



December 1, 2023

To: All Eligible Retiree Participants in the 2022 Life Insurance Plan and Health Plan(s)

Re: Summary Annual Report for 2022

By law, eligible participants must be provided a Summary Annual Report for any applicable Life Insurance Plan(s) and Health Plan(s) by the end of the following calendar year. Please note that the Summary Annual Reports included herein are reflective of calendar year 2022. This information is for your reference only. No action by you is required. If you have any questions, please refer to the contact information in the Summary Annual Report.

## **SUMMARY ANNUAL REPORT FOR SAVANNAH RIVER NUCLEAR SOLUTIONS PRE-65 RETIREE HEALTH PLAN**

This is a summary of the annual report of the Savannah River Nuclear Solutions Pre-65 Retiree Health Plan (Employer Identification Number 26-0240191, Plan Number 509) for the plan year 01/01/2022 through 12/31/2022. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Savannah River Nuclear Solutions, LLC has committed itself to pay certain health and dental claims incurred under the terms of the plan.

### **Basic Financial Statement**

The value of plan assets, after subtracting liabilities of the plan, was \$506,895 as of the end of plan year, compared to \$544,023 as of the beginning of the plan year. During the plan year the plan experienced a decrease in its net assets of \$37,128. This change 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 \$32,985,198 including employer contributions of \$26,383,810, and employee contributions of \$6,601,388. Plan expenses were \$33,022,326. These expenses included \$998,231 in administrative expenses, and \$32,024,095 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.

To obtain a copy of the full annual report, or any part thereof, write or call the plan administrator at SRNS Health & Welfare Plan Administrator, SRNS Benefits Administration Bldg. 730-1B, Aiken, SC 29808; phone number (803) 725-7772.

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. You also have the legally protected right to examine the annual report at the main office of the plan: Savannah River Nuclear Solutions, LLC, SRNS Benefits Administration Bldg. 730-1B, Aiken, SC 29808, 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)

## **SUMMARY ANNUAL REPORT FOR SAVANNAH RIVER NUCLEAR SOLUTIONS, LLC WELFARE BENEFITS PLAN**

This is a summary of the annual report of the Savannah River Nuclear Solutions, LLC Welfare Benefits Plan (Employer Identification Number 26-0240191, Plan Number 525) for the plan year 01/01/2022 through 12/31/2022. Savannah River Nuclear Solutions, LLC (EIN 26-0240191), Savannah River Mission Completion, LLC (EIN 85-0584794) and Battelle Savannah River Alliance, LLC (EIN 85-0942867) are Participating Employers and provide certain benefits under the Plan. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Savannah River Nuclear Solutions, LLC has committed itself to pay certain health, dental and disability claims incurred under the terms of the plan.

### **Insurance Information**

The plan has insurance contracts with Prudential Insurance Company of America, EyeMed Vision Care and Continental American Insurance Company to pay certain life insurance, business travel accident, vision, accident and critical illness claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2022 were \$14,016,132.

### **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 Health & Welfare Committee of Savannah River Nuclear Solutions, LLC, Bldg. 730-1B, Aiken, SC 29808; phone number (803) 775-7772.

You also have the legally protected right to examine the annual report at the main office of the plan: Savannah River Nuclear Solutions, LLC, Bldg. 730-1B, Aiken, SC 29808, 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.

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