SUMMARY ANNUAL REPORT

For LAWRENCE UNIVERSITY DEFINED CONTRIBUTION RETIREMENT PLAN

This is a summary of the annual report for LAWRENCE UNIVERSITY DEFINED CONTRIBUTION RETIREMENT PLAN, EIN 39-0806297, Plan No. 001, for period July 01, 2013 through June 30, 2014. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Basic Financial Statement

Benefits under the plan are provided by insurance and a trust fund. Plan expenses were $3,466,872. These expenses included $4,285 in administrative expenses, and $3,462,587 in benefits paid to participants and beneficiaries. A total of 1,183 persons were participants in or beneficiaries of the plan at the end of the plan year, although not all of these persons had yet earned the right to receive benefits.

The value of plan assets, after subtracting liabilities of the plan, was $85,465,538 as of June 30, 2014, compared to $74,787,024 as of July 01, 2013. During the plan year the plan experienced an increase in its net assets of $10,678,514. This increase 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. The plan had total income of $14,179,530, including employer contributions of $1,824,316, employee contributions of $753,478, earnings from investments of $11,534,487, and other income of $67,249.

The plan has a contract with Tiaa-Cref. The total premiums paid for the plan year ending June 30, 2014 were $0.

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:

- an accountant's report;
- financial information;
- information on payments to service providers;
- assets held for investment;
- insurance information, including sales commissions paid by insurance carriers;
- information regarding any common or collective trusts, pooled separate accounts, master trusts or 103-12 investment entities in which the plan participates;

To obtain a copy of the full annual report, or any part thereof, write or call the office of LAWRENCE UNIVERSITY OF WISCONSIN at 711 EAST BOLDT WAY SPC40, APPLETON, WI 54911-5699, or by telephone at (920) 832-6540. The charge to cover copying costs will be $2.00 for the full annual report, or $0.25 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 (LAWRENCE UNIVERSITY OF WISCONSIN, 711 EAST BOLDT WAY SPC40, APPLETON, WI 54911-5699) 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 N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.
SUMMARY ANNUAL REPORT

For LAWRENCE UNIVERSITY TAX-DEFERRED SAVINGS PLAN

This is a summary of the annual report for LAWRENCE UNIVERSITY TAX-DEFERRED SAVINGS PLAN, EIN 39-0806297, Plan No. 002, for period July 01, 2013 through June 30, 2014. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Basic Financial Statement

Benefits under the plan are provided by insurance and a trust fund. Plan expenses were $671,279. These expenses included $1,826 in administrative expenses, and $669,453 in benefits paid to participants and beneficiaries. A total of 762 persons were participants in or beneficiaries of the plan at the end of the plan year, although not all of these persons had yet earned the right to receive benefits.

The value of plan assets, after subtracting liabilities of the plan, was $18,618,553 as of June 30, 2014, compared to $15,645,835 as of July 01, 2013. During the plan year the plan experienced an increase in its net assets of $2,972,718. This increase 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. The plan had total income of $3,609,853, including employee contributions of $863,546, earnings from investments of $2,625,353, and other income of $120,954.

The plan has a contract with Tiaa-Cref. The total premiums paid for the plan year ending June 30, 2014 were $0.

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:

• an accountant's report;

• financial information;

• information on payments to service providers;

• assets held for investment;

• insurance information, including sales commissions paid by insurance carriers;

• information regarding any common or collective trusts, pooled separate accounts, master trusts or 103-12 investment entities in which the plan participates;

To obtain a copy of the full annual report, or any part thereof, write or call the office of LAWRENCE UNIVERSITY OF WISCONSIN at 711 EAST BOLDT WAY SPC 40, APPLETON, WI 54911-5699, or by telephone at (920) 832-6540. The charge to cover copying costs will be $2.00 for the full annual report, or $0.25 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 (LAWRENCE UNIVERSITY OF WISCONSIN, 711 EAST BOLDT WAY SPC 40, APPLETON, WI 54911-5699) 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 N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.
SUMMARY ANNUAL REPORT FOR
LAWRENCE UNIVERSITY OF WISCONSIN GROUP LIFE INSURANCE PLAN

This is a summary of the annual report of the LAWRENCE UNIVERSITY OF WISCONSIN GROUP LIFE INSURANCE PLAN, a life insurance and death benefits plan (Employer Identification Number 39-0806297, Plan Number 501), for the plan year 07/01/2013 through 06/30/2014. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information

The plan has an insurance contract with RELIASTAR LIFE INSURANCE COMPANY to pay certain Life insurance, AD&D claims incurred under the terms of the plan. The total premiums paid for the plan year ending 06/30/2014 were $144,985.

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:

I. 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 Sandra Isselmann, who is a representative of the plan administrator, at 711 BOLDT WAY, APPLETON, WI 54911 and phone number, 920-832-6543.

You also have the legally protected right to examine the annual report at the main office of the plan: 711 BOLDT WAY, APPLETON, WI 54911, 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.
SUMMARY ANNUAL REPORT FOR
LAWRENCE UNIVERSITY GROUP LONG TERM DISABILITY INSURANCE PLAN

This is a summary of the annual report of the LAWRENCE UNIVERSITY GROUP LONG TERM DISABILITY INSURANCE PLAN, a long-term disability plan (Employer Identification Number 39-0806297, Plan Number 502), for the plan year 07/01/2013 through 06/30/2014. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information

The plan has an insurance contract with UNUM LIFE INSURANCE COMPANY OF AMERICA to pay certain Long-term disability claims incurred under the terms of the plan. The total premiums paid for the plan year ending 06/30/2014 were $83,881.

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. 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 Sandra Isselmann, who is a representative of the plan administrator, at 711 EAST BOLDT WAY, APPLETON, WI 54911 and phone number, 920-832-6543.

You also have the legally protected right to examine the annual report at the main office of the plan: 711 EAST BOLDT WAY, APPLETON, WI 54911, 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.
SUMMARY ANNUAL REPORT FOR
LAWRENCE UNIVERSITY EMPLOYEE DENTAL BENEFIT PLAN

This is a summary of the annual report of the LAWRENCE UNIVERSITY EMPLOYEE DENTAL BENEFIT PLAN, a dental plan (Employer Identification Number 39-0806297, Plan Number 511), for the plan year 07/01/2013 through 06/30/2014. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information

The plan has an insurance contract with CARE-PLUS DENTAL PLANS INC to pay certain Dental claims incurred under the terms of the plan. The total premiums paid for the plan year ending 06/30/2014 were $161,787.

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. 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 Sandra Isselmann, who is a representative of the plan administrator, at 711 BOLDT WAY, APPLETON, WI 54911 and phone number, 920-832-6543.

You also have the legally protected right to examine the annual report at the main office of the plan: 711 BOLDT WAY, APPLETON, WI 54911, 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.