

Summary Annual Report

UNITED CEREBRAL PALSY OF GREATER CLEVELAND, INC.  
PLAN

This is a Summary of the Annual Report for:  
UNITED CEREBRAL PALSY OF GREATER CLEVELAND, INC. PLAN

Employer Identification Number 34-0753561 for period 05/01/2023 through 04/30/2024.

Type of Welfare Plan(s):

Health Insurance  
Life Insurance Dental  
Vision  
Temporary Disability  
Long-Term Disability  
Critical Illness  
AD&D

The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information  
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The plan has contract(s) with the following insurance carrier(s):

LINCOLN NATIONAL LIFE INSURANCE  
MEDICAL MUTUAL  
RELIANCE STANDARD LIFE INSURANCE CO

to pay certain claims incurred under the terms of the plan. The total premiums paid for the plan year ending 04/30/2024 were \$1,255,635.

Your Rights to Additional Information  
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You have the right to receive a copy of the full annual report, or any part thereof, on request.

To obtain a copy of the full annual report, or any part thereof, write or call the office of:

UNITED CEREBRAL PALSY OF GREATER  
10011 EUCLID AVENUE  
CLEVELAND OH 44106-4701  
216-791-8363

who is the plan sponsor.

The charge to cover copying costs will be \$1 for the full annual report, or \$.10 per page for any part thereof.

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:

10011 EUCLID AVENUE  
CLEVELAND OH 44106-4701

and at the U.S. Department of Labor in Washington, DC. 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