SUMMARY ANNUAL REPORT FOR
WILKES UNIVERSITY COMPREHENSIVE WELFARE BENEFITS PLAN

This is a summary of the annual report of the WILKES UNIVERSITY COMPREHENSIVE WELFARE BENEFITS PLAN, a health, life insurance, dental, vision and long-term disability plan (employer identification number 24-0795506) for the plan year ending 05/31/2009. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

WILKES UNIVERSITY has committed itself to pay certain claims incurred under the terms of the plan.

Insurance Information

The plan has contracts with HOSPITAL SERV ASSN OF NE PA (BC OF NORTHEASTERN PA), HIGHMARK BLUE SHIELD/DAVIS VISION, HIGHMARK BLUE SHIELD, AIG LIFE INSURANCE COMPANY, SUN LIFE AND HEALTH INSURANCE COMPANY (US), UNITED CONCORDIA LIFE & HEALTH INSURANCE COMPANY, FIRST PRIORITY LIFE INS CO INC and HMO OF NORTHEASTERN PENNSYLVANIA (FIRST PRIORITY HEALTH) to pay certain Medical, Prescription, Dental, Vision, Life & ADAD, LTD claims incurred under the terms of the plan. The total premiums paid for the plan year ending 05/31/2009 were $2,567,947.

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. 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 JOSEPH HOUSENICK, who is a representative of the plan administrator at 84 W SOUTH ST, WILKES BARRE, PA 18701 and phone number, 570-408-5000. The charge to cover copying costs will be $2.00 for the full annual report, or $0.10 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: 84 W SOUTH ST, WILKES BARRE, PA 18701, 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 N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.