



## Northern California Plasterers Trust Funds

Health & Welfare Trust Fund, Pension Plan and Plasterers Local 66 Supplemental Pension Trust  
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### SUMMARY ANNUAL REPORT FOR

### NORTHERN CALIFORNIA PLASTERERS HEALTH AND WELFARE TRUST FUND

This is a summary of the annual report of the Northern California Plasterers Health and Welfare Trust Fund, 94-6251593, for the year ended June 30, 2020. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

The Board of Trustees of the Northern California Plasterers Health and Welfare Trust Fund has committed itself to pay certain dental, vision and health reimbursement claims incurred under the terms of the Plan.

#### Insurance Information

The plan has contracts with The Lincoln National Life Insurance Company, Kaiser Foundation Health Plan Inc., Blue Shield of California, Physmetrics, LLC and Premier Access Insurance Company to pay to pay certain medical, drug, dental, life and AD&D, chiropractic and acupuncture benefit claims incurred under the terms of the plan. The total premiums paid for the plan year ending June 30, 2020 were \$10,932,160.

#### Basic Financial Statement

The value of plan assets, after subtracting liabilities of the plan, was \$23,821,289 as of June 30, 2020, compared to \$22,134,827 as of July 1, 2019. During the plan year the plan experienced an increase in its net assets of \$1,686,462. 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 \$14,434,136, including employer contributions of \$12,785,007, employee contributions of \$737,705, earnings from investments of \$910,229, and other income of \$1,195.

Plan expenses were \$12,747,674. These expenses included \$539,826 in administrative expenses and \$12,207,848 in benefits paid to 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; and
4. 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 Health Services & Benefit Administrators, Inc. who is the Plan Administrator, 4160 Dublin Boulevard, Suite 400, Dublin, CA 94568-7756. The charge to cover copying costs will be \$10.75 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 Health Services & Benefit Administrators, Inc., 4160 Dublin Boulevard Suite 400, Dublin, CA 94568-7756, 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.