

**SUMMARY ANNUAL REPORT FOR
KANSAS INDEPENDENT COLLEGE FOUNDATION POOLED EMPLOYEE HEALTH PLAN**

This is a summary of the annual report of the Kansas Independent College Foundation Pooled Employee Health Plan (Employer Identification Number 48-0636041, Plan Number 501) for the plan year 01/01/2023 through 12/31/2023. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Kansas Independent College Foundation has committed itself to pay certain Medical claims incurred under the terms of the plan.

Insurance Information

The plan has an insurance contract with Blue Cross Blue Shield Of Kansas to pay certain Dental claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2023 were \$402,867.

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 12/31/2023, the premiums paid under such "experience-rated" contract were \$402,867 and the total of all benefit claims paid under the experience-rated contract during the plan year was \$354,873.

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. An accountant's report.
2. Financial information and information on payments to service providers.
3. 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 700 S Kansas Ave Suite 622, Topeka, KS 66603 and phone number, 913-484-4706.

You also have the legally protected right to examine the annual report at the main office of the plan: 700 S Kansas Ave Suite 622, Topeka, KS 66603, 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

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.