SUMMARY ANNUAL REPORT
for the
Villanova University Health and Welfare Plan

This is a summary of the annual report of the Villanova University Health and Welfare Plan, Employer Identification Number 23-1352688, Plan Number 501, for the plan year June 1, 2016 through May 31, 2017. 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).

Uninsured Components

The plan sponsor, Villanova University, has committed itself to pay all medical claims (including flexible spending account expenses), all dental, short-term disability and employee assistance program claims and certain long-term disability claims incurred under the terms of the plan.

Insurance Information

The plan has contracts with Liberty Life Assurance Company of Boston to pay long-term disability claims, Life Insurance Company of North America to pay business travel accident claims and Metropolitan Life Insurance Company to pay life insurance and accidental death and dismemberment claims incurred under the terms of the plan. The total amount of premium paid for the plan year ending May 31, 2017 was $1,223,472.

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 insurance information, including sales commissions paid by insurance carriers, is included in that report.

To obtain a copy of the full annual report, or any part thereof, write or call the office of Villanova University, 800 Lancaster Avenue, Villanova, PA 19085-1603 (610) 519-7900. The charge to cover copying costs will be the actual reproduction cost but, in no event, more than 25 cents per page.

You also have the legally protected right to examine the annual report at the main office of the plan (Villanova University, 800 Lancaster Avenue, Villanova, PA 19085-1603), at the U.S. Department of Labor in Washington, D.C., or you may 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 N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.