

SUMMARY ANNUAL REPORT FOR MEMBERS PLUS ASSOCIATION GROUP INSURANCE TRUST

This is a summary of the annual report of the Members Plus Association Group Insurance Trust, a health, life insurance, dental and vision plan (Employer Identification Number 27-0231584, Plan Number 501), for the plan year 01/01/2016 through 12/31/2016. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Members Plus Association has committed itself to pay certain health claims incurred under the terms of the plan.

Insurance Information

The plan has an insurance contract with United Healthcare Insurance Company and Life Insurance Company of North America to pay certain health, life, dental, vision and AD&D claims incurred under the terms of the plan.

Basic Financial Statement

The value of plan assets, after subtracting liabilities of the plan, was \$0 as of the end of plan year, compared to \$0 as of the beginning of the plan year. During the plan year the plan experienced a change in its net assets of \$0. 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 \$253,148 including employer contributions of \$0, employee contributions of \$209,244, gains/(losses) of \$0 from the sale of assets, and earnings from investments of \$0. Plan expenses were \$253,148. These expenses included \$43,904 in administrative expenses, \$209,244 in benefits paid to participants and beneficiaries, and \$0 in other expenses.

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.

To obtain a copy of the full annual report, or any part thereof, write or call the office of Christy Williams, who is a representative of the plan administrator, at 1701 Barrett Lakes Blvd Suite 180, Kennesaw, GA 30144 and phone number, 678-797-5160.

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: 1701 Barrett Lakes Blvd Suite 180, Kennesaw, GA 30144, 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.