

SUMMARY ANNUAL REPORT FOR  
Local No. 1 Health Fund

This is a summary of the annual report for Local No. 1 Health Fund, EIN 36-2525603, Plan 501 for the year ended June 30, 2023. The annual report has been filed with the Employee Benefit Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information

The plan has a contracts with Eye Med Vision Care and Union Health Service, Inc. to pay vision and medical claims incurred under the terms of the plan. The total premiums paid for the policy years ending December 31, 2022 and June 30, 2023 were \$472,555 and \$13,903,474, respectively.

Basic Financial Statement

The value of plan assets, after subtracting liabilities of the plan was \$96,482,867 as of June 30, 2023 compared to \$92,237,615 as of July 1, 2022. During the plan year, the plan experienced an increase in its net assets of \$4,245,252. This increase included unrealized appreciation or depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year or the cost of assets acquired during the year. During the plan year, the plan had total income of \$87,044,498 including (but not limited to) employer contributions of \$77,604,254, participant contributions of \$4,004,400, realized loss of \$64,409 from the sale of assets, earnings from investments of \$5,450,649 and other income of \$49,604.

Plan expenses were \$82,799,246. These expenses included \$2,276,327 in administrative expenses and \$80,522,919 in benefits paid to participants and beneficiaries.

Your Rights to Additional Information

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

- an accountant's report;
- financial information and information on payments to service providers;
- assets held for investment;
- insurance information including sales commissions paid by insurance carriers; and
- transactions in excess of 5 percent of the plan assets.

To obtain a copy of the full annual report, or any part thereof, write or call the office of LOCAL 1 HEALTH FUND in care of Dave Bratek who is Plan Administrator at 1431 OPUS PLACE SUITE 350, DOWNERS GROVE, IL 60515, or by telephone at (630) 288-6868.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover copying costs given above does not include a charge for the copying of these portions of the report because these portions are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the plan (LOCAL 1 HEALTH FUND, 1431 OPUS PLACE SUITE 350, DOWNERS GROVE, IL 60515) 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](mailto:DOL_PRA_PUBLIC@dol.gov) and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 03/31/2026)

