

Theatrical Stage Employees Health & Welfare Trust

Physical Address 7525 SE 24th Street, Suite 200, Mercer Island, WA 98040 • Mailing Address PO Box 34203, Seattle, WA 98124
Phone (206) 441-7574 or (800) 732-1121 • Fax (206) 505-WPAS (9727) • Website: www.IA15Trust.com

Administered by
Welfare & Pension Administration Service, Inc.

Summary Annual Report for

THEATRICAL STAGE EMPLOYEES HEALTH & WELFARE TRUST

This is a summary of the annual report for the THEATRICAL STAGE EMPLOYEES HEALTH & WELFARE TRUST, (Employer Identification No. 910853746, Plan No. 501) for the period January 1, 2024 to December 31, 2024. 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 value of plan assets, after subtracting liabilities of the plan, was \$3,596,162 as of December 31, 2024 compared to \$2,588,290 as of January 1, 2024. During the plan year the plan experienced an increase in its assets of \$1,007,872. This increase includes unrealized appreciation or 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 \$4,222,394. This income included employer contributions of \$3,956,820, employee contributions of \$127,766, realized losses of \$(1,487) from the sale of assets, earnings from investments of \$128,434 and other income of \$10,861. Plan expenses were \$3,214,522. These expenses included \$264,519 in administrative expenses and \$2,950,003 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. Assets held for investment;
3. Transactions in excess of 5 percent of the plan assets; and
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

Theatrical Stage Employees Health and Welfare Trust
PO Box 34203
Seattle, WA 98124

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. These portions of the report are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the plan:

Theatrical Stage Employees Health and Welfare Trust
7525 SE 24th Street, Suite 200
Mercer Island WA 98040

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: U.S. Department of Labor, Employee Benefits Security Administration, Public Disclosure Room, 200 Constitution Avenue, NW, Suite N-1513, Washington, D.C. 20230.

Opeiu#8
S:\Mailings\Summary Annual Report\F05\F05-02 - SAR - PYE 2024.docx

NOTICE OF PRIVACY PRACTICES

In accordance with regulations issued under the Health Insurance Portability and Accountability Act of 1996, the Trust has developed a Notice of Privacy Practices which describes how medical information about you may be used and disclosed, how you can get access to this medical information, and your rights in regard to such health information. If you would like to obtain a copy of this Notice, please contact: Claims Manager, Welfare & Pension Administration Service, Inc., PO Box 34203, Seattle, WA 98124, telephone (206) 441-7574, (800) 331-6158, or Fax (206) 441-9110, or you can access the website

Important Reminder – You must advise the Administration Office of any changes in your basic demographic data, including changes in your name, marital status, designated beneficiary, home address, email address, and telephone number. Provide information changes by completing and sending a new Enrollment Form or Beneficiary Designation Form to the Administration Office. If you divorce your spouse, please also provide a complete filed copy of your divorce decree and any accompanying court orders.

Failure to update your information on file may delay the timely payment of your benefits, and communication of important Plan information.