Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

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.)
- [X] a single-employer plan
- [ ] a DFE (specify) _____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan
DREXEL UNIVERSITY DEFINED CONTRIBUTION RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 103

1c Effective date of plan 04/01/1972

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)
DREXEL UNIVERSITY

3141 CHESTNUT STREET
PHILADELPHIA, PA 19104

2b Employer Identification Number (EIN) 23-1352630

2c Plan Sponsor's telephone number 215-895-2850

2d Business code (see instructions) 611000

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2026	JOYCE VUOCOLO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a	Plan administrator's name and address [X] 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:	**4b**	EIN
a	Sponsor's name	**4d**	PN
c	Plan Name		

5	Total number of participants at the beginning of the plan year	**5**	18206
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	11902
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	8543
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	5199
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	13742
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	94
f	Total. Add lines **6d** and **6e**.	**6f**	13836
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	16217
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	11980
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2F 2G 2L 2M 2R 2S 2T

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[X] Insurance	**(1)**	[X] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(4)**	[ ] General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- **(4)** [ ] **DCG** (Individual Plan Information) – Number Attached _____
- **(5)** [ ] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [X] **A** (Insurance Information) – Number Attached 1
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 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

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
DREXEL UNIVERSITY DEFINED CONTRIBUTION RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 103

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

D Employer Identification Number (EIN)
23-1352630

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	406661	3835	01/01/2025	12/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	312400878
5	Current value of plan's interest under this contract in separate accounts at year end	5	398012988

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

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

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

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

b	Balance at the end of the previous year			7b	263437133
c	Additions: (1) Contributions deposited during the year	7c(1)	1875433		
	(2) Dividends and credits	7c(2)	0		
	(3) Interest credited during the year	7c(3)	12936431		
	(4) Transferred from separate account	7c(4)	36837397		
	(5) Other (specify below) ▶	7c(5)	47652620		
	(6) Total additions			7c(6)	99301881
d	Total of balance and additions (add lines **7b** and **7c(6)**)			7d	362739014
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	21536510		
	(2) Administration charge made by carrier	7e(2)			
	(3) Transferred to separate account	7e(3)	28624183		
	(4) Other (specify below) ▶ OTHER DEDUCTIONS	7e(4)	177443		
	(5) Total deductions			7e(5)	50338136
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	312400878

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	0
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	0
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
DREXEL UNIVERSITY DEFINED CONTRIBUTION RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 103

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

D Employer Identification Number (EIN)
23-1352630

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

CAPITAL RESEARCH AND MGMT CO

95-1441103

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

COHEN & STEERS CAPITAL MGMT

01-3335336

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

DIMENSIONAL FUND ADVISORS

30-0447847

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

JP MORGAN CHASE BANK N.A.

13-4994650

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

PIMCO

33-0629048

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

PRUDENTIAL INVESTMENTS LLC

22-2540245

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

T. ROWE PRICE

52-0556948

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

TEACHER'S ADVISORS, INC

13-3760073

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

THE VANGUARD GROUP

23-1945930

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

TIAA-CREF

13-1624203

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

TIAA-CREF INVESTMENT MANAGEMENT LLC

13-3586142

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

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

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

TIAA-CREF

13-1624203

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 52 19 64 50 65	RECORDKEEPER	335296	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

PRICEWATERHOUSECOOPERS LLP

13-4008322

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 16	NONE	149438	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
DREXEL UNIVERSITY DEFINED CONTRIBUTION RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 103

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

D Employer Identification Number (EIN)
23-1352630

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

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
13-1624203-004	P	46506739

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II **Information on Participating Plans (to be completed by DFEs, other than DCGs)**
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
DREXEL UNIVERSITY DEFINED CONTRIBUTION RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 103

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

D Employer Identification Number (EIN)
23-1352630

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	5272323	5490978
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	39101754	46506739
(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)	1538935317	1809463141
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	263437133	312400878
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	1846746527	2173861736
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	1846746527	2173861736

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)	411992	
(B) Participants	2a(1)(B)	32538703	
(C) Others (including rollovers)	2a(1)(C)	15571424	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		48522119
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)	462102	
(F) Other	2b(1)(F)	12936431	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		13398533
(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)	53789589	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		53789589
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		1699885
(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)		219351927
c Other income	2c		1034816
d Total income. Add all **income** amounts in column (b) and enter total	2d		337796869
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	140646994	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		140646994
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		-98806
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	269827	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	149438	
(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)	53364	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		472629
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		141020817
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		196776052
l Transfers of assets:			
(1) To this plan	2l(1)		130339157
(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: PRICEWATERHOUSECOOPERS LLP **(2)** EIN: 13-4008324

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

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

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		5000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
DREXEL UNIVERSITY DEFINED CONTRIBUTION RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 103

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

D Employer Identification Number (EIN)
23-1352630

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

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

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

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

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

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

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

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

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

19 If the total number of participants is 1,000 or more, complete lines (a) 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 ___/___/_____ (MM/DD/YYYY) and the Opinion Letter serial number_____.

Drexel University
Defined Contribution Retirement Plan

Financial Statements as of
December 31, 2025 and 2024,
and for the year ended December 31, 2025,
Supplemental Schedule as of December 31, 2025,
and Report of Independent Auditors

Drexel University
Defined Contribution Retirement Plan
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*NOTE: All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA") have been omitted because they are not applicable.



Report of Independent Auditors

To the Administrator of the Drexel University Defined Contribution Retirement Plan

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

We were engaged to perform an audit of the accompanying financial statements of the Drexel University Defined Contribution Retirement Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, including the related notes (collectively referred to as the "financial statements").

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

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024 and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 9 to the financial statements, is complete and accurate.

Disclaimer of Opinion

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

Basis for Disclaimer of Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

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

Supplemental Schedule Required by ERISA

Schedule H, line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2025 ("supplemental schedule") is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion section of our report, it is inappropriate to and we do not express an opinion on this supplemental schedule.

PricewaterhouseCoopers LLP

Philadelphia, Pennsylvania
October 9, 2026

Drexel University
Defined Contribution Retirement Plan
Statements of Net Assets Available for Benefits
December 31, 2025 and 2024

	2025	2024
Assets		
Investments at fair value	$ 2,126,979,015	$ 1,811,090,132
Investments at contract value	41,391,743	30,384,072
Total participant-directed investments	2,168,370,758	1,841,474,204
Notes receivable from participants	5,883,335	5,763,486
Total receivables	5,883,335	5,763,486
Net Assets Available for Benefits	$ 2,174,254,093	$ 1,847,237,690

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

Drexel University
Defined Contribution Retirement Plan
Statement of Changes in Net Assets Available for Benefits
Plan Year Ended December 31, 2025

	2025
Additions to Net Assets	
Investment income:	
Net appreciation of fair value of investments	$ 221,051,812
Dividends and interest	67,188,122
Net investment gain	288,239,934
Contributions:	
Participant contributions	32,538,703
Employer contributions	411,992
Rollover contributions	15,571,424
Total contributions	48,522,119
Other income	1,034,816
Total additions	337,796,869
Deductions from Net Assets	
Benefits paid to participants	140,646,994
Administrative expenses and fees	472,629
Total deductions	141,119,623
Increase in net assets before plan transfers	196,677,246
Transfers in - Salus University	130,339,157
Increase in net assets	327,016,403
Net Assets Available for Benefits	
Beginning of year	1,847,237,690
End of year	$ 2,174,254,093

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

1. INTRODUCTION

Drexel University (the "University") established the Drexel University Defined Contribution Retirement Plan (the "Plan") effective April 1, 1972. The Plan is a qualified 403(b) plan available to all University employees (and employees of participating affiliates) who meet the criteria specified in the "Eligibility" note below.

The University is the Plan sponsor. The Plan is subject to the provisions of the ERISA, as amended. The Drexel University Retirement Plans Investment Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the University's Board of Trustees, which is responsible for the oversight of the Plan.

The Plan is administered by TIAA-CREF as the single recordkeeper, trustee, and custodian. TIAA-CREF includes Teachers Insurance Annuity Association ("TIAA") and the College Retirement Equities Fund ("CREF"). TIAA serves as the custodian of the TIAA pooled separate account and TIAA guaranteed annuity contracts, and CREF serves as the custodian of the CREF mutual funds. TIAA Trust, N.A. serves as the custodian of the TIAA-CREF mutual funds, renamed as proprietary Nuveen mutual funds, TIAA-CREF self-directed brokerage accounts, and other non-proprietary mutual funds offered as investment options by TIAA-CREF.

2. DESCRIPTION OF THE PLAN

The following description of the Plan is provided for general information purposes only. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

Eligibility - All University and participating affiliate employees, excluding students, leased employees, and independent contractors, may contribute to the Plan on a pre-tax and/or after-tax Roth basis. Employer contributions may also be available, subject to meeting eligibility requirements. Effective July 1, 2024, the University completed its merger with Salus University ("Salus"). As a result, Salus employees became University employees and gained eligibility to participate in the Plan, subject to the Plan's existing eligibility requirements. Those who did not make an active election within the 31-day enrollment window beginning July 1, 2024 were automatically enrolled at a 2% deferral rate per pay period, with new contributions directed to an age-related Nuveen Lifecycle Index Fund in line with the Plan's default investment policy.

On March 5, 2025, net assets totaling $130,339,157 of the (i) Pennsylvania Association of Independent Colleges and Universities Multiple Employer Plan attributable to eligible employees and former eligible employees of Salus and their beneficiaries ("Salus MEP"), (ii) the Salus University Defined Contribution Retirement Plan, (iii) the Salus University Retirement Plan, and (iv) the Salus University Plan TDA were merged into the Plan (all merged plans referred to as "Salus Plans"), and the Salus MEP was subsequently terminated. Existing investments from the Salus Plans transferred to the Plan were invested in replacement investment options in the Plan, as communicated to participants prior to the merger. The net asset transfers included $130,170,274 of participant-directed investments and $168,883 of notes receivable from participants.

Employee Contributions - Participant contributions are made by a participant on a pre-tax basis and/or on an after-tax Roth basis as described in the Plan document. Contributions may only be made with respect to compensation that is compensation within the meaning of Section 415(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"). All eligible employees who do not enroll in the Plan within 31 days of their date of hire are automatically enrolled at a rate of 2% of their eligible compensation in the Nuveen Lifecycle Index Fund as the default investment option, effective the next available payroll. Contribution changes, including stopping future participation, can be made at any time by participants.

Employer Contributions - "Basic Employees" are eligible for employer Basic and Matching Contributions. A Basic Employee is defined as any employee who is eligible to make employee contributions to the Plan, except for employees who are covered by a collective bargaining agreement that does not specifically provide for their eligibility for employer contributions. The criteria for when an employee receives an allocation of employer contributions depend on the individual's employment classification. Employees classified as full-time or part-time will have employer contributions allocated to them on a payroll period basis. There are no annual allocation requirements for this group. Employees classified as adjunct, temporary, casual, or per diem, which includes co-ops, will receive employer contributions after the close of the Plan Year (January 1 – December 31) if two annual allocation requirements are met: the employee (1) is credited with at least 1,000 hours of service during the Plan Year and (2) is an active employee on the last day of the Plan Year.

Basic Contributions - Provided that a "Basic Employee" is contributing at least 1% of compensation (determined on either a payroll period basis or a Plan Year basis, as applicable to the Basic Employee's employment classification) and is eligible to receive employer contributions, the University contributes a "Basic Contribution" to the Plan equal to (a) 3% of compensation for a participant under the age of 50, or (b) 5% of compensation for a participant age 50 or older.

Matching Contributions - For a "Basic Employee" who is eligible to receive employer contributions, the University contributes a "Matching Contribution" to the Plan that is equal to 100% of the Basic Employee's contributions for the payroll period up to 6% of compensation for the payroll period.

All Basic and Matching Contributions are subject to certain Code limitations, and certain Basic and Matching Contributions may be subject to a "true-up" contribution at the end of the Plan Year.

The University suspended regular employer Basic and Matching Contributions for the 2025 Plan Year. Employer contributions recognized during 2025 totaled $411,992 and were limited to prior-year true-up contributions, disability-related contributions, and certain other adjustments.

Rollovers - Eligible employees may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans.

Catch-Up Contributions - All participants who are eligible to make participant contributions under the Plan and who have attained age 50 before the close of the Plan Year shall be eligible to make catch-up contributions in accordance with and subject to the limitations of the Code.

Investment Options - Participants direct their participant, Basic, and Matching Contributions into various investment options offered by the Plan, including mutual funds, a pooled separate account, guaranteed annuity products, and self-directed brokerage accounts.

Participant Accounts - Individual accounts are maintained for each participant. Each participant's account is credited with the participant's contributions, Basic Contributions, Matching Contributions, and allocations of Plan earnings, and is charged with administrative expenses and an allocation of Plan losses. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

Vesting - A participant shall have a 100% non-forfeitable interest in his or her account under the Plan.

Benefit Payments - An employee may request in-service withdrawals once they reach age 59.5, which gives them access to both employee and employer-sourced funds.

Hardship Withdrawals - An employee may request hardship withdrawals, which provide access only to employee-sourced funds.

Termination Withdrawals and Distributions - If an employee terminates employment, the employee is entitled to receive the full value of his or her account. Employees may be penalized for an early withdrawal (prior to age 59.5), and the funds are considered taxable.

Required Minimum Distributions - Participants are required to start taking certain withdrawals from their accounts when they reach the "applicable age" as defined by the IRS, per below:

1. age 70½ - if participant attained age 70½ prior to January 1, 2020.
2. age 72 - if participant attained age 70½ after December 31, 2019, and age 72 prior to January 1, 2023.
3. age 73 - if participant attained age 72 after December 31, 2022, and age 74 prior to January 1, 2033.

If a participant terminates employment with the University before reaching age 73, the Plan must begin to pay the participant's account to them no later than April 1 of the calendar year following the calendar year in which the participant reaches age 73.

If a participant continues to work for the University or returns to work as a retiree after reaching age 73, the Plan must begin to pay the participant's account to them no later than April 1 of the calendar year following the calendar year in which the participant terminates employment.

Collateralized Loans (existing prior to 1/1/2022, no longer offered) - Except as described below, Plan loans are issued as separate contracts by TIAA as contemplated under Section 72(p)(5) of the Code and do not represent Plan assets. Loans are collateralized using a participant's TIAA Group Supplemental Retirement Annuity ("GSRA") account balance in an amount equal to 110% of the outstanding loan balance. Participants may borrow a minimum of $1,000 up to a maximum equal to the lesser of (a) $50,000 or (b) 45% of their TIAA Traditional Annuity account balance, subject to annuity contract and Plan provisions. Loan terms range from one to five years in one-year increments (up to 10 years for the purchase of the participant's primary residence). Principal and interest are paid directly to TIAA by the participant, and each payment will reduce amounts collateralized by the borrowing participant's TIAA Traditional Annuity account balance. The TIAA Traditional Annuity is described below in Note 5.

Collateralized loan balances outstanding from participants to TIAA were $120,562 and $132,503 as of December 31, 2025, and 2024, respectively. The amount of collateral was $132,618 and $145,753 as of December 31, 2025, and 2024, respectively. Investments underlying defaulted loan balances are reflected in the Statements of Net Assets Available for Benefits until a distribution event occurs. Defaulted loan amounts were $92,094 and $92,906 as of December 31, 2025, and 2024, respectively. Loans are fixed-rate loans based on the Moody's Corporate Bond Index at the time of distribution. Interest rates ranged from 4.00% to 5.81% at December 31, 2025, and 2024. If a loan were to default, the collateral associated with the loan would not be distributed to TIAA unless the participant was otherwise eligible for a distribution. The collateralized loans are not Plan assets and are not included in notes receivable of $5,883,335 and $5,763,486 from participants included on the Statements of Net Assets Available for Benefits as of December 31, 2025 and 2024, respectively.

Retirement Plan Loans - Loans are offered at a fixed rate of interest, ranging from 4.25% to 9.50% as of both December 31, 2025 and 2024, and are funded directly from a participant's account under the Plan. Participant loans outstanding, including deemed distributed loans, as of December 31, 2025 and 2024 have maturity dates extending through November 1, 2035 and November 1, 2034, respectively. Participants may borrow a minimum of $1,000 up to a maximum equal to the lesser of (a) $50,000 or (b) 50% of their account balance, subject to the annuity contract and Plan provisions. Loan amounts are deducted from participant account balances, and subsequent loan payments, including interest, are credited to participant account balances. A participant may have up to three outstanding loans at any one time. A fee of $75 is charged for general-purpose loans, and $125 is charged for primary residence

loans, along with an annual maintenance fee of $25. Former employees are not eligible for the new loan program.

3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting - The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

Plan Records Management - In November 2007, the Department of Labor ("DOL") issued amended regulations eliminating an exemption granted to 403(b) plans from the annual Form 5500 reporting, disclosure, and audit requirements under Part 1 of Subtitle B of Title I of ERISA. The removal of this exemption subjected the Plan to the same Form 5500 reporting and audit requirements as 401(k) plans, effective with the Plan's 2009 Form 5500 filings.

For purposes of providing transitional relief to Plan administrators implementing the new ERISA annual reporting requirements, the DOL's Field Assistance Bulletin No. 2009-02, *Annual Reporting Requirements for 403(b) Plans*, permits 403(b) plans to exclude certain contracts and custodial accounts issued to current and former employees prior to January 1, 2009, from being reflected on Form 5500. The DOL also has acknowledged that full annual reporting compliance "may not be possible for the 2009 plan year," and "the guiding principle must be to ensure that appropriate efforts are made to act reasonably, prudently, and in the interest of the Plan's participants and beneficiaries." Notwithstanding the DOL's specific recognition of the "compliance challenges" engendered by its new requirements, GAAP provides no such relief and requires that all accounts be included in 403(b) plan financial statements. The extent to which certain contracts and custodial accounts issued prior to January 1, 2009, are not included, and the effect of this on the Plan's financial statements, are not reasonably determinable. As a result, the Plan administrator is unable to determine that the accompanying statements of net assets available for benefits at December 31, 2025 and 2024 reflect all assets that would be considered Plan assets on an aggregate basis for financial accounting purposes in accordance with GAAP.

The Plan Sponsor has made a "good faith" effort to transition for the 2009 Plan year to ERISA's generally applicable reporting requirements for 403(b) plans and believes that the conditions of DOL Field Assistance Bulletin 2009-02 to not treat annuity contracts and custodial accounts as part of the Plan's assets for the purposes of ERISA's annual reporting requirements have been satisfied with respect to the excluded contracts.

Use of Estimates - The preparation of financial statements in accordance with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Risks and Uncertainties - The Plan utilizes various investment funds and annuity products. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits.

Contributions - Participant contributions are recognized in the period in which the amounts are withheld from participant compensation. Employer basic and matching contributions are recognized in the calendar year for which the employer contributions are attributable, consistent with the Plan's contribution allocation provisions.

Investment Valuation and Income Recognition - The Plan's investments are stated at fair value as defined by FASB Accounting Standards Codification ("ASC") 820, with the exception of fully benefit-responsive investment contracts, which are stated at contract value.

Fair value of a financial instrument is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Shares of mutual funds, held individually by the Plan or through the self-directed brokerage accounts, are valued at quoted market prices, which represent the net asset value ("NAV") of shares held by the Plan at year's end.

Investments in the TIAA Real Estate Account are valued at NAV, as are its underlying investments. The TIAA Real Estate Account is listed on NASDAQ. Although the underlying assets of real estate investments cannot be quickly sold and converted to liquid assets, the TIAA General Account provides a liquidating guarantee to meet participants' redemption, transfer, or cash withdrawal requests varying from one to three days. Redemptions out of this investment are limited to once per quarter. Internal transfers into the TIAA Real Estate Account will be prohibited if the transfer causes the value of participants' total accumulation in the account to exceed $150,000. The purpose of this limitation is to ensure more predictable account inflows and outflows, which is expected to facilitate efficient portfolio management over the longer term. Trade settlement terms are one to three days.

The Plan's self-directed brokerage investment accounts consist primarily of registered investment companies traded on an active market and are valued at their quoted market price as applicable.

The University's Investment Committee determines the Plan's valuation policies.

The Guaranteed Annuity Contracts (Note 5) consist of non-benefit responsive and fully benefit responsive investment contracts. Non-benefit responsive and fully benefit responsive contracts are recorded at fair value and contract value, respectively, in the accompanying Statements of Net Assets Available for Benefits. The contract value of the fully benefit responsive TIAA Traditional Annuity equals the accumulated cash contributions and interest credited to the Plan's contracts, less any withdrawals.

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 of fair value of investments includes the Plan's gains and losses on investments bought and sold, as well as held, during the year.

Notes Receivable from Participants - Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred.

Administrative Expenses - The Plan's expenses are paid by either the Plan or the University, as provided by the Plan document. Expenses that are paid directly by the University and are not to be reimbursed to the University by the Plan are excluded from these financial statements. All expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying Statement of Changes in Net Assets Available for Benefits. In addition, certain investment-related expenses are included in the net appreciation of the fair value of investments presented in the accompanying Statement of Changes in Net Assets Available for Benefits.

Revenue Sharing Agreement - Where the Plan maintains a balance in and makes active contributions to any of the investment vehicles kept on TIAA's platform, TIAA funds a Revenue Credit Account in the Plan based upon revenues generated by the Plan. The amount determined to be in excess of TIAA's revenue requirement is deposited into the Revenue Credit Account of the Plan. The Revenue Credit Account may only be used either to pay direct, reasonable, and necessary expenses of the Plan with authorization or to provide benefits for Plan participants and beneficiaries in the form of revenue credits. Only those participants whose accounts generated revenue credits during the Plan Year shall receive an allocation of revenue credits at year-end. The University implemented a fee-leveling solution that directly returns revenue sharing to participants. $1,015,506 was credited directly to participants in 2025 as a result of this fee-leveling solution.

Payment of Benefits — Benefit payments to participants are recorded upon distribution.

4. FAIR VALUE OF FINANCIAL INSTRUMENTS

The three-level hierarchy for fair value measurements is based on observable and unobservable inputs to the valuation of an asset or liability at the measurement date. It prioritizes the inputs to the valuation techniques used to measure fair value by giving the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to measurements involving significant unobservable inputs (Level 3 measurements). Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants ("exit price") at the measurement date.

The Plan maximizes the use of observable inputs and minimizes the use of unobservable inputs when measuring fair value. When available, fair value is based on actively quoted market prices. In the absence of actively quoted market prices, price information from external sources, including broker quotes and industry publications, is used. If pricing information from external sources is not available, or if observable pricing is not indicative of fair value, judgment is required to develop the estimates of fair value. In those cases, prices are estimated based on available historical financial data or comparable investment vehicles that reflect widely accepted market valuation practices.

In some cases, the inputs used to measure fair value might fall in different levels of the fair value hierarchy. In those cases, the lowest level input that is significant to a fair value measurement in its entirety determines the applicable level in the fair value hierarchy. Assessing the significance of a particular input to the fair value measurement in its entirety requires judgment and consideration of factors specific to the asset. Fair value measurements are categorized as Level 3 when a significant amount of price or other inputs, considered to be unobservable, are used in their valuations. The Plan's policy is to recognize significant transfers between levels at the end of the reporting period. The fair value hierarchy and inputs to valuation techniques are as follows:

Level 1 Quoted prices (unadjusted) in active markets for identical assets and liabilities at the measurement date (i.e., mutual funds, pooled separate accounts, and self-directed brokerage).

Level 2 Inputs other than quoted prices included within Level 1 that are either directly or indirectly observable for the asset or liability, including quoted prices for similar assets or liabilities in active markets, inputs other than quoted prices that are observable for the asset or liability, and inputs that are derived from observable market data by correlation or other means.

Level 3 Unobservable inputs for the asset or liability, including situations where there is little, if any, market activity for the asset or liability.

The following tables set forth by level within the fair value hierarchy a summary of the Plan's investments measured at fair value on a recurring basis at December 31, 2025 and 2024:

	December 31, 2025			
	Level 1	**Level 2**	**Level 3**	**Total**
Mutual funds	$ 1,768,866,584	$ -	$ -	$ 1,768,866,584
Guaranteed annuities	-	-	271,009,135	271,009,135
Pooled separate account	46,506,739	-	-	46,506,739
Self-directed brokerage	40,596,557	-	-	40,596,557
	$ 1,855,969,880	$ -	$ 271,009,135	$ 2,126,979,015

	December 31, 2024			
	Level 1	**Level 2**	**Level 3**	**Total**
Mutual funds	$ 1,502,544,143	$ -	$ -	$ 1,502,544,143
Guaranteed annuities	-	-	233,053,061	233,053,061
Pooled separate account	39,101,754	-	-	39,101,754
Self-directed brokerage	36,391,174	-	-	36,391,174
	$ 1,578,037,071	$ -	$ 233,053,061	$ 1,811,090,132

The Plan is entirely participant-directed with regard to investment changes. There were no plan-level fund changes that were initiated by the Plan sponsor without participants being notified prior to the changes. TIAA-CREF is the Plan's single recordkeeper, and there are 30 investment options for the 403(b) plan, plus a self-directed brokerage option (counting Target Date funds as a single option).

The valuation methods as described in Note 3 may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table represents a reconciliation of the beginning and ending balances of the fair value measurements using significant unobservable inputs (Level 3) for the years ended December 31, 2025 and 2024:

	Guaranteed Annuity Contract
Beginning balance at January 1, 2025	$ 233,053,061
Transfers (*)	41,424,167
Interest	11,483,253
Purchases	2,286,110
Distributions	(17,237,456)
Ending balance at December 31, 2025	$ 271,009,135
Beginning balance at January 1, 2024	$ 222,130,256
Transfers(*)	8,600,859
Interest	10,564,984
Purchases	4,232,744
Distributions	(12,475,782)
Ending balance at December 31, 2024	$ 233,053,061

*Transfers include $29.5 million in assets transferred from the Salus Plans and reallocations of holdings from other plan investments.

The following table presents information about the valuation techniques used to measure fair value, which involve significant unobservable inputs and the ranges of values for those inputs related to the Plan's investment in assets categorized as Level 3 in the ASC 820 fair value hierarchy at December 31, 2025 and 2024:

December 31, 2025				
Type	**Fair Value**	**Valuation Technique**	**Significant Unobservable Inputs**	**Range**
Retirement Annuity ("RA" and "GRA")	$175,157,299	Discounted cash flow	Risk-adjusted discount rate applied*	3.55%-6.50%
Retirement Choice ("RC")	95,851,836	Discounted cash flow	Risk-adjusted discount rate applied*	3.80%-6.75%

December 31, 2024				
Type	**Fair Value**	**Valuation Technique**	**Significant Unobservable Inputs**	**Range**
Retirement Annuity ("RA" and "GRA")	$157,062,404	Discounted cash flow	Risk-adjusted discount rate applied*	3.65%-6.50%
Retirement Choice ("RC")	75,990,657	Discounted cash flow	Risk-adjusted discount rate applied*	3.90%-6.75%

Fully benefit-responsive TIAA Traditional Annuity account balances are reported at contract value. Contract value is the aggregation of contributions, plus interest, less withdrawals, if any. Crediting rates are a combination of a guaranteed rate and an annually established discretionary rate. Additionally, the discretionary rate applied to contributions received during a reporting period may vary from the discretionary rate applied to account balances at the end of the prior reporting period.

Contract value approximates a discounted cash flow value calculated using an appropriate risk-adjusted market discount rate that correlates closely with TIAA Traditional Annuity's historical crediting rates.

*Unobservable inputs include the discount rate applied.

5. TIAA TRADITIONAL ANNUITIES

The TIAA Traditional Annuities are fixed annuity contracts that are fully and unconditionally guaranteed by TIAA, a nonprofit legal reserve life insurance company. During the accumulation phase, the TIAA Traditional Annuities provide a guarantee of principal, a guaranteed minimum rate of interest, and the potential for additional interest if declared by TIAA. Additional interest, when declared, remains in effect for the "declaration year," which begins each March 1 for accumulating annuities, and January 1 for lifetime payout annuities. Additional interest is not guaranteed for future years. When the accumulation in TIAA Traditional Annuities is converted to an annuity based on life expectancy, the present value of the stream of payments is equal to the accumulation. When a participant's accumulation in TIAA Traditional Annuities is converted to a lifetime payout annuity, the present value of the stream of payments is equal to the accumulated balance, and the entire amount is recorded as a purchase of annuity contracts in the Statement of Changes in Net Assets Available for Benefits.

The Traditional Annuities are offered through a variety of contract types, which include the Retirement Annuities ("RA"), Group Retirement Annuity ("GRA"), and Retirement Choice ("RC"). The TIAA Traditional Annuity holdings within the RA, GRA, and RC contracts have liquidity restrictions and are non-benefit responsive. The type of contract through which a participant invests in TIAA Traditional Annuities determines the applicability of certain account features, such as the guaranteed minimum interest rate, additional interest declarations, the degree of liquidity of the participant's account, and the options for receiving income upon retirement. Together, the guaranteed minimum and additional amounts make up the crediting interest rate. GRA and RA contracts are presented as TIAA Traditional Non-Benefit Responsive contracts, and RC contracts are presented as TIAA Traditional Non-Benefit Responsive 2 on the accompanying supplemental schedule.

The RA, GRA, and RC contracts are included in the financial statements at fair value, non-benefit responsive, as reported to the Plan by TIAA. Fair value approximates contract value, as reported to the Plan by TIAA. Participants may direct the withdrawal or transfer of all or a portion of their account balances held under contracts in accordance with the terms of the Plan. Distributions within the TIAA Traditional RA, GRA, and RC investments are subject to withdrawal restrictions. RA contracts generally provide for distributions through a 10-year Transfer Payout Annuity, GRA contracts provide payout options ranging from 5 to 30 years, including a 10-year payout option, and RC contracts provide for distributions through an 84-month (7-year) Systematic Transfer Payout Annuity. The TIAA Traditional interest rates for RA, GRA, and RC contracts include the minimum guaranteed rate of 3% plus additional amounts that are not guaranteed but may be established on a year-by-year basis by the TIAA Board of Trustees. Any guarantees under annuities issued by TIAA are subject to TIAA's claims-paying ability. This product is a guaranteed insurance contract and not an investment for federal securities law purposes.

TIAA Traditional Annuities are also offered through GSRA, the Supplemental Retirement Annuity ("SRA"), and the Retirement Choice Plus ("RCP") contracts. These contracts operate similarly to the non-benefit responsive contracts except that there are no liquidity restrictions and they are fully benefit responsive. GSRA and SRA contracts are presented as TIAA Traditional Benefit Responsive contracts, and RCP contracts are presented as TIAA Traditional Benefit Responsive 2 on the accompanying supplemental schedule.

TIAA Stable Value is a fixed-rate group annuity contract offered by TIAA. Contributions are maintained in a nonunitized separate account of TIAA and provide a contractual or guaranteed amount of future benefits to participants. Allocations to TIAA Stable Value are backed by the assets in the separate account and, if insufficient, by TIAA's claims-paying ability. TIAA Stable Value is fully benefit responsive and is reported at contract value. The contract provides a guaranteed minimum rate of interest between 1% and 3%, before deductions for contract fees, with the potential for additional interest above the guaranteed minimum. Participant withdrawals are not subject to withdrawal restrictions; however, equity wash provisions restrict immediate transfers to competing investment options.

Certain events might limit the ability of the Plan to transact at contract value with the issuer. Such events include (1) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA, and (5) premature termination of the contract.

No events are probable of occurring that might limit the ability of the Plan to transact at contract value with the contract issuers, and that also would limit the ability of the Plan to transact at contract value with the participants.

In addition, certain events allow the issuer to terminate the contract with the Plan and settle at an amount different from the contract value. Such events include (1) an uncured violation of the Plan's investment guidelines, (2) a breach of material obligation under the contract, (3) a material misrepresentation, and (4) a material amendment to the agreement without the consent of the issuer.

6. PLAN TERMINATION

Although the University has not expressed any intent to terminate the Plan, it has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event that the Plan is terminated, the value of each participant's account will be distributed.

7. FEDERAL INCOME TAX STATUS

The Plan has been designed to qualify under Section 403(b) of the Code. The Plan is required to operate in conformity with the Code to maintain the tax-exempt status for participants of the Plan. The Plan administrator believes that the Plan is currently designed in accordance with the applicable requirements of Section 403(b) of the Code and, therefore, believes that the Plan is qualified and the related custodial accounts and tax-deferred annuities are tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Generally accepted accounting principles require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that, as of December 31, 2025 and December 31, 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions. There are currently no audits for any tax periods in progress. The Plan administrator believes that it is no longer subject to income tax examinations for years prior to 2022.

8. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to Schedule H of the Form 5500:

	2025	2024
Net assets available for benefits per the financial statements	$ 2,174,254,093	$ 1,847,237,690
Participants loans reduced by deemed distributions in the current year and currently outstanding	(392,357)	(491,163)
Net assets available for benefits per Form 5500	$ 2,173,861,736	$ 1,846,746,527
Change in net assets per the financial statements	$ 327,016,403	$ 176,365,729
Change in participants loans reduced by outstanding deemed distributions	98,806	(86,296)
Change in net assets per Form 5500	$ 327,115,209	$ 176,279,433

9. INFORMATION CERTIFIED BY THE CUSTODIANS AND INSURANCE COMPANIES

The following is a summary of the information regarding the Plan as of December 31, 2025 and 2024, and for the year ended December 31, 2025, included in the Plan's financial statements and supplemental schedule, that was prepared by or derived from information prepared and certified by the custodian and insurance company and furnished to the Plan administrator.

In addition to TIAA-CREF as insurance companies, the certification extends to those investments which TIAA Trust, N.A., a national trust bank, held as a directed trustee and custodian that are record-kept by TIAA. The certification is provided by TIAA on behalf of TIAA Trust, N.A., pursuant to agreements authorizing TIAA to certify the Plan's investment information and records as required.

Statements of Net Assets Available for Benefits

		2025		2024
Investments at fair value	$	2,126,979,015	$	1,811,090,132
Investments at contract value	$	41,391,743	$	30,384,072
Notes receivable from participants	$	5,883,335	$	5,763,486

Statement of Changes in Net Assets Available for Benefits

Dividends and interest	$	67,188,122
Net appreciation in fair value of investments	$	221,051,812

10. RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

The University, as Plan sponsor, is a related party to the Plan. Certain administrative expenses of the Plan are paid by the University on behalf of the Plan. Certain Plan investments include a pooled separate account, guaranteed annuities, and mutual funds managed by TIAA Trust, N.A., as custodian, and TIAA-CREF, as insurance companies, and therefore these transactions and expenses qualify as party-in-interest transactions.

Interest and dividends for 2025 resulting from these transactions are as follows:

		2025
TIAA-CREF	$	31,684,171

11. SUBSEQUENT EVENTS

For the year ended December 31, 2025, subsequent events were evaluated through October 9 2026, the date the financial statements were available to be issued.

Management has determined that no subsequent events occurred that require recognition or disclosure in the financial statements.

SUPPLEMENTAL SCHEDULE

Drexel University
Defined Contribution Retirement Plan
Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)
As of December 31, 2025

	Identity of Issue	Description of Investment	Cost	Current Value
*	TIAA Real Estate Account	Pooled Separate Account	**	$ 46,506,739
*	TIAA Traditional Benefit Responsive	Guaranteed Annuity Contract	**	31,334,338
*	TIAA Traditional Non Benefit Responsive	Guaranteed Annuity Contract	**	175,157,299
*	TIAA Traditional Benefit Responsive 2	Guaranteed Annuity Contract	**	9,925,480
*	TIAA Traditional Non Benefit Responsive 2	Guaranteed Annuity Contract	**	95,851,836
*	TIAA Stable Value	Guaranteed Annuity Contract	**	131,925
	Subtotal Guaranteed Annuity Contract			312,400,878
*	CREF Bond Market R2	Mutual Fund	**	5,843,283
*	CREF Global Equities R2	Mutual Fund	**	53,215,582
*	CREF Growth R2	Mutual Fund	**	68,884,766
*	CREF Inflation-Linked Bond R2	Mutual Fund	**	10,753,839
*	CREF Money Market R1	Mutual Fund	**	53,769
*	CREF Money Market R2	Mutual Fund	**	6,086,355
*	CREF Responsible Balanced R2	Mutual Fund	**	26,138,364
*	CREF S&P 500 Index R2	Mutual Fund	**	15,991,035
*	CREF Total Global Stock R2	Mutual Fund	**	164,538,926
*	TIAA ACCESS Lifecycle 2035	Mutual Fund	**	55
*	TIAA ACCESS Large-Cap Value	Mutual Fund	**	127
*	TIAA ACCESS Mid-Cap Value	Mutual Fund	**	104
*	TIAA ACCESS Real Estate Securities	Mutual Fund	**	44
*	NUVEEN Bond Index Institutional Class	Mutual Fund	**	15,635,455
*	NUVEEN International Equity Index-Institutional Class	Mutual Fund	**	51,584,080
*	NUVEEN Large-Cap Growth Inst	Mutual Fund	**	20,608,717
*	NUVEEN Lifecycle Index Retirement-Institutional Class	Mutual Fund	**	1,972,755
*	NUVEEN Lifecycle Index 2010-Institutional Class	Mutual Fund	**	17,258,826
*	NUVEEN Lifecycle Index 2015-Institutional Class	Mutual Fund	**	22,315,826
*	NUVEEN Lifecycle Index 2020-Institutional Class	Mutual Fund	**	32,326,180
*	NUVEEN Lifecycle Index 2025-Institutional Class	Mutual Fund	**	50,539,673
*	NUVEEN Lifecycle Index 2030-Institutional Class	Mutual Fund	**	66,255,184
*	NUVEEN Lifecycle Index 2035-Institutional Class	Mutual Fund	**	70,878,875
*	NUVEEN Lifecycle Index 2040-Institutional Class	Mutual Fund	**	79,582,947
*	NUVEEN Lifecycle Index 2045-Institutional Class	Mutual Fund	**	63,091,695
*	NUVEEN Lifecycle Index 2050-Institutional Class	Mutual Fund	**	47,180,390
*	NUVEEN Lifecycle Index 2055-Institutional Class	Mutual Fund	**	22,105,163
*	NUVEEN Lifecycle Index 2060-Institutional Class	Mutual Fund	**	9,904,659
*	NUVEEN Lifecycle Index 2065-Institutional Class	Mutual Fund	**	1,800,440
*	NUVEEN Money Market-Institutional Class	Mutual Fund	**	11,841,603
*	NUVEEN S&P 500 Index-Institutional Class	Mutual Fund	**	59,427,969
*	NUVEEN Small-CAP Balanced Index-Institutional Class	Mutual Fund	**	12,624,455
	American Funds Europacific Growth Class R5	Mutual Fund	**	4,257,187
	American Funds Europacific Growth Class R6	Mutual Fund	**	7,472,575
	Cohen & Steers Institutional Realty Shares	Mutual Fund	**	15,580,060
	DFA Emerging Markets I	Mutual Fund	**	20,371,042
	MFS Blended Research Mid-Cap Equities R6_AY	Mutual Fund	**	25,141,997
	PGIM Total Return Bond Class R6	Mutual Fund	**	19,362,359
	PIMCO Real Return Institutional Class	Mutual Fund	**	8,365,619
	T. Rowe Price Institutional Large Cap Growth I Class	Mutual Fund	**	38,818,685
	T. Rowe Price Institutional Large Cap Value I Class	Mutual Fund	**	19,844,181
	Vanguard Emerging Markets Stock Index Fund Investor Shares	Mutual Fund	**	16,945,774
	Vanguard Extended Market Index Fund - Institutional	Mutual Fund	**	14,615,801
	Vanguard Federal Money Market Investor	Mutual Fund	**	21,351,363
	Vanguard FTSE All-World ex-US Index Fund Admiral	Mutual Fund	**	9,000,892
	Vanguard Inflation-Protected Securities Fund Investor	Mutual Fund	**	7,866,383
	Vanguard Institutional Index Fund Institutional Plus	Mutual Fund	**	181,048,670
	Vanguard International Growth Fund Investor Shares	Mutual Fund	**	10,852,510

Drexel University
Defined Contribution Retirement Plan
Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)
As of December 31, 2025

Identity of Issue	Description of Investment	Cost	Current Value
Vanguard Real Estate Index Fund Investor Shares	Mutual Fund	**	5,049,384
Vanguard Small-Cap Index Fund Institutional	Mutual Fund	**	28,727,706
Vanguard Target Retirement 2020	Mutual Fund	**	13,446,132
Vanguard Target Retirement 2025	Mutual Fund	**	17,332,595
Vanguard Target Retirement 2030	Mutual Fund	**	23,519,451
Vanguard Target Retirement 2035	Mutual Fund	**	40,501,130
Vanguard Target Retirement 2040	Mutual Fund	**	36,333,735
Vanguard Target Retirement 2045	Mutual Fund	**	50,090,565
Vanguard Target Retirement 2050	Mutual Fund	**	29,724,098
Vanguard Target Retirement 2055	Mutual Fund	**	12,431,862
Vanguard Target Retirement 2060	Mutual Fund	**	1,471,002
Vanguard Target Retirement 2065	Mutual Fund	**	1,669,551
Vanguard Target Retirement 2070	Mutual Fund	**	274,144
Vanguard Target Retirement Income	Mutual Fund	**	10,146,915
Vanguard Total Bond Market Index Fund Admiral Shares	Mutual Fund	**	31,313,143
Vanguard Windsor II Fund Investor Shares	Mutual Fund	**	37,498,932
Subtotal Mutual Funds			1,768,866,584
* TIAA-CREF Self Directed Account	Other	**	40,596,557
Subtotal Other			40,596,557
* Notes receivable from participants	Fixed interest rates ranging from 4.25% to 9.50% with maturities through 2035	**	5,883,335
Grand Total			$ 2,174,254,093

* Party-in-interest to the Plan

** Cost information is not required for participant directed investments and therefore, is not included.

The information in this schedule has been certified as to its completeness and accuracy by TIAA Trust, N.A, as custodian, and TIAA-CREF, as insurance companies.

Plan Name: Drexel University Defined Contribution Retirement Plan

Plan Sponsor: Drexel University

EIN/PN: 23-1352630 103

Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) As of December 31, 2025

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*	TIAA Real Estate Account	Pooled Separate Account	**	$ 46,506,739
*	TIAA Traditional Benefit Responsive	Guaranteed Annuity Contract	**	31,334,338
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Plan Name: Drexel University Defined Contribution Retirement Plan

Plan Sponsor: Drexel University

EIN/PN: 23-1352630 103

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