SUMMARY ANNUAL REPORT FOR
OSI RESTAURANT PARTNERS, LLC EMPLOYEE BENEFIT PLAN

This is a summary of the annual report of the OSI Restaurant Partners, LLC Employee Benefit Plan (Employer Identification Number 59-3061413, Plan Number 501) for the plan year 01/01/2021 through 12/31/2021. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

OSI Restaurant Partners, LLC has committed itself to pay certain health, prescription drug, flexible spending account, dental, and vision claims incurred under the terms of the plan.

Insurance Information

The plan has insurance contracts with Federal Insurance Company, Hawaii Medical Assurance Association, Life Insurance Company of North America, Magellan Healthcare, Metlife Legal Plans of Florida and Cigna Health and Life Insurance Company and Affiliates to pay certain business travel accident, health, dental, vision, prescription drug, accidental death and dismemberment, long-term disability, temporary disability, life insurance, employee assistance program and legal claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2021 were $3,257,579.

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 OSI Restaurant Partners, LLC, the plan administrator, at 2202 N West Shore Blvd Suite 500, Tampa, FL 33607 and phone number, 813-282-1225.

You also have the legally protected right to examine the annual report at the main office of the plan: 2202 N West Shore Blvd Suite 500, Tampa, FL 33607, 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.