	TIAA-CREF Real Estate Securities Fund	TIAA-CREF Real Est Secs-Rtmt	1,194,912	1,309,472
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Sm-Cap Eq-Rtmt	2,636,925	2,723,375
*	TIAA-CREF Funds-Equity Fund	TIAA-CREF Social Ch Eq-Rtmt	859,505	1,018,637
*	TIAA-CREF Funds-Equity Index Fund	TIAA-CREF S&P 500 Idx-Rtmt	1,421,468	2,496,449
*	VOYA Financial Services	American Funds New Perspective	386,598	484,362
*	VOYA Financial Services	Invesco Developing Markets Fund	575,454	565,883
*	VOYA Financial Services	Janus Overseas Fund	357,622	450,497
*	VOYA Financial Services	Lord Abbett Developing Growth Fund	1,172,361	1,136,861

* Party-in-interest

See the Independent Auditors' Report on Supplementary Information.

**XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN**

EIN: 72-0635884 PLAN NUMBER: 001 FORM 5500

ATTACHMENT TO FORM 5500

SCHEDULE H, LINE 4i

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024, CONTINUED

(a)	(b)	(c)	(d)	(e)
	<u>IDENTITY OF ISSUE, BORROWER, LESSOR or SIMILAR PARTY</u>	<u>DESCRIPTION OF INVESTMENT</u>	<u>COST</u>	<u>CURRENT VALUE</u>
*	VOYA Financial Services	AMG/River Road Mid-Cap Fund	\$1,453,680	\$1,247,629
*	VOYA Financial Services	VOYA JPMorgan Small-Cap Core	392,817	383,579
*	VOYA Financial Services	VOYA American Century Small-Mid Cap	596,132	555,363
*	VOYA Financial Services	MFS Core Equity Fund	238,640	288,637
*	VOYA Financial Services	VOYA Large Cap Growth Fund	1,594,769	1,810,142
*	VOYA Financial Services	T Rowe Price All Cap Opportunity	1,532,246	1,844,866
*	VOYA Financial Services	Invesco Diversified Dividend Fund	961,206	930,094
*	VOYA Financial Services	Neuberger Berman Sustain Equity	189,151	209,341
*	VOYA Financial Services	VOYA T Rowe Price Capital Appreciation	6,554,848	6,697,318
*	VOYA Financial Services	VOYA Invesco Equity	290,882	260,394
*	VOYA Financial Services	VOYA Solution 2025	112,464	112,483
	VOYA Financial Services	VOYA Solution 2030	161,508	157,363
*	VOYA Financial Services	VOYA Solution 2035	74,199	80,219
	VOYA Financial Services	VOYA Solution 2040	155,933	167,724
*	VOYA Financial Services	VOYA Solution 2045	264,115	277,565
	VOYA Financial Services	VOYA Solution 2050	134,799	147,164
*	VOYA Financial Services	VOYA Solution 2055 Portfolio	139,027	150,456
	VOYA Financial Services	VOYA Solution 2060	39,858	44,499
	VOYA Financial Services	VOYA Solution 2065	58,488	56,715
*	VOYA Financial Services	VOYA Solution Income	845	788
*	VOYA Financial Services	VOYA High Yield Portfolio	435,455	406,613
*	VOYA Financial Services	Delaware Diversified Income Fund	792,964	705,276
*	VOYA Financial Services	Templeton Global Bond Fund	699,254	456,975
*	VOYA Financial Services	VOYA Mid-Cap Opportunity	610,440	526,126
*	VIRTUS CEREDEX	Large-Cap	667,851	527,826
*	VIRTUS CEREDEX	Mid-Cap	77,729	74,745
*	VOYA Life Insurance and Annuity	VOYA Fixed Plus Account	1,678,049	1,729,209
	Participant Loans	3.25%	<u>601,743</u>	<u>601,743</u>
	TOTAL		<u>\$104,026,781</u>	<u>\$140,449,988</u>

* Party-in-interest

(c) Including maturity date, rate of interest, collateral, par or maturity value

See the Independent Auditors' Report on Supplementary Information.

**XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN**

**EIN: 72-0635884 PLAN NUMBER: 001 FORM 5500
ATTACHMENT TO FORM 5500
SCHEDULE H, LINE 4j
SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)
DECEMBER 31, 2024**

(a) IDENTITY OF ISSUE, BORROWER, LESSOR or SIMILAR PARTY	(b) <u>DESCRIPTION OF INVESTMENT</u>	(c) COSTS OF ACQUISITIONS	(d) PROCEEDS OF DISPOSITIONS
TIAA-CREF-Traditional Annuity	TIAA Traditional Non Benefit Responsive	\$4,295,935	\$5,916,554
TIAA Real Estate Account	TIAA Real Estate	593,380	427,237
College Retirement Equities Fund	CREF Stock	1,076,596	2,364,639
College Retirement Equities Fund	CREF Money Market	338,630	409,545
College Retirement Equities Fund	CREF Social Choice	646,813	1,234,309
College Retirement Equities Fund	CREF Bond Market	935,697	682,102
College Retirement Equities Fund	CREF Global Equities	940,768	1,354,083
College Retirement Equities Fund	CREF Growth	135,433	521,181
College Retirement Equities Fund	CREF Equity Index	388,042	237,323
College Retirement Equities Fund	CREF Inflation-Linked Bond	441,865	298,201
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2010-Rtmt	15,542	23,013
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2015-Rtmt	183,818	121,090
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2020-Rtmt	161,523	15,585
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2025-Rtmt	127,626	847,722
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2030-Rtmt	205,276	265,216
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2035-Rtmt	141,171	1,000
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2040-Rtmt	252,415	91,632
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2045-Rtmt	368,824	567,554
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2050-Rtmt	162,154	-0-
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2055-Rtmt	55,962	27,013
TIAA-CREF Lifecycle Fund	TIAA-CREF Lifecycle 2060-Rtmt	27,743	-0-
TIAA-CREF Lifecycle Fund	TIAA-CREF Lfcycle Rtmt Inc- Rtmt	51,764	86,296
TIAA-CREF Funds-Equity Fund	TIAA-CREF Gr & Inc-Rtmt	400,168	225,727
TIAA-CREF Funds-Equity Fund	TIAA-CREF Intl Eq-Rtmt	696,690	404,044
TIAA-CREF Funds-Equity Fund	TIAA-CREF Lg-Cap Val-Rtmt	947,366	424,621
TIAA-CREF Funds-Equity Fund	TIAA-CREF Mid-Cap Gr-Rtmt	20,323	18,679
TIAA-CREF Funds-Equity Fund	TIAA-CREF Mid-Cap Val-Rtmt	427,239	464,750
TIAA-CREF Real Estate Securities Fund	TIAA-CREF Real Est Secs-Rtmt	269,557	165,626
TIAA-CREF Funds-Equity Fund	TIAA-CREF Quantum Sm-Cap Eq-Rtm	876,042	348,421
TIAA-CREF Funds-Equity Fund	TIAA-CREF Social Ch Eq-Rtmt	193,693	293,716
TIAA-CREF Funds-Equity Index Fund	TIAA-CREF S&P 500 Idx-Rtmt	277,592	241,392
VOYA Financial Services	American Funds New Perspective	101,286	69,912
VOYA Financial Services	Invesco Developing Markets Fund	55,345	27,784
VOYA Financial Services	Janus Overseas Fund	72,698	4,602
VOYA Financial Services	Lord Abbett Developing Growth Fund	288,528	29,106

See the Independent Auditors' Report on Supplementary Information.

**XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN**

EIN: 72-0635884

PLAN NUMBER: 001

FORM 5500

ATTACHMENT TO FORM 5500

SCHEDULE H, LINE 4j

SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)

DECEMBER 31, 2024, CONTINUED

(a) IDENTITY OF ISSUE, BORROWER, LESSOR or SIMILAR PARTY	(b) DESCRIPTION OF INVESTMENT	(c) COSTS OF ACQUISITIONS	(d) PROCEEDS OF DISPOSITIONS
VOYA Financial Services	AMG/River Road Mid-Cap Fund	\$229,188	\$86,926
VOYA Financial Services	VOYA JPMorgan Small-Cap Core	117,269	10,980
VOYA Financial Services	VOYA American Century Small-Mid Cap	86,882	51,226
VOYA Financial Services	MFS Core Equity Fund	107,419	4,627
VOYA Financial Services	VOYA Large Cap Growth Fund	560,590	74,279
VOYA Financial Services	T Rowe Price All Cap Opportunity	480,502	6,375
VOYA Financial Services	Invesco Diversified Dividend Fund	165,218	57,583
VOYA Financial Services	Neuberger Berman Sustain Equity	52,542	-0-
VOYA Financial Services	VOYA T Rowe Price Capital Appreciation	1,144,493	470,391
VOYA Financial Services	Invesco Equity	35,692	-0-
VOYA Financial Services	VOYA Solution 2025	83,029	-0-
VOYA Financial Services	VOYA Solution 2030	43,987	6,570
VOYA Financial Services	VOYA Solution 2035	42,810	-0-
VOYA Financial Services	VOYA Solution 2040	61,192	19,338
VOYA Financial Services	VOYA Solution 2045	68,521	18,086
VOYA Financial Services	VOYA Solution 2050	52,687	804
VOYA Financial Services	VOYA Solution 2055 Portfolio	78,498	3,507
VOYA Financial Services	VOYA Solution 2060	27,726	10,172
VOYA Financial Services	VOYA Solution 2065	7,667	-0-
VOYA Financial Services	VOYA Solution Income	45	-0-
VOYA Financial Services	VOYA High Yield Portfolio	363,326	259,089
VOYA Financial Services	Delaware Diversified Income Fund	89,760	36,028
VOYA Financial Services	Templeton Global Bond Fund	76,231	106,669
VOYA Financial Services	VOYA Fixed Plus Account	201,100	213,787
VIRTUS CEREDX	Large-Cap	126,389	165,780
VIRTUS CEREDX	Mid-Cap	18,606	6,476
VOYA Financial Services	VOYA Mid-Cap Opportunity	159,735	19,195
Participant Loans	3.25%	<u>140,329</u>	<u>249,680</u>
TOTAL		<u>\$20,654,607</u>	<u>\$19,837,562</u>

(b) Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value

See the Independent Auditors' Report on Supplementary Information.

**XAVIER UNIVERSITY OF LOUISIANA
DEFINED CONTRIBUTION RETIREMENT PLAN**

**EIN: 72-0635884 PLAN NUMBER: 001 FORM 5500
FINANCIAL SCHEDULES, SCHEDULE H, PART IV, LINES 4a, 4b, 4c and 4d
FOR THE YEAR ENDED DECEMBER 31, 2024**

<u>Description</u>	<u>Status</u>
Schedule of Loans or Fixed Income Obligations in Default or Classified as Uncollectible	No Transactions Noted
Schedule of Leases in Default or Classified as Uncollectible	No Transactions Noted
Schedule of Nonexempt Party-in-Interest (Prohibited) Transactions	No Transactions Noted
Schedule of Delinquent Participant Contributions	Delinquent Contributions Noted

See the Independent Auditors' Report on Supplementary Information.

Plan Name	Xavier University of Louisiana Defined Contribution Retirement Plan
Plan Sponsor EIN	72-0635884
ERISA Plan #	001
Plan Year Ending	December 31, 2024

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

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

Plan Name	Xavier University of Louisiana Defined Contribution Retirement Plan
Plan Sponsor EIN	72-0635884
ERISA Plan #	001
Plan Year Ending	December 31, 2024

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

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

Plan Name	Xavier University of Louisiana Defined Contribution Retirement Plan
Plan Sponsor EIN	72-0635884
ERISA Plan #	001
Plan Year Ending	December 31, 2024

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

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

Plan Name	Xavier University of Louisiana Defined Contribution Retirement Plan
Plan Sponsor EIN	72-0635884
ERISA Plan #	001
Plan Year Ending	December 31, 2024

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

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