

Summary Annual Report

For

OLLIES BARGAIN OUTLET, INC. FLEXIBLE BENEFIT PLAN

This is a summary of the annual report for the OLLIES BARGAIN OUTLET, INC. FLEXIBLE BENEFIT PLAN, (Employer Identification No. 25-1589489, Plan No. 520) for the period July 1, 2016 to June 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).

Ollie's Bargain Outlet, Inc. has committed itself to pay the following types of claims incurred under the terms of the Plan: all prescription claims and certain health claims.

INSURANCE INFORMATION

The plan has contracts with United Concordia Life & Health Insurance Company, Highmark, Sun Life and Health Insurance Company (U.S.), the United States Life Insurance Co. in the City of New York, Reliance Standard, the Lincoln National Life Insurance Company, First Unum Life Insurance Company and Provident Life and Accident Insurance Company to pay the following types of claims incurred under the terms of the plan: all vision, dental, life, AD&D, STD, LTD, cancer claims and certain health claims.

The total premiums paid for the plan year beginning July 1, 2016 and ending June 30, 2017 were \$1,627,567.

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 June 30, 2017, the premiums paid under such "experience-rated" contracts were \$461,786 and the total of all benefit claims paid under these "experience-rated" contracts during the plan year were \$274,675.

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

Ollie's Bargain Outlet, Inc.
6295 Allentown Blvd, Suite 1
Harrisburg, PA 17112
25-1589489 (Employer Identification Number)
717-657-2300

or the Plan Administrator

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:

6295 Allentown Blvd, Suite 1
Harrisburg, PA 17112

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. 20210.