



Teamsters Local 631 Trust Funds

SUMMARY ANNUAL REPORT FOR THE TEAMSTERS LOCAL 631 SECURITY PLAN FOR SOUTHERN NEVADA

This is a summary of the annual report for the Teamsters Local 631 Security Plan for Southern Nevada (the “Plan”), Employer Identification Number 88-0231734, Plan No. 501, for the period May 1, 2023 to April 30, 2024 (the “Plan Year”). 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 for the Teamsters Local 631 Security Plan for Southern Nevada has committed itself to pay certain medical, prescription, dental and vision claims incurred under the terms of the Plan.

Insurance Information

The Plan has contracts with The Lincoln National Life Insurance Co. to pay certain life and AD&D claims, Nevada Dental Benefits, Ltd. to pay certain dental claims, the Metropolitan Life Insurance Company to pay certain vision claims and The Union Labor Life Insurance Co. to pay certain stop-loss claims incurred under the terms of the Plan. The total premiums paid for the plan year ending April 30, 2024 were \$2,673,582.

Basic Financial Statement

The value of Plan assets, after subtracting liabilities of the Plan, was \$243,583,236 as of April 30, 2024, compared to \$231,951,116 as of May 1, 2023. During the year, the Plan experienced an increase in its net assets of \$11,632,120. This increase includes unrealized appreciation and 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 \$98,674,300, including employer contributions of \$89,686,027, employee contributions of \$1,076,727, losses from investments of \$4,342,071, gains from sale of assets of \$1,863,116, and other income of \$10,390,501. Plan expenses were \$87,042,180. These expenses included \$2,836,934 in administrative expenses and \$84,205,246 in benefits paid to/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:

- An accountant’s report
- Financial information and information on payments to service providers
- Assets held for investment
- Fiduciary information
- Transactions in excess of 5 percent (5%) of Plan assets
- Insurance information, including sales commissions paid by insurance carriers
- Information regarding any common or collective trusts in which the Plan participates.

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To obtain a copy of the full annual report, or any part thereof, write or call the office of BeneSys Administrators, the third-party administrator, 8311 W. Sunset Rd, Suite 250, Las Vegas, NV 89113, telephone (702) 415-2185. The plan administrator may make a reasonable charge to cover copying, mailing and other costs.

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 noted 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, BeneSys Administrators, 8311 W. Sunset Rd, Suite 250, Las Vegas, NV 89113, 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. The annual report is also available online at the Department of Labor website www.efast.dol.gov.

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

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 03/31/2026)