

December 4, 2018

To: SRR Health Care Plan Participants

**FOLLOWING IS A SUMMARY ANNUAL REPORT NOTICE THAT THE HEALTH CARE BENEFIT PLANS ARE REQUIRED TO PROVIDE TO PLAN PARTICIPANTS**

This is a summary of the annual report of the SRR LLC Health Care Plan (Employer Identification Number 26-3972730, Plan Number 501) for the plan year January 1, 2017 through December 31, 2017. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

SRR LLC has committed itself to pay all health and dental claims incurred under the terms of the plan.

**Insurance Information**

The plan has insurance contracts with EyeMed Vision Care to pay all vision claims incurred under the terms of the plan. The total premiums paid for the plan year ending December 31, 2017 were \$238,482.

**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 item listed below is 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, SRR Benefits Committee, Building 766H, Room 1066F, Aiken, SC 29808, and phone number (803) 208-3978.

You also have the legally protected right to examine the annual report at the main office of the plan: Savannah River Remediation, LLC, SRR Benefits Committee, Building 766H, Room 1066F, 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.