

SUMMARY ANNUAL REPORT FOR BREAKTHROUGH CHARTER SCHOOLS HEALTH AND WELFARE PLAN

This is a summary of the annual report of the BREAKTHROUGH CHARTER SCHOOLS HEALTH AND WELFARE PLAN, a health, life insurance, dental, vision, temporary disability, long-term disability and death benefits plan (Employer Identification Number 27-0362848, Plan Number 501), for the plan year 01/01/2024 through 12/31/2024. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

BREAKTHROUGH CHARTER SCHOOLS has committed itself to pay certain Health claims incurred under the terms of the plan.

Insurance Information

The plan has insurance contracts with The Lincoln National Life Insurance Company, Unum Insurance Company, THE LINCOLN NATIONAL LIFE INSURANCE COMPANY and Recuro Health, Inc. to pay certain Dental, ACCIDENT, Life insurance, ACCIDENTAL DEATH AND DISMEMBERMENT, Long-term disability, Temporary disability, Vision, Accidental Death & Dismemberment, Virtual Primary Care Complete claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2024 were \$513,018.

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 3615 SUPERIOR AVENUE BUILDING 44, SUITE 4403A, CLEVELAND, OH 44114 and phone number, 216-456-2086. The charge to cover copying costs will be \$5.00 for the full annual report, or \$0.25 per page for any part thereof.

You also have the legally protected right to examine the annual report at the main office of the plan: 3615 SUPERIOR AVENUE BUILDING 44, SUITE 4403A, CLEVELAND, OH 44114, 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. The annual report is also available online at the Department of Labor website www.efast.dol.gov.

Additional Explanation

Health benefits are self-insured and not subject to SAR reporting requirements.
Contact your plan administrator for details.