

# Office and Professional Employees Locals 30 & 537 Health & Welfare and Retirement Trust Funds

Administered By: Benefit Programs Administration  
Telephone • (800) 386-4350 • (562) 463-5065 • Facsimile (562) 908-7568

December 2010

## **SUMMARY ANNUAL REPORT FOR**

### **OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION LOCALS 30 AND 537 HEALTH AND WELFARE FUND**

This is a summary of the annual report of the Office and Professional Employees International Union Locals 30 and 537 Health and Welfare Fund (the Plan), EIN 95-6047601, for the year ended January 31, 2010. The annual report has been filed with the Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

The Board of Trustees of Office and Professional Employees International Union Locals 30 and 537 Health and Welfare Fund has committed itself to pay certain medical, dental, vision and prescription drug claims incurred under the terms of the Plan.

#### Insurance Information

The Plan has contracts with Kaiser Foundation Health Plans, Inc. to pay certain medical, vision and prescription drug claims, with United HealthCare Insurance Company to pay life insurance and accidental death and dismemberment benefits, with American National Life Insurance Company of Texas to pay stop-loss claims and with United Concordia Dental Plans of California, Inc. to pay certain dental benefits incurred under the terms of the Plan. The total premiums paid for the plan year ended January 31, 2010 were \$2,702,168.

#### Basic Financial Statement

The value of plan assets, after subtracting liabilities of the Plan, was \$5,365,380 as of January 31, 2010, compared to \$5,010,014 as of February 1, 2009. During the plan year the Plan experienced an increase in its net assets of \$355,366. 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 \$6,067,954, which included employer contributions of \$4,957,944, employee contributions of \$325,900, earnings from investments of \$763,693 and other income of \$20,417.

Plan expenses were \$5,712,588. These expenses included \$542,890 in administrative expenses and \$5,169,698 in benefits paid to or for 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. Financial information and information on payments to service providers;
3. Assets held for investments;
4. Insurance information including sales commissions paid by insurance carriers;  
and
5. Transactions in excess of 5 percent of plan assets.

To obtain a copy of the full annual report, or any part thereof, write or call the office of Benefit Programs Administration, at 13191 Crossroads Parkway, Suite 205, City of Industry, California 91746-3434, telephone (562) 463-5065. The charge to cover copying costs will be \$6.50 for the full annual report or \$.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, 13191 Crossroads Parkway, Suite 205, City of Industry, CA 91746, 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, N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, DC 20210.