

**BOARD OF TRUSTEES
INDIANA LABORERS WELFARE FUND
413 SWAN STREET
TERRE HAUTE, IN 47807**

**Summary Annual Report for the
INDIANA LABORERS WELFARE FUND**

This is the summary annual report for the INDIANA LABORERS WELFARE FUND, EIN 35-0923209, Plan number 501 for the period December 1, 2018 to November 30, 2019. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Indiana Laborers Welfare Fund has committed itself to pay certain medical, dental, vision and prescription claims incurred under the terms of the plan.

Insurance Information

The plan has contracts with Standard Insurance Company and HCC Life Insurance Company to pay certain life insurance benefits and stop loss coverage claims incurred under the terms of the plan. The total premiums paid for the plan year ending November 30, 2019 were \$1,268,005.

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 November 30, 2019, the premiums paid under such "experience-rated" contracts were \$852,537, and the total of all benefit claims paid under these "experience-rated" contracts during the plan year was \$750,000.

Basic Financial Statement

The value of plan assets, after subtracting liabilities of the plan, was \$243,883,138 as of November 30, 2019, compared to \$221,408,617 as of December 1, 2018. During the plan year the plan experienced an increase in its net assets of \$22,474,521. This increase includes unrealized appreciation 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 \$115,828,942 including employer contributions of \$85,380,074, employee contributions of \$8,188,711, realized gains of \$2,290,827 from the sale of assets, earnings from investments of \$17,856,565, and other income of \$2,112,765.

Plan expenses were \$93,354,421. These expenses included \$9,912,609 in administrative expenses, \$83,441,812 in benefits paid to participants and beneficiaries, and \$0 in other expenses.

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 and information on payments to service providers
- Assets held for investment
- Transactions in excess of 5% of plan assets
- 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 BOARD OF TRUSTEES INDIANA LABORERS WELFARE FUND, who is the plan administrator, 413 SWAN STREET, TERRE HAUTE, IN, 47807, 812-238-2551. These portions of the report are furnished without charge.

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:

BOARD OF TRUSTEES
INDIANA LABORERS WELFARE FUND
Plan Sponsor
413 SWAN STREET
TERRE HAUTE, IN 47807
35-0923209

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, N.W.
Room N-1513
Washington, DC 20210

Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average less than one minute per notice (approximately 3 hours and 11 minutes per plan). Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of the Chief Information Officer, Attention: Departmental Clearance Officer, 200 Constitution Avenue, N.W., Room N-1301, Washington, DC 20210 or email DOL_PRA_PUBLIC@dol.gov and reference the OMB Control Number 1210-0040.

OMB Control Number 1210-0040 (expires 06/30/2022)