## SUMMARY ANNUAL REPORT FOR

# Retirees of The Goodyear Tire & Rubber Company Health Care Plan

This is a summary of the annual report of the Retirees of The Goodyear Tire & Rubber Company Health Care Plan, EIN 26-6330284, Plan No. 501, for period January 01, 2011 through December 31, 2011. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

#### **Insurance Information**

The plan has an insurance contract with Delta Dental Plan of Ohio to pay dental claims incurred under the terms of the plan. The total premiums paid for the plan year ending December 31, 2011 were \$2,307,723.

Because it is a so called "experience-rated" contract, 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 December 31, 2011, the premiums paid under such "experience-rated" contract were \$2,307,723 and the total of all benefit claims paid under the contract during the plan year was \$2,092,283.

The plan also has contracts with Highmark Blue Cross and Blue Shield to pay medical benefits and with Express Scripts to pay prescription drug benefits, both on a "self funded" basis. For the plan year ending December 31, 2011 the total payments for medical benefits were \$89,524,237, and the total payments for prescription drug benefits were \$69,438,719.

#### **Basic Financial Statement**

The value of plan assets, after subtracting liabilities of the plan, was \$962,338,371 as of December 31, 2011, compared to \$940,458,797 as of January 01, 2011. During the plan year the plan experienced an increase in its net assets of \$21,879,574. 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 \$207,857,834, including employer contributions of \$115,511,344, employee contributions of \$27,828,405, earnings from investments of \$39,677,799, and other income of \$24,840,286.

Plan expenses were \$185,978,260. These expenses included \$9,559,243 in administrative expenses, and \$176,419,017 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:

- an accountant's report;
- financial information:
- information on payments to service providers;
- assets held for investment;
- transactions in excess of 5% of the 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 Retirees of The Goodyear Tire & Rubber Company Health Care Trust at 60 Blvd. of the Allies, 5th Floor, Pittsburgh, PA 15222-1219, or by telephone at (412) 201-2242.

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.

You also have the legally protected right to examine the annual report at the main office of the plan (Retirees of The Goodyear Tire & Rubber Company Health Care Trust, 60 Blvd. of the Allies, 5th Floor, Pittsburgh, PA 15222-1219) 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: Public Disclosure Room, Room N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.