Automotive Industries Welfare Fund

Administered by: Associated Third Party Administrators

1640 South Loop Road • Alameda, CA 94502 • Telephone (510) 836-2484 or (800) 635-3105

Mailing Address: Post Office Box 23120 • Oakland, CA 94623-0120

Claims Mailing Address: Post Office Box 23263 • Oakland, CA 94623-2363

Website: www.aitrustfunds.org

SUMMARY ANNUAL REPORT FOR AUTOMOTIVE INDUSTRIES WELFARE PLAN

This is a summary of the annual report of the Automotive Industries Welfare Plan, EIN 94-6078226, for the year ended December 31, 2009. 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 the Automotive Industries Welfare Plan has committed itself to pay certain medical, dental, orthodontia, disability, basic life, accidental death and dismemberment, vision, and prescription drug claims incurred under the terms of the plan.

Insurance Information

The plan has contracts with Kaiser Foundation Health Plan, Inc., Health Net, MHN Services, and Vision Service Plan to pay certain medical, vision, and prescription drug claims incurred under the terms of the plan. Certain life insurance benefits are provided through contracts with Hartford Life Insurance Company and ReliaStar Life Insurance Company. Certain vision and dental benefits are provided through contracts with Vision Service Plan, Safeguard Health Plans, Inc., United Concordia Dental Plans of California, Inc., Newport Dental Plan, and Delta Dental of California. The total premiums paid for the plan year ending December 31, 2009 were \$42,999,024.

Because the contract with Hartford Life Insurance Company is a so-called "experience rated" contract, the premium costs are affected by, among other things, the number and size of the claims. Of the total insurance premiums paid for the plan year ending December 31, 2009, the premiums paid under such "experience-rated" contract were \$639,998 and the total of all benefit claims paid under the experience-rated contract during the plan year was \$528,906.

Basic Financial Statement

The value of plan assets, after subtracting liabilities of the plan, was \$20,792,803 as of December 31, 2009, compared to \$22,354,387 as of January 1, 2009. During the plan year the plan experienced a decrease in its net assets of \$1,561,584. This decrease 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 \$56,291,320, including employer contributions of \$52,104,781, employee contributions of \$1,481,789, realized gains of \$243,349 from the sale of assets, earnings from investments of \$1,709,114 and other income of \$752,287.

Plan expenses were \$57,852,904. These expenses included \$2,703,876 in administrative expenses and \$55,149,028 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 investment;
- 4. Transactions in excess of 5% of plan assets; and
- 5. 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 Associated Third Party Administrators, who is contract administrator, at P.O. Box 2460 Oakland, California 94623-1160, telephone (510) 836-2484. The charge to cover copying costs will be \$18.25 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 at 1640 South Loop Road, Alameda, California 94502, 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.