SUMMARY ANNUAL REPORT FOR NORTH CAROLINA BAR ASSOCIATION HEALTH BENEFIT TRUST

This is a summary of the annual report of the NORTH CAROLINA BAR ASSOCIATION HEALTH BENEFIT TRUST, a health and vision plan (Employer Identification Number 56-0583941, Plan Number 501), for the plan year 10/01/2016 through 09/30/2017. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

NORTH CAROLINA BAR ASSOCIATION has committed itself to pay certain Health and Vision claims incurred under the terms of the plan.

Insurance Information

The plan has insurance contracts with NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURG, PA and Blue Cross Blue Shield of North Carolina to pay certain Captive Aggregate, Stop loss and Captive and Health claims incurred under the terms of the plan. The total premiums paid for the plan year ending 09/30/2017 were \$1,457,613.

Because they are so called "experience-rated" contracts, the premium costs are affected by, among other things, the number and size of claims. Of the total insurance premiums paid for the plan year ending 09/30/2017, the premiums paid under such "experience-rated" contracts were \$0 and the total of all benefit claims paid under these experience-rated contracts during the plan year was \$23,333,219.

Basic Financial Statement

The value of plan assets, after subtracting liabilities of the plan, was \$16,019,296 as of the end of plan year, compared to \$11,294,469 as of the beginning of the plan year. During the plan year the plan experienced a change in its net assets of \$4,724,827. 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 \$41,737,598 including employer contributions of \$40,235,904 and earnings from investments of \$170,393. Plan expenses were \$37,012,771. These expenses included \$4,558,407 in administrative expenses, \$32,454,364 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.
- 3. Assets held for investment.
- 4. 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 office of WILLIAM R. STROUD JR, who is a representative of the plan administrator, at 8000 WESTON PARKWAY SUITE 340, CARY, NC 27513 and phone number, 919-677-8900.

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: 8000 WESTON PARKWAY SUITE 340, CARY, NC 27513, 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.