

**SUMMARY PLAN DESCRIPTION**

**OF THE**

**HARDSHIP PLAN**

**OF THE**

**DALRC RETIREE BENEFIT TRUST**

Dated April 20, 2010

## INTRODUCTION

The purpose of the Hardship Plan (the "Plan") described in this summary is to assist non-pilot retirees of Delta Air Lines, Inc. ("Delta"), their spouses, survivors and/or dependents, enrolled in the DALRC Health Plan for Delta Retirees (*age 65 and older*), or the Delta Family Care Medical Plan (*under age 65*) or successor Medical and Prescription Drug Plans (collectively, the "Plans") that became effective on January 1, 2007 or later ("Eligible Individuals"), who face serious hardship because of their financial situation and need assistance with paying for Medical and Prescription Drug benefits.

Under the Hardship Plan, the DALRC Retiree Benefit Trust (the "Trust") will pay or reimburse premiums paid to the Plans by those Eligible Individuals identified by the Trust as facing serious financial hardship and needing assistance with the cost of Medical and Prescription Drug premiums.

The DALRC Retiree Benefit Plan Trust is the sponsor of the Plan. The address of the Trust is c/o Troutman Sanders LLP, Attn: David Golden, 600 Peachtree Street NE, Suite 5200, Atlanta, GA 30308-2231.

Delta is not involved in the administration of the Plan or any funding decision under the Plan. Delta provided funding for the Trust under the Term sheet with the official Section 1114 Committee representing its non-pilot retirees and dependents (the "Section 1114 Committee") in Delta's Chapter 11 bankruptcy case number 05-17923 (the "Bankruptcy Case"), approved by the Bankruptcy Court for the Southern District of New York.

This summary is called a Summary Plan Description ("SPD") and describes the provisions of the Plan which are in effect as of January 1, 2010. The primary purpose of this SPD is to provide you with a non-technical explanation of the most important features of the Plan. If there is any inconsistency between the Plan and this SPD, the provisions of the Plan will govern.

### **HOW DOES THE HARDSHIP PLAN WORK?**

The Plan is administered by a committee (the "Committee") on behalf of the Trust. The duties of the Committee are to exercise supervisory control over the Plan's operation.

The Trust has established a process (for those retirees *age 65 and older*) where the DALRC Retiree Benefit Trust Plan Administrator automatically receives proof of your Social Security Low Income Subsidy for Medicare Part D (LIS) award, directly from the Prescription Drug Plan insurance company as provided to them by Medicare. This proof satisfies the only requirement for Trust Hardship plan assistance. The Trust then authorizes the Hardship Plan to pay your Medical and Prescription Drug Plan premiums based on that proof.

For those retirees *under age 65*, the Committee receives a completed Hardship Application from you including your proof of approval for Social Security Disability, the only requirement to qualify for assistance, and the Trust authorizes the Hardship Plan to reimburse you on a quarterly basis for your Medical and Prescription Drug Plan premiums.

The Committee may, in its sole discretion, make such rules and regulations as are necessary in the administration of the Plan, including grant eligibility requirements. All interpretations, determinations and decisions of the Committee with respect to any claim will be made in its sole discretion based on the Plan and other relevant documents and, except as required by the Employee Retirement Income Security Act of 1974 (“ERISA”), will be final, conclusive and binding.

### **WHO MAY RECEIVE BENEFITS UNDER THE PLAN?**

You may receive benefits under the Plan if you:

- are a non-pilot retiree of Delta, or a spouse, survivor, and/or dependent of a non-pilot retiree;
- enrolled in the DALRC Retiree Benefit Trust Medical Plan (*age 65 and older*), or enrolled in the Delta Family Care Medical Plan or the Delta Account-Based Medical Plan (*under age 65*);
- qualify under the Plan due to approval for the Social Security Low Income Subsidy for Medicare Part D (*age 65 and older*), or demonstration of proof of award of Social Security Disability (*under age 65*).

### **WHAT BENEFITS DOES THE PLAN PROVIDE TO ELIGIBLE INDIVIDUALS?**

Under the Plan, the Trust pays or reimburses Medical and Prescription Drug insurance premiums of Eligible Individuals under the DALRC Retiree Benefit Trust Medical Plan or the Delta Family Care Medical Plan/Delta Account-Based Medical Plan.

### **WHEN WILL BENEFITS BE PROVIDED?**

Once evidence of eligibility for benefits has been received, the Trust begins making premium payments, or reimbursing premium payments on behalf of Eligible Individuals for that calendar year. Eligible Individuals will be reimbursed for any portion of premiums paid back to their original date of eligibility. Reimbursement will be made no further back than January 1 of that same calendar year.

The annual benefit approval period ends on December 31<sup>st</sup> of the calendar year for which benefits were awarded. Should the Eligible Individual lose eligibility for benefits during that calendar year, benefits will stop as of the date that eligibility ceased. All benefits under the Hardship Plan are granted for a period of not longer than one calendar year and must be reapplied for annually.

## **WHAT ARE THE REQUIREMENTS FOR RECEIVING A BENEFIT UNDER THE PLAN?**

In order to become an Eligible Individual and receive benefits under the Plan:

**Eligible Persons Age 65 and Older must have proof of:** Approval for the Social Security Low Income Subsidy for Medicare Part D (LIS).

**Eligible Persons Under Age 65 must have proof of:**

Award of Social Security Disability Benefits.

### **DURATION OF THE PLAN**

The plan sponsor reserves the right to modify, revoke, suspend, or terminate the Plan in whole or in part, at any time.

### **APPLICATION PROCEDURE**

#### **Age 65 and Older**

No application or action is required on your part. The DALRC Retiree Benefit Trust Plan Administrator automatically receives proof of your Social Security Low Income Subsidy for Medicare Part D (LIS) award, directly from the Prescription Drug Plan insurance company as provided to them by Medicare. This proof satisfies the only requirement for Trust Hardship plan assistance. The Trust then authorizes the Hardship Plan to pay your Medical and Prescription Drug Plan premiums based on that proof.

If you question the amount of your benefit under the Plan, your eligibility for a benefit under the Plan, or any other aspect of the operation of the Plan, you must file a written inquiry with the Committee.

The Committee has the sole discretion, based on the Plan documents, to respond to any request and, except as required by ERISA, any subsequent decisions are final, conclusive and binding.

#### **Under age 65**

You are required to submit an application. You will be notified of the acceptance or denial of your application within 90 days from the date it is received by the Committee. In some cases, your request may take more time to review and an additional processing period of up to 30 days may be required. If this happens, you will be notified.

If your application is denied, you will be notified in writing of the reason for the denial. If the denial is based on your failure to provide the required information, this notice also will explain what additional information is needed to evaluate the application, together with an explanation of the review procedure. You can request, in writing, within 180 days, a reconsideration of your application by the Committee.

If you are not notified of the Committee's approval or denial of your application within 90 days from the date the Committee received your application, you may request a review of your application as if it had been denied.

The Committee has the sole discretion, based on the Plan documents, to decide any request for reconsideration of an application and, except as required by ERISA, any such decision is final, conclusive and binding.

### **ADDITIONAL INFORMATION ON THE HARDSHIP PLAN AS REQUIRED BY ERISA**

The Plan is an employee welfare benefit plan.

Legal process may be served upon the Trust or the Committee through delivery to DALRC Retiree Benefit Trust Hardship Plan, c/o Troutman Sanders LLP, Attn: David Golden, 600 Peachtree Street NE, Suite 5200, Atlanta, GA 30308-2231.

The federal employee identification number of the Trust is 20-8503691.

The Plan has been funded by Delta Air Lines, Inc., although Delta is not involved in the administration of the Plan or the Trust or in any funding decision, claim determination decision, or other decision by the Committee. At this time, the Trust does not accept contributions from Eligible Persons or Eligible Individuals.

The funds of the Trust are held at Comerica Bank.

The end of the Plan's fiscal year shall be December 31.

### **YOUR RIGHTS UNDER THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974**

As a participant in the Hardship Plan, you are entitled to certain rights and protections under the Employee Retirement Income Security Act of 1974, as amended ("ERISA"). ERISA provides that all Plan participants shall be entitled to:

- (i) examine, without charge, the Plan documents at the office of the Committee's agent for legal process, as noted above.
- (ii) obtain copies of all Plan documents and other Plan information upon written request to the Committee.

In addition to creating rights for Plan participants, ERISA imposes obligations upon the persons who are responsible for the operation of the employee benefit plan. The persons who operate your Plan, called "*fiduciaries*" of the Plan, have a duty to do so prudently and in the interest of you and other Plan participants. No one, including your employer or any other person, may discriminate against you in any way to prevent you from obtaining benefits or exercising your rights under ERISA. If your claim for a benefit is denied in whole or in part, you must receive a written explanation of the reason for the denial. You have the right to have the

Committee review and reconsider your claim. Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request materials from the Plan and do not receive them within 30 days, you may file suit in a federal court. In such a case, the court may require the Committee to pay you up to \$110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the Committee. If you have a claim for a benefit which is denied or ignored, in whole or in part, you may file suit in a state or federal court. If it should happen that Plan fiduciaries misuse the Plan's money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a federal court. The court will decide who should pay court costs and legal fees. If you are successful, the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees; for example, if it finds your claim is frivolous.

If you have any questions about your rights under ERISA, you should contact the nearest office of the Pension and Welfare Benefits Administration, U.S. Department of Labor, listed in the telephone directory or the Division of Technical Assistance and Inquiries, Pension and Welfare Benefits Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

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**This summary plan description is intended to provide you with an easy-to-understand summary of the Hardship Plan of the DALRC Retiree Benefit Trust. While every effort has been made to make this description as complete and accurate as possible, this summary plan description, of necessity, cannot contain a full restatement of the terms and provisions of the Plan. If any conflict should arise between the summary in this booklet and the Plan, or if any point is not covered in this booklet or is only partially covered, the terms of the Plan will govern in all cases.**