

<div>Form 5500</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Annual Return/Report of Employee Benefit Plan</div> <div>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).</div> <div>▶ Complete all entries in accordance with the instructions to the Form 5500.</div>	<div>OMB Nos. 1210-0110 1210-0089</div> <div>2023</div> <div>This Form is Open to Public Inspection</div>
--	---	---

Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024	
A	This return/report is for: <div><div><input type="checkbox"/> a multiemployer plan</div><div><input type="checkbox"/> a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)</div><div><input checked="" type="checkbox"/> a single-employer plan</div><div><input type="checkbox"/> a DFE (specify) _____</div><div><input type="checkbox"/> the first return/report</div><div><input type="checkbox"/> the final return/report</div><div><input type="checkbox"/> an amended return/report</div><div><input type="checkbox"/> a short plan year return/report (less than 12 months)</div></div>
C	If the plan is a collectively-bargained plan, check here. ▶ <input checked="" type="checkbox"/>
D	Check box if filing under: <div><div><input checked="" type="checkbox"/> Form 5558</div><div><input type="checkbox"/> automatic extension</div><div><input type="checkbox"/> the DFVC program</div><div><input type="checkbox"/> special extension (enter description)</div></div>
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ <input type="checkbox"/>

Part II	Basic Plan Information—enter all requested information
1a	Name of plan COLUMBIA UNIVERSITY RETIREMENT PLAN - LOCAL 241, TRANSPORT WORKERS UNION OF AMERICA
1b	Three-digit plan number (PN) ▶ 005
1c	Effective date of plan 07/01/1972
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) TRUSTEES OF COLUMBIA UNIVERSITY C/O BENEFITS DEPARTMENT 615 WEST 131ST STREET STUDEBAKER, 4TH FLOOR NEW YORK, NY 10027-7922
2b	Employer Identification Number (EIN) 13-5598093
2c	Plan Sponsor's telephone number 212-851-7000
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.	04/02/2025	DANIEL DRISCOLL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor COLUMBIA UNIVERSITY VICE PRESIDENT OF HUMAN RESOURCES 615 WEST 131ST STREET NEW YORK, NY 10027-7922	3b Administrator's EIN 13-2855235 3c Administrator's telephone number 212-851-7000 <div style="background-color: #cccccc; height: 40px;"></div>
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 1660
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	<div style="background-color: #cccccc; height: 20px;"></div> <div style="background-color: #cccccc; height: 20px;"></div> 6a(1) 945 6a(2) 969 6b 399 6c 195 6d 1563 6e 141 6f 1704 6g(1) 6g(2) 6h 22
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

1A

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

9a Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
---	---

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

a Pension Schedules

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

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information) – Number Attached 0
- (4) ☒ **C** (Service Provider Information)
- (5) ☒ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2023 Form M-1 annual report. If the plan was not required to file the 2023 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

<div>SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Single-Employer Defined Benefit Plan Actuarial Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).</div> <div>▶ File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110</div> <div>2023</div> <div>This Form is Open to Public Inspection</div>
--	---	--

For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024	
▶ Round off amounts to nearest dollar.	
▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.	
A Name of plan COLUMBIA UNIVERSITY RETIREMENT PLAN - LOCAL 241, TRANSPORT WORKERS UNION OF AMERICA	B Three-digit plan number (PN) ▶ 005
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF TRUSTEES OF COLUMBIA UNIVERSITY C/O BENEFITS DEPARTMENT	D Employer Identification Number (EIN) 13-5598093
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 07 Day 01 Year 2023			
2	Assets:			
a	Market value	2a	166222860	
b	Actuarial value	2b	182373854	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a	For retired participants and beneficiaries receiving payment	516	73055870	73055870
b	For terminated vested participants	199	12563551	12563551
c	For active participants	945	69106146	72512691
d	Total	1660	154725567	158132112
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) <input type="checkbox"/>			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.35 %	
6	Target normal cost			
a	Present value of current plan year accruals	6a	6259905	
b	Expected plan-related expenses	6b	235600	
c	Target normal cost	6c	6495505	

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

<div>SIGN HERE</div>	<div>Signature of actuary</div> <div>AMY ELIZABETH AYRES, F.S.A, E.A.</div> <div>Type or print name of actuary</div> <div>WILLIS TOWERS WATSON US LLC</div> <div>Firm name</div> <div>200 LIBERTY STREET NEW YORK, NY 10281</div> <div>Address of the firm</div>	<div>01/29/2025</div> <div>Date</div> <div>23-06594</div> <div>Most recent enrollment number</div> <div>212-309-3662</div> <div>Telephone number (including area code)</div>
--------------------------	--	--

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	45188084
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	5633080
9	Amount remaining (line 7 minus line 8)	0	39555004
10	Interest on line 9 using prior year's actual return of <u>3.63</u> %	0	1435847
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		3358564
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.52</u> %		0
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		121916
c	Total available at beginning of current plan year to add to prefunding balance		3480480
d	Portion of (c) to be added to prefunding balance		3480480
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	44471331

Part III Funding Percentages			
14	Funding target attainment percentage	14	87.20 %
15	Adjusted funding target attainment percentage	15	115.33 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	93.06 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
12/20/2024	5177835	0			
Totals ►			18(b)	5177835	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contributions from prior years.	19a 0
b Contributions made to avoid restrictions adjusted to valuation date	19b 0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c 4796098
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
c If line 20a is "Yes," see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of quarter of this plan year	
(1) 1st	(2) 2nd
0	0
(3) 3rd	(4) 4th
0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 5.00 %	3rd segment: 5.74 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 65
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> Substitute	

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
26 Demographic and benefit information		
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c).....	31a	6495505	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	20229589	1900970	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....	34	8396475	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	6958436	6958436
36 Additional cash requirement (line 34 minus line 35).....	36	1438039	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	4796098	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	3358059	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	3358059	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input checked="" type="checkbox"/> 2021
--

<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	OMB No. 1210-0110
		2023
		This Form is Open to Public Inspection.

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

<div>A</div> <div>Name of plan</div> <div>COLUMBIA UNIVERSITY RETIREMENT PLAN - LOCAL 241, TRANSPORT WORKERS UNION OF AMERICA</div>	<div>B</div> <div>Three-digit plan number (PN)</div> <div>▶</div> <div>005</div>
<div>C</div> <div>Plan sponsor's name as shown on line 2a of Form 5500</div> <div>TRUSTEES OF COLUMBIA UNIVERSITY C/O BENEFITS DEPARTMENT</div>	<div>D</div> <div>Employer Identification Number (EIN)</div> <div>13-5598093</div>

Part I

Service Provider Information (see instructions)

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

1

Information on Persons Receiving Only Eligible Indirect Compensation

- a

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

Yes

☒

No
- b

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

(b)

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

(b)

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

(b)

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

(b)

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

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

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

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

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

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

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

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

(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)

STATE STREET GLOBAL ADVISORS

81-4017137

(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?
18 19 51	TRUSTEE	224617	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

PRICEWATERHOUSECOOPERS LLP

13-4008324

(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 50	NONE	43950	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

WILLIS TOWERS WATSON US LLC

53-0181291

(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?
11 50	NONE	41900	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

CBIZ INC.

31-1582098

(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 50	NONE	9010	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) 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 2023 This Form is Open to Public Inspection.
---	--	--

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

A Name of plan <u>COLUMBIA UNIVERSITY RETIREMENT PLAN - LOCAL 241, TRANSPORT WORKERS UNION OF AMERICA</u>	B Three-digit plan number (PN) ► <u>005</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>TRUSTEES OF COLUMBIA UNIVERSITY C/O BENEFITS DEPARTMENT</u>	D Employer Identification Number (EIN) <u>13-5598093</u>

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

a Name of MTIA, CCT, PSA, or 103-12 IE: <u>20+YR US TREAS STRIPS INDEX NL FUND</u>		
b Name of sponsor of entity listed in (a): <u>STATE STREET GLOBAL ADVISORS TRUST COMPANY</u>		
c EIN-PN <u>90-0337987-169</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>27760285</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LONG USCREDIT INDX NL FUND CME3NON</u>		
b Name of sponsor of entity listed in (a): <u>STATE STREET GLOBAL ADVISORS TRUST COMPANY</u>		
c EIN-PN <u>04-0025081-146</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>29888973</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LONG USTREASURY INDX NLFUND CM1NNON</u>		
b Name of sponsor of entity listed in (a): <u>STATE STREET GLOBAL ADVISORS TRUST COMPANY</u>		
c EIN-PN <u>04-0025081-479</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>4958245</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>GLOBAL DEFENSIVE EQUITY NL CTF ZVNM</u>		
b Name of sponsor of entity listed in (a): <u>STATE STREET GLOBAL ADVISORS TRUST COMPANY</u>		
c EIN-PN <u>46-6399427-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>15038144</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>USHIYLD BB-B CONSTD INDXNL CTF CM3Y</u>		
b Name of sponsor of entity listed in (a): <u>STATE STREET GLOBAL ADVISORS TRUST COMPANY</u>		
c EIN-PN <u>04-3508891-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>11720244</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>REAL ASSET NL FUND</u>		
b Name of sponsor of entity listed in (a): <u>STATE STREET GLOBAL ADVISORS TRUST COMPANY</u>		
c EIN-PN <u>90-0337987-291</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MSCI ACWI INDEX NL FUND ZVRH</u>		
b Name of sponsor of entity listed in (a): <u>STATE STREET GLOBAL ADVISORS TRUST COMPANY</u>		
c EIN-PN <u>32-6528132-042</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>40094832</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: 20+YR US HGH QLTY CRP BOND NL FD

b Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST COMPANY

c EIN-PN 90-0337987-296	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 36515097
--------------------------------	------------------------	--

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

<div>SCHEDULE H</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Financial Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500.</div>	OMB No. 1210-0110
		2023
		This Form is Open to Public Inspection

For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024		
<div>A</div> Name of plan COLUMBIA UNIVERSITY RETIREMENT PLAN - LOCAL 241, TRANSPORT WORKERS UNION OF AMERICA	<div>B</div> Three-digit plan number (PN) ▶	005
<div>C</div> Plan sponsor's name as shown on line 2a of Form 5500 TRUSTEES OF COLUMBIA UNIVERSITY C/O BENEFITS DEPARTMENT	<div>D</div> Employer Identification Number (EIN) 13-5598093	

Part I	Asset and Liability Statement
--------	-------------------------------

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	161280386	165975820
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	161280386	165975820
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	782345	653102
k Total liabilities (add all amounts in lines 1g through 1j)	1k	782345	653102
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	160498041	165322718

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)	5064942	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		5064942
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)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(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)		
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		7642352
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(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)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		12707294

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	7399878	
(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)		7399878
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Recordkeeping fees.....	2i(3)	9010	
(4) IQPA audit fees.....	2i(4)	43950	
(5) Investment advisory and investment management fees	2i(5)	224618	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)	41900	
(8) Legal fees	2i(8)	3861	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	159400	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		482739
j Total expenses. Add all expense amounts in column (b) and enter total	2j		7882617

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		4824677
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: **PRICEWATERHOUSECOOPERS**

(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.)		<input checked="" type="checkbox"/>	
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.)		<input checked="" type="checkbox"/>	
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.)		<input checked="" type="checkbox"/>	
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.)		<input checked="" type="checkbox"/>	
e Was this plan covered by a fidelity bond?	<input checked="" type="checkbox"/>		25000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		<input checked="" type="checkbox"/>	
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?		<input checked="" type="checkbox"/>	
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?		<input checked="" type="checkbox"/>	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	<input checked="" type="checkbox"/>		
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.)	<input checked="" type="checkbox"/>		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		<input checked="" type="checkbox"/>	
l Has the plan failed to provide any benefit when due under the plan?		<input checked="" type="checkbox"/>	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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 533106.

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 2023 This Form is Open to Public Inspection.
---	---	--

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

A Name of plan <u>COLUMBIA UNIVERSITY RETIREMENT PLAN - LOCAL 241, TRANSPORT WORKERS UNION OF AMERICA</u>	B Three-digit plan number (PN) ▶ <u>005</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>TRUSTEES OF COLUMBIA UNIVERSITY C/O BENEFITS DEPARTMENT</u>	D Employer Identification Number (EIN) <u>13-5598093</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>13-5598093</u>		
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	<u>5</u>

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)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> 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.	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11 a Does the ESOP hold any preferred stock?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

Schedule R (Form 5500) 2023
v. 230707

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)

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)

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)

14a**14b****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: 33.0 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 60.0 %

High-Yield Debt: 7.0 % Real Assets: 0.0 % Cash or Cash Equivalents: 0.0 % Other: 0.0 %

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_____.

**Columbia University
Retirement Plan – Local 241,
Transport Workers Union of
America**

**Financial Statements and Supplemental Schedules
Required by ERISA
June 30, 2024 and 2023**

Columbia University Retirement Plan - Local 241, Transport Workers Union of America

Index

	Page(s)
Report of Independent Auditors	1–4
Financial Statements	
Statements of Net Assets Available for Benefits June 30, 2024 and 2023	5
Statement of Changes in Net Assets Available for Benefits Year Ended June 30, 2024	6
Statements of Accumulated Plan Benefits June 30, 2024 and 2023	7
Statement of Changes in Accumulated Plan Benefits Year Ended June 30, 2024	8
Notes to Financial Statements June 30, 2024 and 2023	9–16
Supplemental Schedules Required by ERISA*	
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) June 30, 2024	17
Schedule H, Line 4j - Schedule of Reportable Transactions Year Ended June 30, 2024	18

* Other schedules required by 29 CFR 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 are not included because they are not applicable.



Report of Independent Auditors

To the Administrator of
Columbia University Retirement Plan - Local 241, Transport Workers Union of America

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

We have performed an audit of the accompanying financial statements of Columbia University Retirement Plan - Local 241, Transport Workers Union of America (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 and of accumulated plan benefits as of June 30, 2024 and 2023, and the related statements of changes in net assets available for benefits and of changes in accumulated plan benefits for the year ended June 30, 2024, 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 June 30, 2024 and 2023 and for the year ended June 30, 2024, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audit and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report

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



Basis for Opinion

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

Responsibilities of Management for the 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

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

In performing an audit in accordance with US GAAS, we:

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



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

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

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

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

Other Matter – Supplemental Schedules Required by ERISA

Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of June 30, 2024 and Schedule H, Line 4j - Schedule of Reportable Transactions for the year ended June 30, 2024 ("supplemental schedules"), are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with US GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information,



are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

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

PricewaterhouseCoopers LLP

New York, New York
March 27, 2025

**Columbia University Retirement Plan - Local 241, Transport Workers
Union of America**
Statements of Net Assets Available for Benefits
June 30, 2024 and 2023

	2024	2023
Assets		
Investments, at fair value		
Common collective trust funds	\$ 165,975,820	\$ 161,280,386
Total assets	<u>165,975,820</u>	<u>161,280,386</u>
Liabilities		
Amount payable to Columbia University	596,077	669,641
Accrued expenses	<u>57,025</u>	<u>112,704</u>
Total liabilities	<u>653,102</u>	<u>782,345</u>
Net assets available for benefits	<u>\$ 165,322,718</u>	<u>\$ 160,498,041</u>

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

**Columbia University Retirement Plan - Local 241, Transport Workers
Union of America**
Statement of Changes in Net Assets Available for Benefits
Year Ended June 30, 2024

	2024
Additions to net assets attributed to	
Net appreciation in the fair value of common collective trusts	\$ 7,642,352
Employer contributions	<u>5,064,942</u>
Total additions	<u>12,707,294</u>
Deductions from net assets attributed to	
Benefits paid to participants	7,399,878
Administrative expenses	<u>482,739</u>
Total deductions	<u>7,882,617</u>
Net increase in net assets available for benefits	4,824,677
Net assets available for benefits	
Beginning of year	<u>160,498,041</u>
End of year	<u>\$ 165,322,718</u>

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

**Columbia University Retirement Plan - Local 241, Transport Workers
Union of America**
Statements of Accumulated Plan Benefits
June 30, 2024 and 2023

	2024	2023
Actuarial present value of accumulated plan benefits		
Vested benefits		
Participants currently receiving payments	\$ 74,860,141	\$ 70,850,929
Other participants	<u>84,061,453</u>	<u>83,350,753</u>
	158,921,594	154,201,682
Nonvested benefits	<u>3,048,292</u>	<u>3,297,459</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 161,969,886</u>	<u>\$ 157,499,141</u>

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

**Columbia University Retirement Plan - Local 241, Transport Workers
Union of America**
Statement of Changes in Accumulated Plan Benefits
Year Ended June 30, 2024

	2024
Actuarial present value of accumulated plan benefits at beginning of year	<u>\$ 157,499,141</u>
Increase during the year attributable to	
Additional benefits accumulated	6,496,789
Actuarial losses	2,118,517
Interest due to the decrease in the discount period	8,656,703
Benefits paid	(7,399,878)
Assumption changes	<u>(5,401,386)</u>
Net increase	<u>4,470,745</u>
Total actuarial present value of accumulated plan benefits at end of year	<u>\$ 161,969,886</u>

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

Columbia University Retirement Plan - Local 241, Transport Workers Union of America

Notes to Financial Statements

June 30, 2024 and 2023

1. Plan Description

The following description of the Columbia University Retirement Plan - Local 241, Transport Workers Union of America (the "Plan") is provided for general information purposes only. Participants should refer to the plan document for more complete information.

General

The Columbia University Retirement Plan - Local 241, Transport Workers Union of America was established to provide retirement, disability and death benefits for all employees of Columbia University in the City of New York (the "University") whose terms of employment are subject to the collective bargaining agreement between the University and Local 241 of the Transport Workers Union of America, AFL-CIO. The Plan is noncontributory on the part of employees. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Only employees who have completed the earlier of one year of service and at least 20 hours per week or 1,000 hours over one year of service are eligible to participate in the Plan.

As required by ERISA, the Trustees of the University Retirement Trust (all of whom are officers of the University) established on July 1, 1972 to be effective as of July 1976, the Columbia University Retirement Plan for Members of Local 241, of the Transport Workers Union of America Trust Fund (the "Fund") to hold the assets of the Plan.

With respect to services rendered on or after July 1, 1976, the Plan is a defined benefit plan to which the University contributes such amounts as are necessary to fund the Plan on an actuarial basis. The defined benefits of the Plan are insured by the Pension Benefit Guaranty Corporation ("PBGC"), a United States governmental agency, at the level of which would be in effect at the date of the Plan's termination if a termination should occur.

The Plan was amended and restated effective January 1, 2024, to increase the age at which participants are required to commence payment of their account balances as required under the Secure 2.0 Act of 2022.

Vesting

A participant becomes fully vested upon the earlier of (i) his/her completion of five (5) years of service, or (ii) the date the participant attains age 65.

Pension and Disability Benefits

A participant who retires on or after age 65 and is vested or age 62 with at least 20 years of service is entitled to receive an unreduced normal retirement benefit. A participant whose right to retirement benefits is vested and who ceases his/her employment with the University prior to his/her normal retirement date is entitled to receive retirement benefits on retirement provided he/she is age 55 or over, at a lower amount. A participant whose right to retirement benefits is vested is entitled to receive retirement benefits as a result of any disability which causes the termination of his/her status as an employee of the University prior to his/her normal retirement date.

Columbia University Retirement Plan - Local 241, Transport Workers Union of America

Notes to Financial Statements

June 30, 2024 and 2023

A participant's pension is calculated on whichever of the following formulas provides the greatest benefit to a participant:

- a. The career formula – For employees terminated July 1, 2008 or after, 2% of the participant's compensation for the first 10 years plus 2.2% of compensation for the next 20 years plus 2.3% for each year of credited service over 30 years. For employees who terminated prior to July 1, 2008, 2% of compensation was applied to all years of service; or
- b. The final pay formula – 1.2% of the participant's base earnings for the last five years' employment at the University multiplied by the total number of years of benefit service with the University.

Benefits are paid to participants in the form of various monthly annuities or lump sum distributions depending on the retiree participant election.

The maximum lump sum distribution threshold is \$100,000.

Death Benefits

If a participant dies before vested benefits under the Plan have begun, his/her designated beneficiary is eligible for a benefit generally calculated as though the participant had begun a 50% joint and survivor annuity as of the first of the month of the later of the participant's death or 55th birthday. Generally, if the designated beneficiary is the surviving spouse the benefit will begin as of such date (though generally not before the participant's normal retirement age without the surviving spouse's consent). Otherwise, the benefit will begin as of December 31 of the calendar year after the calendar year of the participant's death. If the participant dies after his/her benefits have begun, the form of benefit elected by the participant will determine the death benefit, if any.

Plan Administration

The general administration of the Plan and the responsibility for carrying out the Plan's provisions are performed by the Vice President for Human Resources of the University.

Contributions

Contributions from the University are reflected on the basis of actuarially computed amounts comprising normal costs plus a portion of unfunded costs, if any, required to be amortized over seven years. It is the University's policy to make contributions to meet the minimum funding requirements required by ERISA and from time to time to make such contributions which may be deemed prudent and cost effective in relation to regulations of any other government agencies such as the PBGC, Internal Revenue Service ("IRS") or Department of Labor ("DOL").

For financial statement purposes, the Plan recognizes contributions required to fulfill the ERISA minimum funding requirement in the current plan year whether or not received prior to the end of the plan year. Contributions in excess of the ERISA minimum funding requirements are recognized in the plan year in which the contribution is made. The University's contribution exceeded the ERISA minimum funding requirements of zero for the 2024 plan year.

For purposes of determining the minimum funding requirements required by ERISA, the Plan may elect to attribute any or all excess contributions received within eight and one-half months following the end of the plan year to the preceding plan year as allowed under IRS regulations for Schedule SB of Form 5500.

Columbia University Retirement Plan - Local 241, Transport Workers Union of America

Notes to Financial Statements

June 30, 2024 and 2023

Investments

Plan investments are managed under the terms of agreement between the University and State Street Global Advisors Trust Company, ("State Street"). State Street holds and serves as the trustee of the State Street commingled trust funds, the Plan's investment assets.

2. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting and in conformity with accounting principles generally accepted in the United States of America ("GAAP").

Investment Valuation and Income Recognition

Investments are reported at fair value. The Trustees of the University Retirement Trust determine the Plan's valuation policies utilizing information provided by the investment advisors and trustee. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on an accrual basis.

Net appreciation (depreciation) in the fair value of investments consists of the realized gains or losses and the unrealized appreciation or depreciation on those investments.

Actuarial Method

The actuarial method used to calculate the annual defined benefit pension contributions is the present value of accrued benefits method. The projected unit cost method is used for determining the projected benefit obligation.

Benefits to Participants

Plan benefits are paid to employees upon retirement, disability and certain terminations of employment. Benefit payments are recorded when paid to participants. Actual benefits to participants are paid by the University on behalf of the Plan. The Plan reimburses the University for such defined benefits paid.

Administrative Expenses

Investment, PBGC premiums and actuarial expenses are paid by the Plan. Administrative expenses paid by the University (primarily production/ mailing costs) are not reflected in the Plan's financial statements.

Use of Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits and changes therein at the dates of the financial statements. Actual results could differ from those estimates.

Risk and Uncertainties

Investments are exposed to various risks, such as interest rates, market, and credit risks. Market values of investments can decline for a number of reasons, including changes in prevailing market

Columbia University Retirement Plan - Local 241, Transport Workers Union of America

Notes to Financial Statements

June 30, 2024 and 2023

and interest rates, increases in defaults, credit rating downgrades, and global events such as a pandemic or international conflict. Due to the level of risk associated with certain investments, it is at least reasonably possible that changes in the values of investments will occur in the near term and that such changes could materially affect the amounts reported in the statement of net assets available for benefits.

Plan contributions are made, and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimates and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near-term could be material to the financial statements.

3. Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distribution that are attributable under the Plan's provisions to the service that employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits payable under all circumstances (retirement, death, disability, and termination of employment) are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by an independent actuarial firm. The actuarial present value of accumulated plan benefits is the amount that results from applying actuarial assumptions to adjust the future periodic payments attributable to service those employees have rendered to reflect the time value of money and probability of payment between the valuation date and the expected date of payment. Vested benefits are those that are not contingent on an employee's future service.

The significant assumptions underlying the computations of the actuarial present value of accumulated plan benefits at June 30, 2024 and 2023 were as follows:

Discount rate	5.65% for 2024 and 5.40% for 2023
Mortality basis	For 2024 and 2023, Pri-2012 "Healthy Annuitant" and "Employee" mortality tables with Scale MP-2021 generational mortality improvement.
Average retirement age	Age 65 for 2024 and 2023

The only change in assumptions that impacted the present value of accumulated plan benefits as of June 30, 2024 was an increase in the discount rate, which decreased the present value of accumulated plan benefits.

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

4. Fair Value Measurements

FASB Accounting Standards Codification ("ASC") 820, *Fair Value Measurement*, establishes a hierarchy of valuation inputs based on the extent to which the inputs are observable in the

Columbia University Retirement Plan - Local 241, Transport Workers Union of America

Notes to Financial Statements

June 30, 2024 and 2023

marketplace. Observable inputs reflect market data obtained from sources independent of the reporting entity and unobservable inputs reflect the entity's own assumptions about how market participants would value an asset or liability based on the best information available.

Valuation techniques used to measure fair value under ASC 820 utilize relevant observable inputs and minimize the use of unobservable inputs. The standard describes a fair value hierarchy based on three levels of inputs, of which the first two are considered observable and the last unobservable, that may be used to measure fair value.

The following describes the hierarchy of inputs used to measure fair value and the primary valuation methodologies used by the Plan for financial instruments measured at fair value on a recurring basis. A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement. The three levels of inputs are as follows:

- Level 1 Quoted prices in active markets for identical assets or liabilities.
- Level 2 Inputs other than Level 1 that are observable, either directly or indirectly, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the same term of the assets or liabilities.
- Level 3 Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement. In determining the categorization of the Plan's investments within the fair value hierarchy, the Plan has considered market information, including observable net asset values ("NAV"), and the length of time until the investment will become redeemable. Investments for which fair value is measured using NAV as a practical expedient are excluded from the hierarchy and have been reported separately within the table below. The categorization of a financial instrument within the hierarchy is based upon the pricing transparency of that instrument and does not necessarily correspond to the Plan's perceived risk of that instrument.

The Plan holds investments for which fair value is determined using the unadjusted NAV per share as provided by the fund as a practical expedient. Investments categorized as NAV include the Plan's investments in common collective trusts. The value of the Plan's investments in these trusts represents the Plans' ownership interest in the NAV of the respective trusts. Items classified as NAV do not have a quoted price in an active marketplace. As a practical expedient, the Plan is permitted under GAAP to estimate the fair value of an investment at the measurement date using the NAV reported by the fund without further adjustment, provided the NAV has been calculated in accordance with or in a manner consistent with GAAP, and provided further that the Plan does not expect to sell the investment at a value other than NAV.

Columbia University Retirement Plan - Local 241, Transport Workers Union of America

Notes to Financial Statements

June 30, 2024 and 2023

The following presents investments of the Plan as of June 30, 2024 and 2023, respectively, by caption and by level within the valuation hierarchy:

2024					
	Level 1	Level 2	Level 3	NAV	Total
Assets					
Investments					
Common collective trust funds					
Index funds	\$ -	\$ -	\$ -	\$ 165,975,820	\$ 165,975,820
Investments, at fair value	\$ -	\$ -	\$ -	\$ 165,975,820	\$ 165,975,820
2023					
	Level 1	Level 2	Level 3	NAV	Total
Assets					
Investments					
Common collective trust funds					
Index funds	\$ -	\$ -	\$ -	\$ 161,280,386	\$ 161,280,386
Investments, at fair value	\$ -	\$ -	\$ -	\$ 161,280,386	\$ 161,280,386

Common collective trust funds represent a pool of assets that are combined under a common investment strategy and are jointly managed by the same entity, in this case, State Street. These are index funds and are valued at NAV as practical expedient. The Plan is eligible to redeem its interests daily. The common collective trust funds do not have any redemption restrictions, and these funds have trading terms varying from one to four days.

5. Information Certified by the Trustee

The Plan's management has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. State Street serves as the trustee of the Plan's investment assets and has certified that the amounts reflected as investments, at fair value, net appreciation in the fair value of common collective trusts and all other related investment information in the accompanying financial statements, notes to the financial statements, other than the leveling provided in Note 4, and supplemental schedules required by ERISA are complete and accurate. Certain information related to investments disclosed in the accompanying financial statements and ERISA-required supplemental schedules, including investments held at June 30, 2024 and 2023 and net appreciation in the fair value of common collective trust funds, for the year ended June 30, 2024, was obtained by management and agreed to or derived from information certified as complete and accurate by State Street (the trustee of the Plan).

Columbia University Retirement Plan - Local 241, Transport Workers Union of America

Notes to Financial Statements

June 30, 2024 and 2023

6. Plan Termination

The Plan has not expressed any intent to discontinue its contributions. However, it is free to do so at any time, subject to the provisions set forth in ERISA. In the event such discontinuance results in the termination of the Plan:

- a. The Plan shall have no liability or obligation to make any contribution or other payment with respect to any past or future period, except in such manner and amounts as may be specifically provided by ERISA;
- b. The Plan provides that the net assets of the Plan shall be allocated among the participants and beneficiaries of the Plan in the order provided for in ERISA; and
- c. To the extent unfunded vested benefits exist, ERISA provides that such benefits are payable by the PBGC to participants, up to specified limitations, as described in ERISA.

In the event of termination of the Plan, the assets of the Plan shall be allocated to provide benefits for participants and their beneficiaries in accordance with the priorities set forth in Section 4044 of ERISA and the PBGC's regulations thereunder. The benefit of any Highly Compensated Active Employee or Highly Compensated Former Employee (both within the meaning of section 414(q) of the Internal Revenue Code ("IRC") and the Treasury Regulations promulgated thereunder) will be limited to a benefit that is nondiscriminatory under section 401(a)(4) of the IRC, and without limiting the generality of the foregoing, if the Secretary of the Treasury (or their delegate) determines that any allocation made pursuant to this section (without regard to this sentence) results in discrimination prohibited by section 401(a)(4) of the IRC, then, if required to prevent the disqualification of the Plan under section 401(a) of the IRC, the assets allocated under subsections 4044(a)(4)(B), (a)(5) and (a)(6) of ERISA will be reallocated to the extent necessary to avoid such discrimination.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan Sponsor and the level of benefits guaranteed by the PBGC.

7. Related Party and Party-in-Interest Transactions

State Street holds the Plan's investment assets and acts as investment manager of the Plan's assets. Transactions in such investments qualify as party-in-interest transactions, which are exempt from prohibited transaction rules. During the year ended June 30, 2024, State Street expenses paid by the Plan were \$224,618. In addition, the University is a related-party and party-in-interest as it is the Plan Sponsor and provides certain services to the Plan. Currently, the University does not seek reimbursement for such services.

8. Federal Income Tax Status

The IRS has determined and informed the Plan by letter dated November 6, 2014 that the Plan and related trust are designed in accordance with applicable sections of the IRC. The Plan has been amended since receiving the determination letter. However, the Plan Administrator believes that the Plan and related trust are designed and are currently being operated in compliance with the applicable requirements of the IRC. GAAP requires Plan management to evaluate tax positions

**Columbia University Retirement Plan - Local 241, Transport Workers
Union of America
Notes to Financial Statements
June 30, 2024 and 2023**

taken by the Plan and recognize a tax liability (or asset) if the organization has taken an uncertain position that more likely would not be sustained upon examination by the relevant tax authorities. The Plan Administrator has analyzed the tax positions taken by the Plan, and has concluded that, as of June 30, 2024 and 2023, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes it is no longer subject to income tax examinations for years prior to 2021.

9. Subsequent Events

Subsequent events have been evaluated through March 27, 2025, the date the financial statements were available to be available to be issued.

On December 20, 2024, the University contributed \$5,177,835 to the Plan. For funding purposes, the Plan has elected to attribute this contribution to the plan year ended June 30, 2024 as allowed under the IRS regulations for Schedule SB of Form 5500. Refer to Contributions section of Note 1.

Supplemental Schedules Required by ERISA

Columbia University Retirement Plan - Local 241, Transport Workers Union of America
Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
June 30, 2024

(a)	(b)	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party		Cost	Current Value
	State Street Global Advisors Trust Company			
*	20+ Year U.S. Treasury STRIPS Index NL Fund (CMCA)	Common collective trust	\$ 33,851,772	\$ 27,760,285
*	MSCI ACWI Index NL Fund (ZVRH)	Common collective trust	31,218,228	40,094,832
*	Global Defensive Equity NL CTF (ZVNM)	Common collective trust	11,314,715	15,038,144
*	Long U.S. Credit Index NL Fund (CME3NON)	Common collective trust	27,242,529	29,888,973
*	Long U.S. Treasury Index NL Fund (CM1NNON)	Common collective trust	5,872,796	4,958,245
*	State Street 20+ Year U.S. High Quality Corporate Bond NL Fund (CMFS)	Common collective trust	35,435,241	36,515,097
*	U.S. High Yield BB/B Constrained Index NL CTF (CM3Y)	Common collective trust	8,899,206	11,720,244
			<u>\$ 153,834,487</u>	<u>\$ 165,975,820</u>

* Party-in-interest

The above information was derived from data certified accurate and complete by State Street Global Advisors Trust Company, trustee.

Columbia University Retirement Plan - Local 241, Transport Workers Union of America
Schedule H, Line 4j – Schedule of Reportable Transactions
Year Ended June 30, 2024

Identity of Party Involved	Description of Asset	# of Transactions	Purchase Price	Selling Price	Lease Rental	Expense Incurred With Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Series of Transactions									
State Street Global Advisors Trust Company	20+ Year U.S. Treasury STRIPS Index NL Fund (CMCA)	10	\$ 13,119,800				\$ 13,119,800	\$ 13,119,800	
State Street Global Advisors Trust Company	20+ Year U.S. Treasury STRIPS Index NL Fund (CMCA)	12		\$ 4,876,909			6,093,655	4,876,909	\$ (1,216,746)
State Street Global Advisors Trust Company	MSCI ACWI Index NL Fund(ZVRH)	7	5,694,532				5,694,532	5,694,532	
State Street Global Advisors Trust Company	MSCI ACWI Index NL Fund(ZVRH)	16		8,291,708			7,108,290	8,291,708	1,183,418

Note: The items listed above represent a series of transactions, which are in excess of 5% of the fair value of plan assets at July 1, 2023.

The above information was derived from data certified accurate and complete by State Street Global Advisors Trust Company, trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a Schedule of Active Participant Data as of July 1, 2023

Attained Age	Attained Years of Credited Service ¹										Total
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	10	3	0	0	0	0	0	0	0	0	13
25-29	20	22	4	0	0	0	0	0	0	0	46
30-34	21	34	38	3	0	0	0	0	0	0	96
35-39	10	38	48	8	5	1	0	0	0	0	110
40-44	10	33	41	11	20	8	1	0	0	0	124
45-49	20	33	39	15	11	18	6	0	0	0	142
50-54	5	16	38	17	16	23	10	7	2	0	134
55-59	6	11	28	10	18	22	19	11	11	0	136
60-64	3	9	12	10	9	17	16	10	12	3	101
65-69	0	1	5	1	7	5	6	4	6	1	36
70 & over	0	0	0	2	0	1	0	1	2	1	7
Total	105	200	253	77	86	95	58	33	33	5	945

¹ Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
 EIN / PN: 13-5598093/005
 Plan Sponsor: Columbia University
 Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

Applicable month March 2023

Interest rate basis Segment rates

Interest rates:

Reflecting Stabilization

Not Reflecting Stabilization

First segment rate 4.75% 2.50%

Second segment rate 5.00% 3.83%

Third segment rate 5.74% 4.06%

Effective interest rate 5.35% 3.92%

Annual rates of increase:

Compensation 3.00%

Future Social Security wage bases N/A

Statutory limits on compensation N/A

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Inclusion date	The valuation date coincident with or next following the date on which the employee is hired
New or rehired employees	It was assumed there will be no new or rehired employees.
Mortality	
Healthy	Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2020 and annuitants (based on RP-2014 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2020).
Disabled	Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2020 and annuitants (based on RP-2014 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2020).
Termination	Rates varying by age and service

Representative Termination Rates

Percentage leaving during the year					
Age	Year 1	Year 2	Year 3	Year 4	Year 5+
20	30.0%	40.0%	40.0%	35.0%	30.0%
25	30.0%	35.0%	35.0%	35.0%	30.0%
30	20.0%	20.0%	20.0%	20.0%	15.0%
35	15.0%	15.0%	15.0%	15.0%	10.0%
40	10.0%	10.0%	10.0%	5.0%	5.0%
45	10.0%	10.0%	5.0%	5.0%	4.0%
50+	10.0%	5.0%	5.0%	4.0%	4.0%

Plan Name:	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN:	13-5598093/005
Plan Sponsor:	Columbia University
Valuation Date:	July 1, 2023

SCHEDULE SB ATTACHMENTS

Disability

Representative Disability Rates

The rates at which participants become disabled by age are shown below:

Percentage becoming disabled during the year	
Age	Rate
25	0.03%
30	0.03%
35	0.03%
40	0.04%
45	0.08%
50	0.21%
55	0.45%
60	1.01%
65	0.00%

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Retirement

Rates varying by age, average age 65

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants retire by age are shown below.

Percentage retiring during the year	
-------------------------------------	--

Age	Rate
55	5.0%
56	5.0%
57	5.0%
58	5.0%
59	3.0%
60	3.0%
61	3.0%
62	10.0%
63	10.0%
64	6.0%
65	15.0%
66	20.0%
67	20.0%
68	20.0%
69	20.0%
70	25.0%
71	20.0%
72	20.0%
73	20.0%
74	20.0%
75	30.0%
76	30.0%
77	30.0%
78	30.0%
79	30.0%
80	100.0%

Plan Name:	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN:	13-5598093/005
Plan Sponsor:	Columbia University
Valuation Date:	July 1, 2023

SCHEDULE SB ATTACHMENTS

Benefit commencement date:

Preretirement death benefit The later of the death of the active participant or the date the participant would have attained age 55

Deferred vested benefit The later of age 65 or termination of employment

Disability benefit Upon disablement

Retirement benefit Upon termination of employment

Form of payment

65% of assumed married participants are assumed to elect a joint and survivor annuity with the spouse as the contingent annuitant and 50% continuation and 35% are assumed to elect a lump sum (if eligible). 65% of assumed single participants are assumed to elect a life annuity and 35% are assumed to elect a lump sum (if eligible).

Percent married

70% of males; 50% of females. Used to value pre-retirement surviving spouse benefits and in determining the optional forms expected to be elected at commencement.

Spouse age

Wife three years younger than husband

Covered pay

Base rate of pay on the valuation date

Administrative expenses

\$235,600

Methods

Valuation date

First day of plan year

Funding target

Present value of accrued benefits

Target normal cost

Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Actuarial value of assets

Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2022 plan year).

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Columbia University and, based on that review, is not aware of any significant benefits required to be valued that were not.

Assumptions Rationale - Significant Economic Assumptions

Discount rate

The basis chosen was selected by the plan sponsor from among the choices prescribed by law, all of which are based on observed market data over certain periods of time.

Rates of increase in:

Compensation

Assumed compensation increases are based on plan sponsor expectations and collective bargaining agreements for near-term years and the effect that the assumed long-term CPI and NAW will have on compensation increases over the longer term.

The resulting salary increase assumption is select and ultimate.

We believe that the assumption chosen does not significantly conflict with what would be reasonable based on current and expected future CPI and NAW growth, taking into account historical variability, historical salary increase experience and historical and expected future changes in the level of expenses

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality	<p>Assumptions used for funding purposes are as prescribed by IRC §430(h).</p> <p>We believe the assumptions do not significantly conflict with what would be reasonable because they reflect recent experience, and are adjusted to reflect the plan sponsor's expectations regarding future mortality improvement.</p>
Disabled Mortality	<p>Assumptions used for funding purposes are as prescribed by IRC §430(h).</p> <p>For the reasons described above, we believe the assumptions do not significantly conflict with what would be reasonable.</p>
Termination	<p>Termination rates were based on an experience study conducted in 2021, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.</p> <p>For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.</p>
Disability	<p>Disability rates were based on an experience study conducted in 2021, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.</p> <p>For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.</p>
Retirement	<p>Retirement rates were based on an experience study conducted in 2021, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.</p> <p>For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.</p>

Plan Name:	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN:	13-5598093/005
Plan Sponsor:	Columbia University
Valuation Date:	July 1, 2023

SCHEDULE SB ATTACHMENTS

Benefit commencement date for deferred benefits:

Preretirement death benefit

Surviving spouses are assumed to begin benefits at the earliest permitted commencement date because ERISA requires benefits to start then unless the spouse elects to defer. If the spouse elects to defer, actuarial increases from the earliest commencement date must be given, so that a later commencement date is expected to be of approximately equal value, and experience indicates that most spouses do take the benefit as soon as it is available.

For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.

Deferred vested benefit

Deferred vested participants' assumed commencement age is a single age intended to capture the average age at commencement. Deferred vested early commencement factors are not subsidized so that the difference between this approach and using assumed commencement rates at multiple ages is not expected to be significant.

For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.

Form of payment

The percentage of retiring participants assumed to take lump sums is based on observed experience over the period 2016-2020.

The percentage of retiring participants assumed to take joint and survivor annuities, and the assumed survivor percentages, are based on observed experience over the period 2016-2020.

For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.

Marital Assumptions:

Percent married

The assumed percentage married is based on a blending of the marital status of recent retirees and of the current active population.

For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Prescribed Methods

Funding methods

The methods used for funding purposes as described in Statement of Actuarial Assumptions and Methods including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

Change in assumptions and methods

Change in assumptions since prior valuation

The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.

The mortality table used to calculate the funding target and target normal cost was updated to reflect the latest mortality improvement scale, as required by guidance issued by IRS under IRC §430. The mortality table was updated to include one additional year of projected mortality improvement as required by guidance issued by IRS under IRC §430

The administrative expense was updated to \$235,600 for contribution purposes.

Change in methods since prior valuation

None.

Sources of Data and Other Information

Columbia University furnished participant data as of June 30, 2023. Columbia University also supplied information on assets, contributions and plan provisions. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available. We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

Plan Name	Columbia University Retirement Plan – Local 241, Transport Workers Union of America
Plan Sponsor EIN	13-5598093
ERISA Plan #	005
Plan Year Ending	6/30/2024

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

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

<div>SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Single-Employer Defined Benefit Plan Actuarial Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).</div> <div>► File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110</div> <div>2023</div> <div>This Form is Open to Public Inspection</div>
--	---	--

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

► Round off amounts to nearest dollar.
► Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan COLUMBIA UNIVERSITY RETIREMENT PLAN - LOCAL 241, TRANSPORT WORKERS UNION OF AMERICA	B Three-digit plan number (PN) ► 005
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF TRUSTEES OF COLUMBIA UNIVERSITY C/O BENEFITS DEPARTMENT	D Employer Identification Number (EIN) 13-5598093
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500

Part I Basic Information			
1 Enter the valuation date: Month 07 Day 01 Year 2023			
2 Assets:			
a Market value.....	2a	166,222,860	
b Actuarial value	2b	182,373,854	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	516	73,055,870	73,055,870
b For terminated vested participants.....	199	12,563,551	12,563,551
c For active participants.....	945	69,106,146	72,512,691
d Total	1,660	154,725,567	158,132,112
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>			
a Funding target disregarding prescribed at-risk assumptions.....	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate.....	5	5.35%	
6 Target normal cost			
a Present value of current plan year accruals.....	6a	6,259,905	
b Expected plan-related expenses	6b	235,600	
c Target normal cost.....	6c	6,495,505	

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

<div>SIGN HERE</div>	<div>Amy Elizabeth Ayres</div> <div>Signature of actuary</div> <div>Amy Elizabeth Ayres, F.S.A., E.A.</div> <div>Type or print name of actuary</div> <div>Willis Towers Watson US LLC</div> <div>Firm name</div> <div>200 Liberty Street</div> <div>New York NY 10281</div> <div>Address of the firm</div>	<div>1/29/25</div> <div>Date</div> <div>2306594</div> <div>Most recent enrollment number</div> <div>212-309-3662</div> <div>Telephone number (including area code)</div>
----------------------	--	--

Part II		Beginning of Year Carryover and Prefunding Balances	
		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	45,188,084
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	5,633,080
9	Amount remaining (line 7 minus line 8)	0	39,555,004
10	Interest on line 9 using prior year's actual return of <u>3.63</u> %	0	1,435,847
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		3,358,564
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.52</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		121,916
	c Total available at beginning of current plan year to add to prefunding balance		3,480,480
	d Portion of (c) to be added to prefunding balance		3,480,480
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	44,471,331

Part III		Funding Percentages	
14	Funding target attainment percentage	14	87.20 %
15	Adjusted funding target attainment percentage	15	115.33 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	93.06 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV		Contributions and Liquidity Shortfalls			
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
12/20/2024	5,177,835				
Totals ►			18(b)	5,177,835	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contributions from prior years	19a 0
b Contributions made to avoid restrictions adjusted to valuation date.	19b 0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.	19c 4,796,098
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
c If line 20a is "Yes," see instructions and complete the following table as applicable:	

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 5.00 %	3rd segment: 5.74 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 65
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute			

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
26 Demographic and benefit information	
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years.....	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c).....	31a	6,495,505	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:			
a Net shortfall amortization installment	Outstanding Balance	Installment	
	20,229,589	1,900,970	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....	34	8,396,475	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	0	6,958,436	6,958,436
36 Additional cash requirement (line 34 minus line 35)	36	1,438,039	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	4,796,098	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	3,358,059	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	3,358,059	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years.....	40	0	

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input checked="" type="checkbox"/> 2021
--

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Columbia University
EIN/PN	13-5598093/005
Plan Name	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
Valuation Date	July 1, 2023
Enrolled Actuary	Amy Elizabeth Ayres, F.S.A., E.A.
Enrollment Number	23-06594

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22 Description of Weighted Average Retirement Age as of July 1, 2023

The weighted average retirement age of 65 is calculated assuming a sample population of 1,000 lives currently age 55. It is weighted based on the expected number of retirements at each age. The steps of the calculation are summarized below:

(1) Age	(2) Exposure	(3) Retirement Rate Decrement	(4) Number Retired at Age (2) * (3)	(5) (1) * (4)
55	1,000	5.00%	50	2,750
56	950	5.00%	48	2,688
57	902	5.00%	45	2,565
58	857	5.00%	43	2,494
59	814	3.00%	24	1,416
60	790	3.00%	24	1,440
61	766	3.00%	23	1,403
62	743	10.00%	74	4,588
63	669	10.00%	67	4,221
64	602	6.00%	36	2,304
65	566	15.00%	85	5,525
66	481	20.00%	96	6,336
67	385	20.00%	77	5,159
68	308	20.00%	62	4,216
69	246	20.00%	49	3,381
70	197	25.00%	49	3,430
71	148	20.00%	30	2,130
72	118	20.00%	24	1,728
73	94	20.00%	19	1,387
74	75	20.00%	15	1,110
75	60	30.00%	18	1,350
76	42	30.00%	13	988
77	29	30.00%	9	693
78	20	30.00%	6	468
79	14	30.00%	4	316
80	10	100.00%	10	<u>800</u>
				64,886

Weighted Average Age at Retirement: 65
64,886/1,000

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

Applicable month March 2023

Interest rate basis Segment rates

Interest rates:	Reflecting Stabilization	Not Reflecting Stabilization
-----------------	-----------------------------	---------------------------------

First segment rate	4.75%	2.50%
--------------------	-------	-------

Second segment rate	5.00%	3.83%
---------------------	-------	-------

Third segment rate	5.74%	4.06%
--------------------	-------	-------

Effective interest rate	5.35%	3.92%
-------------------------	-------	-------

Annual rates of increase:

Compensation	3.00%
--------------	-------

Future Social Security wage bases	N/A
-----------------------------------	-----

Statutory limits on compensation	N/A
----------------------------------	-----

Plan Name:	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN:	13-5598093/005
Plan Sponsor:	Columbia University
Valuation Date:	July 1, 2023

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Inclusion date	The valuation date coincident with or next following the date on which the employee is hired
New or rehired employees	It was assumed there will be no new or rehired employees.
Mortality	
Healthy	Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2020 and annuitants (based on RP-2014 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2020).
Disabled	Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2020 and annuitants (based on RP-2014 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2020).
Termination	Rates varying by age and service

Representative Termination Rates

Percentage leaving during the year					
Age	Year 1	Year 2	Year 3	Year 4	Year 5+
20	30.0%	40.0%	40.0%	35.0%	30.0%
25	30.0%	35.0%	35.0%	35.0%	30.0%
30	20.0%	20.0%	20.0%	20.0%	15.0%
35	15.0%	15.0%	15.0%	15.0%	10.0%
40	10.0%	10.0%	10.0%	5.0%	5.0%
45	10.0%	10.0%	5.0%	5.0%	4.0%
50+	10.0%	5.0%	5.0%	4.0%	4.0%

Plan Name:	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN:	13-5598093/005
Plan Sponsor:	Columbia University
Valuation Date:	July 1, 2023

SCHEDULE SB ATTACHMENTS

Disability

Representative Disability Rates

The rates at which participants become disabled by age are shown below:

Percentage becoming disabled during the year	
Age	Rate
25	0.03%
30	0.03%
35	0.03%
40	0.04%
45	0.08%
50	0.21%
55	0.45%
60	1.01%
65	0.00%

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Retirement

Rates varying by age, average age 65

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants retire by age are shown below.

Percentage retiring during the year	
-------------------------------------	--

Age	Rate
55	5.0%
56	5.0%
57	5.0%
58	5.0%
59	3.0%
60	3.0%
61	3.0%
62	10.0%
63	10.0%
64	6.0%
65	15.0%
66	20.0%
67	20.0%
68	20.0%
69	20.0%
70	25.0%
71	20.0%
72	20.0%
73	20.0%
74	20.0%
75	30.0%
76	30.0%
77	30.0%
78	30.0%
79	30.0%
80	100.0%

Plan Name:	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN:	13-5598093/005
Plan Sponsor:	Columbia University
Valuation Date:	July 1, 2023

SCHEDULE SB ATTACHMENTS

Benefit commencement date:

Preretirement death benefit The later of the death of the active participant or the date the participant would have attained age 55

Deferred vested benefit The later of age 65 or termination of employment

Disability benefit Upon disablement

Retirement benefit Upon termination of employment

Form of payment

65% of assumed married participants are assumed to elect a joint and survivor annuity with the spouse as the contingent annuitant and 50% continuation and 35% are assumed to elect a lump sum (if eligible). 65% of assumed single participants are assumed to elect a life annuity and 35% are assumed to elect a lump sum (if eligible).

Percent married

70% of males; 50% of females. Used to value pre-retirement surviving spouse benefits and in determining the optional forms expected to be elected at commencement.

Spouse age

Wife three years younger than husband

Covered pay

Base rate of pay on the valuation date

Administrative expenses

\$235,600

Methods

Valuation date

First day of plan year

Funding target

Present value of accrued benefits

Target normal cost

Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Actuarial value of assets

Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2022 plan year).

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Columbia University and, based on that review, is not aware of any significant benefits required to be valued that were not.

Assumptions Rationale - Significant Economic Assumptions

Discount rate

The basis chosen was selected by the plan sponsor from among the choices prescribed by law, all of which are based on observed market data over certain periods of time.

Rates of increase in:

Compensation

Assumed compensation increases are based on plan sponsor expectations and collective bargaining agreements for near-term years and the effect that the assumed long-term CPI and NAW will have on compensation increases over the longer term.

The resulting salary increase assumption is select and ultimate.

We believe that the assumption chosen does not significantly conflict with what would be reasonable based on current and expected future CPI and NAW growth, taking into account historical variability, historical salary increase experience and historical and expected future changes in the level of expenses

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality

Assumptions used for funding purposes are as prescribed by IRC §430(h).

We believe the assumptions do not significantly conflict with what would be reasonable because they reflect recent experience, and are adjusted to reflect the plan sponsor's expectations regarding future mortality improvement.

Disabled Mortality

Assumptions used for funding purposes are as prescribed by IRC §430(h).

For the reasons described above, we believe the assumptions do not significantly conflict with what would be reasonable.

Termination

Termination rates were based on an experience study conducted in 2021, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.

Disability

Disability rates were based on an experience study conducted in 2021, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.

Retirement

Retirement rates were based on an experience study conducted in 2021, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Benefit commencement date for deferred benefits:

Preretirement death benefit Surviving spouses are assumed to begin benefits at the earliest permitted commencement date because ERISA requires benefits to start then unless the spouse elects to defer. If the spouse elects to defer, actuarial increases from the earliest commencement date must be given, so that a later commencement date is expected to be of approximately equal value, and experience indicates that most spouses do take the benefit as soon as it is available.

For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.

Deferred vested benefit Deferred vested participants' assumed commencement age is a single age intended to capture the average age at commencement. Deferred vested early commencement factors are not subsidized so that the difference between this approach and using assumed commencement rates at multiple ages is not expected to be significant.

For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.

Form of payment

The percentage of retiring participants assumed to take lump sums is based on observed experience over the period 2016-2020.

The percentage of retiring participants assumed to take joint and survivor annuities, and the assumed survivor percentages, are based on observed experience over the period 2016-2020.

For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.

Marital Assumptions:

Percent married The assumed percentage married is based on a blending of the marital status of recent retirees and of the current active population.

For the reasons discussed above, we believe the assumptions selected do not significantly conflict with what would be reasonable.

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Prescribed Methods

Funding methods

The methods used for funding purposes as described in Statement of Actuarial Assumptions and Methods including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

Change in assumptions and methods

Change in assumptions since prior valuation

The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.

The mortality table used to calculate the funding target and target normal cost was updated to reflect the latest mortality improvement scale, as required by guidance issued by IRS under IRC §430. The mortality table was updated to include one additional year of projected mortality improvement as required by guidance issued by IRS under IRC §430

The administrative expense was updated to \$235,600 for contribution purposes.

Change in methods since prior valuation

None.

Sources of Data and Other Information

Columbia University furnished participant data as of June 30, 2023. Columbia University also supplied information on assets, contributions and plan provisions. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available. We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24 Change in Actuarial Assumptions

The administrative expense was updated to \$235,600 for contribution purposes.

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of
America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

The most recent amendment reflected in the following plan provisions was adopted March 6, 2020 and effective April 1, 2020.

Plan status	Open with continued accruals
Covered Employees	Any employee whose terms of employment are the subject of collective bargaining between Columbia University and Local 241 of the Transport Workers Union of America, AFL-CIO.
Participation Date	The first day a covered employee is regularly scheduled to work 12 months per year and at least 20 hours per week.

Definitions

Vesting service	One year for each 1,000-hour calendar year of employment by Columbia University
Pension service	Years and months of service as a covered employee
Pensionable pay	Aggregate compensation, excluding overtime
Average earnings	The average of the highest five consecutive calendar years of pensionable pay during the five-year period ending on the earlier of the participant's termination date or retirement date
Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65 with five years of pension service. In the case of an employee who was hired prior to July 1, 1988, first of month coinciding with or next following the attainment of age 65.
Monthly pension benefit	One-twelfth of 2.00% of pensionable pay for each year of pension service up to ten years, plus one-twelfth of 2.20% of pensionable pay for each year of pension service in excess of ten years up to 30 years, plus one-twelfth of 2.30% of pensionable pay for each year

Plan Name:	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN:	13-5598093/005
Plan Sponsor:	Columbia University
Valuation Date:	July 1, 2023

SCHEDULE SB ATTACHMENTS

of pension service in excess of 30 years, not less than one-twelfth of 1.20% of average earnings times years of pension service.

Monthly preretirement death benefit

50% of the monthly pension benefit as of the date of death, reduced for the 50% joint and survivor election and reduced for payment as early as the participant's 55th birthday

Eligibility for Benefits

Normal retirement

Retirement on NRD

Early retirement

Retirement before NRD and on or after both attaining age 55 and completing five years of vesting service

Postponed retirement

Retirement after NRD

Vested termination

Termination for reasons other than death or retirement after completing five years of vesting service

Disability

Permanent and total disability prior to NRD and on or after completing five years of vesting service

Preretirement death benefit

Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse

Benefits Paid Upon the Following Events

Normal retirement

Monthly pension benefit determined as of NRD

Early retirement

Monthly pension benefit determined as of early retirement date, reduced 5.0% for each year of payment before the participant's NRD. There is no reduction for retirement on or after attaining age 62 and completing 20 years of pension service.

Postponed retirement

Monthly pension benefit determined as of actual retirement date

Vested termination

Monthly pension benefit determined as of termination date, reduced 5.0% for each year that payment precedes the participant's NRD

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Disablement Monthly pension benefit determined as of the date of disablement, payable immediately without reduction for early commencement

Preretirement death Monthly preretirement death benefit is reduced by 5.0% for each year that payment precedes the participant's NRD; the benefit is unreduced if the participant died at age 62 or later with at least 20 years of pension service.

Other Plan Provisions

Forms of payment Preretirement death benefits are payable only as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are a 100% joint and survivor annuity, a 75% joint and survivor annuity, an elective lump sum under \$100,000, or (for married participants) a life annuity. Actuarial equivalence is based on:

- For lump sums paid during the plan year:
Prescribed 417(e) mortality table and the interest rate from March prior to the start of the plan year equal to the adjusted first, second and third segment rates as computed under Section 430(h)(2) of the Code, but determined without regard to yield curve rates for the preceding 23 months blended with the applicable rate of 417(e)(3)(A)(ii)(II) of the Code.
- For optional payment form conversion:
1965 Group Annuity mortality table, using female rates for all participants and male rates for all beneficiaries and a 6.00% interest rate

Pension Increases None

Plan participants' contributions None

Maximum on benefits and pay All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum contributions. WTW is not aware of any future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Year

There have been no changes in benefits valued since the prior year other than increases in statutory pay and benefit limits.

Plan Name:	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN:	13-5598093/005
Plan Sponsor:	Columbia University
Valuation Date:	July 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a Schedule of Active Participant Data as of July 1, 2023

Attained Age	Attained Years of Credited Service ¹										Total
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	10	3	0	0	0	0	0	0	0	0	13
25-29	20	22	4	0	0	0	0	0	0	0	46
30-34	21	34	38	3	0	0	0	0	0	0	96
35-39	10	38	48	8	5	1	0	0	0	0	110
40-44	10	33	41	11	20	8	1	0	0	0	124
45-49	20	33	39	15	11	18	6	0	0	0	142
50-54	5	16	38	17	16	23	10	7	2	0	134
55-59	6	11	28	10	18	22	19	11	11	0	136
60-64	3	9	12	10	9	17	16	10	12	3	101
65-69	0	1	5	1	7	5	6	4	6	1	36
70 & over	0	0	0	2	0	1	0	1	2	1	7
Total	105	200	253	77	86	95	58	33	33	5	945

¹ Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
 EIN / PN: 13-5598093/005
 Plan Sponsor: Columbia University
 Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26b Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2023	259,271	304,233	6,610,290	7,173,794
2024	774,967	347,602	6,477,483	7,600,052
2025	1,298,609	357,075	6,336,479	7,992,163
2026	1,820,067	372,825	6,187,214	8,380,106
2027	2,323,889	431,013	6,036,068	8,790,970
2028	2,819,263	504,530	5,876,666	9,200,459
2029	3,292,624	549,667	5,702,783	9,545,074
2030	3,734,634	629,556	5,521,138	9,885,328
2031	4,147,678	705,936	5,332,112	10,185,726
2032	4,530,635	753,543	5,136,172	10,420,350
2033	4,876,639	817,167	4,933,883	10,627,689
2034	5,185,772	852,105	4,725,941	10,763,818
2035	5,483,073	876,221	4,513,169	10,872,463
2036	5,751,698	903,018	4,296,445	10,951,161
2037	5,986,859	913,622	4,076,628	10,977,109
2038	6,196,111	933,020	3,854,521	10,983,652
2039	6,375,603	963,808	3,630,867	10,970,278
2040	6,520,004	970,916	3,406,380	10,897,300
2041	6,621,044	985,624	3,181,800	10,788,468
2042	6,703,785	1,035,637	2,957,956	10,697,378
2043	6,772,353	1,082,058	2,735,796	10,590,207
2044	6,809,223	1,092,686	2,516,414	10,418,323
2045	6,808,413	1,103,627	2,301,079	10,213,119
2046	6,755,839	1,125,919	2,091,205	9,972,963
2047	6,688,835	1,125,115	1,888,292	9,702,242
2048	6,596,082	1,101,358	1,693,861	9,391,301
2049	6,476,895	1,078,274	1,509,360	9,064,529
2050	6,348,623	1,059,199	1,336,061	8,743,883
2051	6,181,991	1,057,041	1,174,982	8,414,014
2052	5,988,851	1,045,775	1,026,851	8,061,477
2053	5,797,456	1,005,385	892,079	7,694,920
2054	5,596,317	959,954	770,737	7,327,008
2055	5,347,998	914,362	662,621	6,924,981
2056	5,068,253	868,927	567,284	6,504,464
2057	4,776,986	819,975	484,048	6,081,009
2058	4,485,645	771,784	412,051	5,669,480
2059	4,194,337	724,585	350,304	5,269,226
2060	3,902,088	678,575	297,743	4,878,406
2061	3,612,588	636,732	253,289	4,502,609
2062	3,332,213	596,259	215,896	4,144,368
2063	3,062,493	554,383	184,570	3,801,446
2064	2,805,136	513,965	158,389	3,477,490
2065	2,561,674	474,993	136,526	3,173,193
2066	2,332,363	437,464	118,247	2,888,074
2067	2,117,003	401,367	102,907	2,621,277
2068	1,915,422	366,713	89,950	2,372,085
2069	1,727,309	333,535	78,915	2,139,759
2070	1,552,163	301,876	69,428	1,923,467
2071	1,389,506	271,787	61,191	1,722,484
2072	1,238,821	243,324	53,969	1,536,114

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
 EIN / PN: 13-5598093/005
 Plan Sponsor: Columbia University
 Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32
Schedule of Amortization Bases
as of July 1, 2023

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
Shortfall	07/01/2023	10,643,533	15.00000	10,643,533	974,742
Shortfall	07/01/2022	8,800,144	14.00000	8,469,230	813,234
Shortfall	07/01/2021	1,211,841	13.00000	1,116,826	112,994
Total				20,229,589	1,900,970

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Columbia University
EIN/PN	13-5598093/005
Plan Name	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
Valuation Date	July 1, 2023
Enrolled Actuary	Amy Elizabeth Ayres, F.S.A., E.A.
Enrollment Number	23-06594

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22 Description of Weighted Average Retirement Age as of July 1, 2023

The weighted average retirement age of 65 is calculated assuming a sample population of 1,000 lives currently age 55. It is weighted based on the expected number of retirements at each age. The steps of the calculation are summarized below:

(1) Age	(2) Exposure	(3) Retirement Rate Decrement	(4) Number Retired at Age (2) * (3)	(5) (1) * (4)
55	1,000	5.00%	50	2,750
56	950	5.00%	48	2,688
57	902	5.00%	45	2,565
58	857	5.00%	43	2,494
59	814	3.00%	24	1,416
60	790	3.00%	24	1,440
61	766	3.00%	23	1,403
62	743	10.00%	74	4,588
63	669	10.00%	67	4,221
64	602	6.00%	36	2,304
65	566	15.00%	85	5,525
66	481	20.00%	96	6,336
67	385	20.00%	77	5,159
68	308	20.00%	62	4,216
69	246	20.00%	49	3,381
70	197	25.00%	49	3,430
71	148	20.00%	30	2,130
72	118	20.00%	24	1,728
73	94	20.00%	19	1,387
74	75	20.00%	15	1,110
75	60	30.00%	18	1,350
76	42	30.00%	13	988
77	29	30.00%	9	693
78	20	30.00%	6	468
79	14	30.00%	4	316
80	10	100.00%	10	<u>800</u>
				64,886

Weighted Average Age at Retirement: 65
64,886/1,000

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26b Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2023	259,271	304,233	6,610,290	7,173,794
2024	774,967	347,602	6,477,483	7,600,052
2025	1,298,609	357,075	6,336,479	7,992,163
2026	1,820,067	372,825	6,187,214	8,380,106
2027	2,323,889	431,013	6,036,068	8,790,970
2028	2,819,263	504,530	5,876,666	9,200,459
2029	3,292,624	549,667	5,702,783	9,545,074
2030	3,734,634	629,556	5,521,138	9,885,328
2031	4,147,678	705,936	5,332,112	10,185,726
2032	4,530,635	753,543	5,136,172	10,420,350
2033	4,876,639	817,167	4,933,883	10,627,689
2034	5,185,772	852,105	4,725,941	10,763,818
2035	5,483,073	876,221	4,513,169	10,872,463
2036	5,751,698	903,018	4,296,445	10,951,161
2037	5,986,859	913,622	4,076,628	10,977,109
2038	6,196,111	933,020	3,854,521	10,983,652
2039	6,375,603	963,808	3,630,867	10,970,278
2040	6,520,004	970,916	3,406,380	10,897,300
2041	6,621,044	985,624	3,181,800	10,788,468
2042	6,703,785	1,035,637	2,957,956	10,697,378
2043	6,772,353	1,082,058	2,735,796	10,590,207
2044	6,809,223	1,092,686	2,516,414	10,418,323
2045	6,808,413	1,103,627	2,301,079	10,213,119
2046	6,755,839	1,125,919	2,091,205	9,972,963
2047	6,688,835	1,125,115	1,888,292	9,702,242
2048	6,596,082	1,101,358	1,693,861	9,391,301
2049	6,476,895	1,078,274	1,509,360	9,064,529
2050	6,348,623	1,059,199	1,336,061	8,743,883
2051	6,181,991	1,057,041	1,174,982	8,414,014
2052	5,988,851	1,045,775	1,026,851	8,061,477
2053	5,797,456	1,005,385	892,079	7,694,920
2054	5,596,317	959,954	770,737	7,327,008
2055	5,347,998	914,362	662,621	6,924,981
2056	5,068,253	868,927	567,284	6,504,464
2057	4,776,986	819,975	484,048	6,081,009
2058	4,485,645	771,784	412,051	5,669,480
2059	4,194,337	724,585	350,304	5,269,226
2060	3,902,088	678,575	297,743	4,878,406
2061	3,612,588	636,732	253,289	4,502,609
2062	3,332,213	596,259	215,896	4,144,368
2063	3,062,493	554,383	184,570	3,801,446
2064	2,805,136	513,965	158,389	3,477,490
2065	2,561,674	474,993	136,526	3,173,193
2066	2,332,363	437,464	118,247	2,888,074
2067	2,117,003	401,367	102,907	2,621,277
2068	1,915,422	366,713	89,950	2,372,085
2069	1,727,309	333,535	78,915	2,139,759
2070	1,552,163	301,876	69,428	1,923,467
2071	1,389,506	271,787	61,191	1,722,484
2072	1,238,821	243,324	53,969	1,536,114

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
 EIN / PN: 13-5598093/005
 Plan Sponsor: Columbia University
 Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

The most recent amendment reflected in the following plan provisions was adopted March 6, 2020 and effective April 1, 2020.

Plan status	Open with continued accruals
Covered Employees	Any employee whose terms of employment are the subject of collective bargaining between Columbia University and Local 241 of the Transport Workers Union of America, AFL-CIO.
Participation Date	The first day a covered employee is regularly scheduled to work 12 months per year and at least 20 hours per week.

Definitions

Vesting service	One year for each 1,000-hour calendar year of employment by Columbia University
Pension service	Years and months of service as a covered employee
Pensionable pay	Aggregate compensation, excluding overtime
Average earnings	The average of the highest five consecutive calendar years of pensionable pay during the five-year period ending on the earlier of the participant's termination date or retirement date
Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65 with five years of pension service. In the case of an employee who was hired prior to July 1, 1988, first of month coinciding with or next following the attainment of age 65.
Monthly pension benefit	One-twelfth of 2.00% of pensionable pay for each year of pension service up to ten years, plus one-twelfth of 2.20% of pensionable pay for each year of pension service in excess of ten years up to 30 years, plus one-twelfth of 2.30% of pensionable pay for each year

Plan Name:	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN:	13-5598093/005
Plan Sponsor:	Columbia University
Valuation Date:	July 1, 2023

SCHEDULE SB ATTACHMENTS

of pension service in excess of 30 years, not less than one-twelfth of 1.20% of average earnings times years of pension service.

Monthly preretirement death benefit

50% of the monthly pension benefit as of the date of death, reduced for the 50% joint and survivor election and reduced for payment as early as the participant's 55th birthday

Eligibility for Benefits

Normal retirement

Retirement on NRD

Early retirement

Retirement before NRD and on or after both attaining age 55 and completing five years of vesting service

Postponed retirement

Retirement after NRD

Vested termination

Termination for reasons other than death or retirement after completing five years of vesting service

Disability

Permanent and total disability prior to NRD and on or after completing five years of vesting service

Preretirement death benefit

Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse

Benefits Paid Upon the Following Events

Normal retirement

Monthly pension benefit determined as of NRD

Early retirement

Monthly pension benefit determined as of early retirement date, reduced 5.0% for each year of payment before the participant's NRD. There is no reduction for retirement on or after attaining age 62 and completing 20 years of pension service.

Postponed retirement

Monthly pension benefit determined as of actual retirement date

Vested termination

Monthly pension benefit determined as of termination date, reduced 5.0% for each year that payment precedes the participant's NRD

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Disablement Monthly pension benefit determined as of the date of disablement, payable immediately without reduction for early commencement

Preretirement death Monthly preretirement death benefit is reduced by 5.0% for each year that payment precedes the participant's NRD; the benefit is unreduced if the participant died at age 62 or later with at least 20 years of pension service.

Other Plan Provisions

Forms of payment Preretirement death benefits are payable only as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are a 100% joint and survivor annuity, a 75% joint and survivor annuity, an elective lump sum under \$100,000, or (for married participants) a life annuity. Actuarial equivalence is based on:

- For lump sums paid during the plan year:
Prescribed 417(e) mortality table and the interest rate from March prior to the start of the plan year equal to the adjusted first, second and third segment rates as computed under Section 430(h)(2) of the Code, but determined without regard to yield curve rates for the preceding 23 months blended with the applicable rate of 417(e)(3)(A)(ii)(II) of the Code.
- For optional payment form conversion:
1965 Group Annuity mortality table, using female rates for all participants and male rates for all beneficiaries and a 6.00% interest rate

Pension Increases None

Plan participants' contributions None

Maximum on benefits and pay All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum contributions. WTW is not aware of any future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Year

There have been no changes in benefits valued since the prior year other than increases in statutory pay and benefit limits.

Plan Name:	Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN:	13-5598093/005
Plan Sponsor:	Columbia University
Valuation Date:	July 1, 2023

Plan Name	Columbia University Retirement Plan – Local 241, Transport Workers Union of America
Plan Sponsor EIN	13-5598093
ERISA Plan #	005
Plan Year Ending	6/30/2024

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

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

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32
Schedule of Amortization Bases
as of July 1, 2023

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
Shortfall	07/01/2023	10,643,533	15.00000	10,643,533	974,742
Shortfall	07/01/2022	8,800,144	14.00000	8,469,230	813,234
Shortfall	07/01/2021	1,211,841	13.00000	1,116,826	112,994
Total				20,229,589	1,900,970

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24 Change in Actuarial Assumptions

The administrative expense was updated to \$235,600 for contribution purposes.

Plan Name: Columbia University Retirement Plan - Local 241 Transport Workers Union of
America
EIN / PN: 13-5598093/005
Plan Sponsor: Columbia University
Valuation Date: July 1, 2023