

For UNITE HERE HEALTH

This is a summary of the annual report of UNITE HERE HEALTH, EIN 23-7385560, Plan No. 501, for the period of April 1, 2024 through March 31, 2025. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

The trustees of UNITE HERE HEALTH have committed to pay from the Trust Fund certain medical, dental, prescription drug, vision, death and disability benefit claims incurred under the terms of the plan.

Insurance Information

The plan had contracts with Dearborn National Life Insurance Company, Nevada Dental Benefits, Ltd., Alpha Dental Programs, Inc., UnitedHealthcare Insurance Company, Kaiser Foundation Health Plan, Inc., Kaiser Foundation Health Plan of Colorado, Kaiser Foundation Health Plan of Georgia, Kaiser Foundation Health Plan of the Mid-Atlantic, Liberty Dental Plan of California and Fidelity Security Life Insurance Company to pay certain health, dental, vision and life insurance claims incurred under the terms of the plan. The total premiums paid for the plan year ending March 31, 2025 were \$118,587,559.

Because the plan contract with Atlantic Southern Dental Foundation is an “experience-rated” contract, the premium costs are affected by, among other things, the number and size of claims. Of the total insurance premium paid for the plan year ending March 31, 2025, the premium paid under such “experience-rated” contracts were \$3,703,703 and the total of all benefit claims paid under these experience-rated contracts during the year was \$2,985,564.

Basic Financial Statement

The value of plan assets, after subtracting liabilities of the plan, was \$1,000,559,893 as of March 31, 2025, compared to \$890,708,294 as of April 1, 2024. During the plan year, the plan experienced an increase in its net assets of \$109,851,599. This increase includes unrealized appreciation and 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 \$1,518,858,772 including employer contributions of \$1,418,881,490, employee contributions of \$31,786,522, realized gain of \$870,632 from the sale of assets, earnings from investments of \$53,814,977, and other income of \$13,505,151.

Plan expenses were \$1,409,007,173. These expenses included \$117,872,216 in administrative expenses, and \$1,291,134,957 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, 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. assets held for investment;
4. transactions in excess of 5 percent of the plan assets;
5. insurance information, including sales commissions paid by insurance carriers;
6. information regarding any common or collective trusts, pooled separate accounts, master trusts or 103-12 investment entities in which the plan participates.

To obtain a copy of the full annual report, or any part thereof, write or call the office of UNITE HERE HEALTH, 2715 Jorie Boulevard, Suite 200, Oak Brook, IL 60523, (630) 236-5100. The charge to cover copying costs will be \$0.25 per page.

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, 2715 Jorie Boulevard, Suite 200, Oak Brook, IL 60523, 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.

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