This is a summary of the annual reports for the following Health and Welfare Plans of Brandeis University, Employer Identification # 04-2103552, for the period January 1, 2015 through December 31, 2015. These annual reports have been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Security Act of 1974 (ERISA).

<table>
<thead>
<tr>
<th>Plan Name</th>
<th>Plan Number</th>
<th>Plan Year</th>
</tr>
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<tbody>
<tr>
<td>Health Insurance Plan</td>
<td>503</td>
<td>01/01/2015 - 12/31/2015</td>
</tr>
<tr>
<td>Dental Insurance Plan</td>
<td>511</td>
<td>01/01/2015 - 12/31/2015</td>
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</tbody>
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**Health Insurance Plan - Plan 503**

**Insurance Information**
This is a self-insured plan. All health benefits claims were paid out of the general assets of the employer.

**Group Dental Insurance Plan - Plan 511**

**Insurance Information**
The Plan offers two dental options through Delta Dental of Massachusetts.

Delta Dental PPO Plus Premier: The Plan is call a so called “experience rated” contract, the premium costs are affected by, among other things, the number and size of claims. The Plan has a contract with DeltaDental to pay certain claims incurred under the terms of the Plan. The total benefit claims paid under the “experience rated” contract during the plan year was $1,153,063.

DeltaCare: The plan has a contract with DeltaCare to pay certain claims incurred under the terms of the plan. The total premiums paid for the plan year ending December 31, 2015 were $79,076.

**Your Rights to Additional Information for Plan Numbers 503 and 511**
You have the right to receive a copy of the full annual reports, or any part thereof including insurance information and sales commissions paid by insurance carriers, upon request. To obtain a copy of the full annual report(s), or any part thereof, write or call the Office of Human Resources, Brandeis University, Office of Human Resources, 415 South Street, Mail Stop 118, Waltham, MA 02453-2728 or (781) 736-4468 who is the Plan sponsor. The charge to cover copying costs will be $0 for the full annual report, or $0 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(s) 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 have the legally protected right to examine the annual reports at the main office of the plan, the Office of Human Resources, Brandeis University, 415 South Street, Waltham, MA 02453 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 of Labor should be addressed to: Public Disclosure Room, N-1513, Employee Benefits Security Administration, U. S. Department of Labor, 200 Constitution Avenue, N.W., Washington, DC 20210.