

Summary Annual Report

CENTRAL VALLEY AG COOPERATIVE WRAP PLAN

This is a Summary of the Annual Report for:

CENTRAL VALLEY AG COOPERATIVE WRAP PLAN

Employer Identification Number 47-0834827 for period 01/01/2017 through 12/31/2017.

Type of Welfare Plan(s):

Health (FSA, Accident, Cancer, Critical Illness)
Vision
Temporary Disability

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

The plan sponsor: CENTRAL VALLEY AG COOPERATIVE has committed itself to pay certain claims incurred under the terms of the plan.

Insurance Information

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

VISION SERVICE PLAN
AMERICAN HERITAGE LIFE INSURANCE CO

to pay certain claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2017 were \$283,142.

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:

- Insurance information including sales commissions paid by insurance carries

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

CENTRAL VALLEY AG COOPERATIVE
2803 NORTH NEBRASKA AVE
YORK, NE 68467
402-362-0253

who is the plan sponsor.

The charge to cover copying costs will be \$0.00 for the full annual report, or \$0.00 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:

2803 NORTH NEBRASKA AVE
YORK, NE 68467

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