

SUMMARY ANNUAL REPORT FOR XAVIER UNIVERSITY MEDICAL

This is a summary of the annual report of the Xavier University Medical (Employer Identification Number 31-0537516, Plan Number 504) for the plan year 01/01/2022 through 12/31/2022. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Xavier University has committed itself to pay certain Medical claims incurred under the terms of the plan.

Insurance Information

The plan has insurance contracts with Humana Insurance Company to pay certain Health, Vision claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2022 were \$381,139.

Your Rights to Additional Information

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the plan administrator, at 3800 Victory Parkway, Cincinnati, OH 45207-4641 and phone number, 513-745-3638.

You also have the legally protected right to examine the annual report at the main office of the plan: 3800 Victory Parkway, Cincinnati, OH 45207-4641, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email DOL_PRA_PUBLIC@dol.gov and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 07/31/2023)

Additional Explanation

To the extent the plan sponsor has committed itself to pay certain claims incurred under the terms of the plan, as stated above, ("self-insured benefits") such self-insured benefits are considered unfunded for purposes of ERISA. The plan sponsor pays self-insured benefits out of its general assets. See the funding policy of the Plan for additional details.

SUMMARY ANNUAL REPORT FOR XAVIER UNIVERSITY DENTAL

This is a summary of the annual report of the Xavier University Dental (Employer Identification Number 31-0537516, Plan Number 507) for the plan year 01/01/2022 through 12/31/2022. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information

The plan has an insurance contract with Superior Dental Care, Inc. to pay certain Dental claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2022 were \$403,180.

Because it is a so called "experience-rated" contract, the premium costs are affected by, among other things, the number and size of claims. Of the total insurance premiums paid for the plan year ending 12/31/2022, the premiums paid under such "experience-rated" contract were \$403,180 and the total of all benefit claims paid under the experience-rated contract during the plan year was \$449,351.

Your Rights to Additional Information

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the plan administrator, at 3800 Victory Parkway, Cincinnati, OH 45207-4641 and phone number, 513-745-3638.

You also have the legally protected right to examine the annual report at the main office of the plan: 3800 Victory Parkway, Cincinnati, OH 45207-4641, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email DOL_PRA_PUBLIC@dol.gov and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 07/31/2023)

Additional Explanation

To the extent the plan sponsor has committed itself to pay certain claims incurred under the terms of the plan, as stated above, ("self-insured benefits") such self-insured benefits are considered unfunded for purposes of ERISA. The plan sponsor pays self-insured benefits out of its general assets. See the funding policy of the Plan for additional details.

SUMMARY ANNUAL REPORT FOR XAVIER UNIVERSITY GROUP DISABILITY

This is a summary of the annual report of the Xavier University Group Disability (Employer Identification Number 31-0537516, Plan Number 501) for the plan year 01/01/2022 through 12/31/2022. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information

The plan has an insurance contract with Life Insurance Company Of North America to pay certain Long-term disability claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2022 were \$118,451.

Your Rights to Additional Information

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the plan administrator, at 3800 Victory Parkway, Cincinnati, OH 45207-4641 and phone number, 513-745-3638.

You also have the legally protected right to examine the annual report at the main office of the plan: 3800 Victory Parkway, Cincinnati, OH 45207-4641, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email DOL_PRA_PUBLIC@dol.gov and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 07/31/2023)

Additional Explanation

To the extent the plan sponsor has committed itself to pay certain claims incurred under the terms of the plan, as stated above, ("self-insured benefits") such self-insured benefits are considered unfunded for purposes of ERISA. The plan sponsor pays self-insured benefits out of its general assets. See the funding policy of the Plan for additional details.

SUMMARY ANNUAL REPORT FOR XAVIER UNIVERSITY GROUP LIFE

This is a summary of the annual report of the Xavier University Group Life (Employer Identification Number 31-0537516, Plan Number 503) for the plan year 01/01/2022 through 12/31/2022. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information

The plan has insurance contracts with Life Insurance Company Of North America to pay certain ACCIDENTAL INJURY, VOLUNTARY CRITICAL ILLNESS, Life insurance, SUPP. LIFE, DEPENDENT LIFE, Voluntary Accidental Death & Dismemberment, Accidental Death & Dismemberment claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2022 were \$469,439.

Your Rights to Additional Information

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the plan administrator, at 3800 Victory Parkway, Cincinnati, OH 45207-4641 and phone number, 513-745-3638.

You also have the legally protected right to examine the annual report at the main office of the plan: 3800 Victory Parkway, Cincinnati, OH 45207-4641, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email DOL_PRA_PUBLIC@dol.gov and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 07/31/2023)

Additional Explanation

To the extent the plan sponsor has committed itself to pay certain claims incurred under the terms of the plan, as stated above, ("self-insured benefits") such self-insured benefits are considered unfunded for purposes of ERISA. The plan sponsor pays self-insured benefits out of its general assets. See the funding policy of the Plan for additional details.