Summary Plan Description / Plan Rules & Regulations

of the

## **Southern California Pipe Trades**

# VACATION & HOLIDAY FUND

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## SECTION 1. INTRODUCTION

The Southern California Pipe Trades Vacation & Holiday Fund ("Fund" or "Plan") was established in 1971 through the negotiating efforts of District Council No. 16 of the United Association of Journeymen and Apprentices of the Plumbing and Pipe Fitting Industry of the United States and Canada ("United Association") and Employers in the plumbing and pipefitting industry in Southern California. Union and Employer Trustees manage the Fund.

#### A) This Summary Plan Description

This Summary Plan Description/Plan Rules and Regulations ("SPD") is a summary of the provisions of the Southern California Pipe Trades Vacation & Holiday Plan. It applies on and after January 1, 2019. It is very important that you read this SPD carefully to understand how the Plan works. Please keep this SPD for future reference.

Plan rules may change from time to time, in which case a written notice explaining any important change will be sent to all covered households. Please be sure to read all Plan communications and keep them with this SPD.

#### **B)** Purpose of the Plan

The Plan was set up to provide paid time off benefits. The Plan is funded by Employers who contribute on behalf of their Employees on a per-hour basis under a Collective Bargaining Agreement or a Participation Agreement.

#### C) Role of the Board of Trustees

The Board of Trustees is authorized to interpret all Plan rules and documents, including the Trust Agreement and this SPD. The Board of Trustees has discretion to decide all questions about the Plan including, but not limited to, questions about eligibility for participation in the Plan, rights to benefits, the amount of benefits that are payable, the information and proof necessary to substantiate a claim for benefits, and the definition of any Plan term. The Board of Trustees also has the authority to make any factual determinations concerning claims. No individual Trustee, Employer, or Union representative has authority to interpret any Plan document on behalf of the Board of Trustees or to act as an agent of the Board of Trustees. The Board of Trustees may delegate its authority to a subcommittee or other subset of the Board of Trustees.

The Trustees intend to continue the Fund indefinitely. However, the Board of Trustees has the authority to amend or terminate the Plan as they deem appropriate.

#### D) Role of the Fund Office

The Board of Trustees has authorized the Fund Office to respond in writing to written correspondence. As a courtesy, the Fund Office may also respond informally to questions by telephone, email, or in person at the Fund Office. However, such information and answers are not binding upon the Board of Trustees and cannot be relied upon in any dispute. Keep in mind that in all matters communicated to you, verbal or written, the Board of Trustees will have the ultimate authority and discretion to interpret the Plan documents and make an independent determination about your entitlement to benefits.

	If you have any questions regarding eligibility, benefits, or procedures, contact the Fund Office.			
NOTE	Southern California Pipe Trades Administrative Corporation 501 Shatto Place, Suite 500 Los Angeles, CA 90020			
	Toll Free: (800) 595-7473         /         Outside U.S.: (213) 385-6161           Website: www.scptac.org         /         Email: info@scptac.org			

NOTE         Capitalized terms are defined in Section 15, page 12.	NOTE	Capitalized terms are defined in Section 15, page 12.
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## SECTION 2. COVERAGE AND CONTRIBUTIONS

You are eligible to participate in the Vacation and Holiday Plan if you are working in a job covered by a Collective Bargaining Agreement or Participation Agreement that requires contributions to the Plan and your Employer makes contributions to the Plan on your behalf as required by the agreement. The agreement determines the amount to be contributed. Employees of District Council No. 16, its affiliated local Unions, and other organizations related to the Union, are also eligible to participate in the Plan provided there is a Participation Agreement between the employing organization and the Fund. Generally, an Employer's employees are not covered by this Plan if they are not working under a Collective Bargaining Agreement.

All contributions made to the Plan on your behalf are placed in the trust fund for the benefit of all Plan Participants. The Trustees of the Plan establish and maintain an Individual Account for each Participant. You are qualified to receive a benefit from this Plan if your Employer has paid in contributions on your behalf for work covered by the Plan.

## SECTION 3. ENROLLMENT

When your Employer contributes to the Plan for hours worked, the contributions are credited to your Individual Account in the Plan. You will receive a statement from the Fund Office each quarter. You are automatically enrolled in the Plan when contributions are received on your behalf.

At the time you begin working, you should complete a Beneficiary Form. This form allows you to name a Beneficiary for the different funds you may participate in, including the Vacation & Holiday Fund. You may obtain a Beneficiary Form from any local Union office, the Fund Office, or the Fund Office website at <a href="http://www.scptac.org">www.scptac.org</a>.

IMPORTANT

If there is a change in your family status, such as marriage, divorce, or a change in status of a Beneficiary, or if your address changes, notify the Fund Office as soon as possible, but no later than 90 days after the change.

## SECTION 4. PLAN BASICS

The contributions paid by your Employer accumulate in your Individual Account. The Normal Benefit payment schedule of the Plan is a 12-month cycle ending with the work month of October of each year. Contributions for the work month of October are generally received in November. Therefore, the contributions received during the 12 months ending November 30th are normally paid out automatically: 30% in December and 70% in the following April. Any late payments received from December through March, for hours worked through October, will be paid in full the following April.

When you take an Interim Withdrawal, or choose the Monthly Benefit option, the amount of your Normal Benefit payments will be reduced or eliminated.

In addition to the contributions from your Employer, your Individual Account will share in any Surplus Income based upon the balance in your account as of November 30th. Your share of Plan expenses, as determined by the Trustees, will be deducted from your Individual Account if there is insufficient investment income, Monthly Benefit fees, and forfeitures to cover Plan expenses. In addition to Plan expenses shared by all Participants, if you select the Monthly Benefit option, a monthly fee will be deducted from your Individual Account. Your share of Plan expenses as determined by the Trustees may be deducted from your Individual Account.

IMPORTANT

You will only receive the amounts that have actually been contributed by your Employer. If your Employer fails to contribute to the Plan for the work that you perform, you will not receive those amounts unless and until the Fund Office has collected and processed the contributions from your Employer.

## SECTION 5. QUARTERLY STATEMENT

The Fund Office issues quarterly statements that you should carefully review. Any hours worked and contributions to or disbursements from your Individual Account will appear on these statements. The "Quarterly Statement Schedule" set forth below summarizes the statement cycle.

Quarterly Statement Schedule				
Hours Worked During:*	Deposits Processed During:	Date of Quarterly Statement		
January 1 <sup>st</sup> through March 31 <sup>st</sup>	February 1 <sup>st</sup> through April 30 <sup>th</sup>	May 1		
April 1 <sup>st</sup> through June 30 <sup>th</sup>	May 1 <sup>st</sup> through July 31 <sup>st</sup>	August 1		
July 1 <sup>st</sup> through September 30 <sup>th</sup>	August 1 <sup>st</sup> through October 31 <sup>st</sup>	November 1		
October 1 <sup>st</sup> through December 31 <sup>st</sup>	November 1 <sup>st</sup> through January 31 <sup>st</sup>	February 1		
* Delinquent reporting by the Employer will affect the work months that appear on the statement.				

## **SECTION** 6. BENEFIT PAYMENTS

There are two automatic Normal Benefit payments every year called the December Payment and the April Payment. There is also an early payment option called an Interim Withdrawal, and a Monthly Benefit. Benefit payments are disbursed as shown in the "Summary of Benefit Payment Options" chart and explained in more detail below. All benefits will be paid by check unless the appropriate direct deposit form is accurately and timely filed.

Only contributions received timely by the Fund from the Employer can be paid to you. The amount of your benefit also cannot exceed the Available Balance in your Individual Account. Contributions received by the Fund Office will be included in your Available Balance after the later of (1) the date the Fund Office has processed the contributions or (2) seven calendar days from the date the funds are deposited.

You can obtain any of the forms referred to in this section from the Fund Office, any local Union office, or online at <u>www.scptac.org</u>.

Summary of Benefit Payment Options				
Benefit Payment	Date of Payment	Amount of Payment	Forms Required	Fees Charged*
December Payment	Dec 1 <sup>st</sup> – Dec 10 <sup>th</sup>	30% of balance of contributions received through November	Automatic – no form required	No fee charged
April Payment	April 1 <sup>st</sup> – April 10 <sup>th</sup>	Remaining balance of contributions received through the previous November	Automatic – no form required	No fee charged
Interim Withdrawal	Only one Interim Withdrawal will be permitted each Calendar Year	100% of the Available Balance in your Individual Account	Request for Interim Withdrawal Form	No fee charged
Monthly Benefit Option	On or about the fifth business day of each month	100% of the Available Balance in your Individual Account, less administrative fees	Monthly Benefit Election Form	\$0.13 per work hour distributed
* Fees effective at the time of publication. The Trustees may change the fee at any time.				

#### A) Normal Benefit Option

The Normal Benefit is the default option under the Plan.

#### i) December Payment

During the period of December 1st through December 10th of each year, the December Payment will be issued to you equal to:

- a) 30% of the Available Balance in your Individual Account as of November 30th (generally for hours worked through the month of October); plus
- b) 30% of any Surplus Income posted to your Individual Account; and minus
- c) Any individual fees or amounts paid as an Interim Withdrawal or as a Monthly Benefit.

#### ii) April Payment

During the period of April 1st through April 10th of each year, the April Payment will be issued to you equal to:

- a) 70% of your Available Balance as of the prior November 30th; plus
- b) 70% of any Surplus Income posted to your Individual Account; and minus
- c) Any individual fees or amounts paid as an Interim Withdrawal or as a Monthly Benefit.

#### iii) Forms of Payment

You may choose to receive the Normal Benefit (December and April) payments via check or via direct deposit (ACH transfer) to your bank account.

- a) Via Check: The default option is to send a check to your address on file with the Fund Office.
- b) Via Direct Deposit: If you want your benefit to be paid by direct deposit to your bank account, you must submit a Normal Benefit Election Authorization Agreement for Direct Deposit, which includes a voided check (or deposit slip in the case of a savings account) which must be received by the Fund Office by the 20th day of the month before the month in which the benefit is paid. If the form is not received timely, a check will be issued to the address on file with the Fund Office. You need only submit the Normal Benefit Election Authorization Agreement for a Direct Deposit once, and it will remain in effect for all subsequent payments until you cancel it in writing.

#### **B) Interim Withdrawal Option**

You may receive the Available Balance in your Individual Account early by requesting an Interim Withdrawal. An Interim Withdrawal will disburse 100% of your Available Balance. Only one Interim Withdrawal will be permitted each Calendar Year. That one withdrawal will be free of charge. No other Interim Withdrawals will be permitted.

#### i) Application

To request an Interim Withdrawal, you must complete the Request for Vacation & Holiday Interim Withdrawal Form and submit it to the Fund Office. If the form is in proper order, the disbursement generally will be issued by the Fund Office within 14 calendar days of receipt of the request, except during the prohibited periods as described below.

Note that:

- a) Interim Withdrawals are not permitted from approximately November 20th through December 10th and from March 20th through April 10th of each year, due to the preparations necessary for processing the Normal Benefit.
- b) An Interim Withdrawal or Monthly Benefit may affect the amount of the Surplus Income allocated to your Individual Account. Any Surplus Income that is allocated to your account will be based upon the balance in your Individual Account as of November 30th. If the balance in your Individual Account as of November 30th is zero, or reduced due to an Interim Withdrawal or a Monthly Benefit, then you will receive no Surplus Income, or a reduced amount of Surplus Income.

#### ii) Forms of Payment

You may choose to receive your Interim Withdrawal via check or via direct deposit (ACH transfer) to your bank account.

- a) Via Check: The default option is to send a check to your address on file with the Fund Office. However, if you have provided direct deposit information for your Normal Benefit, your Interim Withdrawal will also be sent via direct deposit.
- b) Via Direct Deposit: If you have not previously provided direct deposit information for your Normal Benefit and you want your Interim Withdrawal to be paid by direct deposit to your bank account, you must submit with your application a Normal Benefit Election Authorization Agreement for Direct Deposit, which includes a voided check (or deposit slip in the case of a savings account). If the form is not received with your application, a check will be issued to the address on file with the Fund Office. You need only submit the Normal Benefit Election Authorization Agreement for a Direct Deposit once, and it will remain in effect for all subsequent payments until you cancel it, in writing.

#### IMPORTANT

During November 20th through December 10th and March 20th through April 10th Interim Withdrawals may be unavailable due to the preparations necessary for processing the Normal Benefit.

#### **C) Monthly Benefit Option**

You may receive the Available Balance in your Individual Account early by requesting the Monthly Benefit option. The Monthly Benefit option will disburse 100% of your Available Balance, less the Monthly Benefit fee described below, via direct deposit (ACH transfer) to your bank account. To request Monthly Benefit payments, you must complete the Monthly Benefit Election Form.

#### i) Application

To request the Monthly Benefit option, you must complete the Monthly Benefit Election Form and submit it to the Fund Office. The form and a voided check (or deposit slip in the case of a savings account) must be received by the Fund Office by the 20th day of the month in order for monthly direct deposit to begin the following month.

Note that:

- a) An Interim Withdrawal or Monthly Benefit may affect the amount of the Surplus Income allocated to your Individual Account. Any Surplus Income that is allocated to your account will be based upon the balance in your Individual Account as of November 30th. If the balance in your Individual Account as of November 30th is zero, or reduced due to an Interim Withdrawal or a Monthly Benefit, then you will receive no Surplus Income, or a reduced amount of Surplus Income.
- b) Once you are enrolled in the Monthly Benefit option, you will have no Interim Withdrawal option for the remainder of that Calendar Year.
- c) You may switch between the Normal Benefit option and the Monthly Benefit option at any time, by completing the required forms, subject to the deadlines established elsewhere in this section.

#### ii) Fee

Effective at the time of publication, the fee for the Monthly Benefit option was \$0.13 per hour distributed, which will be deducted from your benefit at the time of distribution. This fee is designed to insure that Participants who choose this option absorb the extra expense of this option in addition to their share of regular Fund expenses. The Trustees may change the fee at any time.

#### iii) Form of Payment

This benefit will only be paid via direct deposit (ACH transfer) to your bank account. The Fund Office will initiate a direct deposit to the account on or about the fifth business day of each month. The amount deposited will be the Available Balance of your Individual Account, less the fee referenced above.

	Direct Deposits		
	A direct deposit can only be made to a bank account of which you are the owner or a co-owner. No benefit payment will be made to any party other than you.		
NOTE	Your bank account must be open and capable of receiving deposits at the time of the direct deposit. If not, the money will be returned to the Fund and held until:		
	<ol> <li>You submit revised direct deposit information (in which case your benefit will be resent via direct deposit on the next available transfer date);</li> <li>You rescind your direct deposit instructions (in which case a check will be issued within 14 calendar days); or</li> </ol>		
	3. The next Normal Benefit (April or December) payment (in which case a check will be issued to your address on file with the Fund Office).		

	Vacation & Holiday Payment Cycle					
	Work Month	Deposit Date	Contribution Amount	Benefit Distributions	Balance in Individual Account	
	Nov 2018	12/10/2018	\$500.00		\$500.00	
	Dec 2018	01/10/2019	\$500.00		\$1,000.00	
	Jan 2019	02/10/2019	\$500.00		\$1,500.00	
	Feb 2019	03/10/2019	\$500.00		\$2,000.00	
	Mar 2019	04/10/2019	\$500.00		\$2,500.00	
	Apr 2019	05/10/2019	\$500.00		\$3,000.00	
	May 2019	06/10/2019	\$500.00		\$3,500.00	
	Jun 2019	07/10/2019	\$500.00		\$4,000.00	
	Jul 2019	08/10/2019	\$500.00		\$4,500.00	
	Aug 2019	09/10/2019	\$500.00		\$5,000.00	
	Sep 2019	10/10/2019	\$500.00		\$5,500.00	
EXAMPLE	Oct 2019	11/10/2019	\$500.00		\$6,000.00	
	Surplus Income	12/01/2019	\$30.00		\$6,030.00	
	December Payment	12/05/2019		- \$1,809.00	\$4,221.00	
	Nov 2019	12/10/2019	\$500.00		\$4,721.00	
	Dec 2019	01/10/2020	\$500.00		\$5,221.00	
	Jan 2020	02/10/2020	\$500.00		\$5,721.00	
	Feb 2020	03/10/2020	\$500.00		\$6,221.00	
	April Payment	04/05/2020		-\$4,221.00	\$2,000.00	
	Notes on this example:	Notes on this example:				
	<ul> <li>This example assumes that no Interim Withdrawals are taken and no Monthly Benefit payments are made.</li> <li>The accumulation period is for hours worked from November 2018 through October 2019. The total contributions during this period is \$6,000.00.</li> </ul>					
	*	<ul> <li>Surplus Income of \$30 posted to the Individual Account based on the balance as of 11/30/2019.</li> <li>The December Payment is 30% of the contributions paid plus 30% of the Surplus Income: \$6,030.00 x 30% = \$1,809.00.</li> </ul>				
	<ul> <li>The April Payment is the remaining 70% of the Individual Account at the time of the December Payment: \$4,221.00.</li> <li>The balance of \$2,000.00 left after the April Payment goes towards the accumulation for the next year's cycle and will be included in the payments issued in December 2020 and April 2021.</li> </ul>					

## **SECTION** 7. TAXATION OF BENEFITS

Contributions to the Vacation & Holiday Fund are included in your taxable income reported by your Employer and are reported on Form W-2. Your pro-rata share of any Surplus Income is considered taxable income to you.

## **SECTION** 8. DEATH BENEFITS & BENEFICIARIES

When you complete your Beneficiary Form you will designate one or more Beneficiaries to receive your benefits in the event of your death. If you die, the Available Balance in your Individual Account will be paid to your Beneficiary(ies). You may change your Beneficiary(ies) at any time by completing a new form.

If you do not designate a Beneficiary and submit the Beneficiary Form to the Fund Office before your death or if your Beneficiary dies before you do and no new Beneficiary Form is timely submitted to the Fund Office, the benefit will be paid to the following in order of priority:

- A) First, to your Spouse, if any;
- B) Second, to your child(ren), if you have no surviving Spouse;
- C) Third, to your parent(s), if you have no surviving Spouse or child(ren);

- D) Fourth, to your sibling(s) (brothers and sisters), if you have no surviving Spouse, child(ren), or parent(s); or
- E) Fifth, to your estate, if you have no surviving Spouse, child(ren), parent(s), or sibling(s).

If you designate your Spouse as your Beneficiary and subsequently get divorced, your former Spouse is automatically revoked as the Beneficiary upon the date of divorce. Therefore, it is important that you complete a new Beneficiary Form following a divorce, particularly if you want your former Spouse to remain your Beneficiary.

**IMPORTANT** 

If there is a change in your family status, such as marriage, divorce, or a change in status of a Beneficiary, or if your address changes, notify the Fund Office as soon as possible, but no later than 90 days after the change.

## SECTION 9. PLAN EXPENSES AND INVESTMENT INCOME

Income earned from Plan investments, if any, plus Monthly Benefit fees, plus forfeited benefits, go into a general fund from which reasonable and necessary expenses of operating the Plan are deducted. The remaining balance after paying the expenses of the Plan, if any, less a small amount held in reserve, is called the Surplus Income. If there are insufficient investment income, forfeited benefits, Monthly Benefit fees, and unclaimed benefits to pay the Plan's operating expenses, expenses will be paid by a pro-rata reduction from each Participant's Individual Account.

The amount of Surplus Income is calculated based upon the Plan's operations for the 12 months ending November 30th.

Surplus Income, if any, is credited to your Individual Account just prior to the December Payment. It is distributed on a pro-rata basis based on the account balances as of November 30th. An Interim Withdrawal or Monthly Benefit payment prior to November 30th will affect the amount of Surplus Income received.

NOTE

The Surplus Income, if any, of the Plan is allocated to all the Individual Accounts on a pro-rata basis. That means that the larger your balance as of November 30th, the larger your share of the Surplus Income will be.

## **SECTION** 10. FORFEITURE OF UNCLAIMED BENEFITS

Any contributions or Surplus Income that have been credited to an Individual Account and not withdrawn or claimed by the Employee or Beneficiary within two years following the end of the Plan Year the account was credited, will be forfeited to the Fund. No Employer or Union, nor any Employee or Beneficiary, nor any person, firm or association other than the Fund, has any right, title or interest in such monies. These forfeited benefits will be included as income to the Fund and will be used to defray Plan expenses with any balance included in the calculation of the next Surplus Income distribution.

## SECTION 11. DEDUCTIONS FROM BENEFITS

Your benefits may be subject to a lien or levy if a legal court order is received by the Fund. The Fund will provide you with a remittance notice of any payments made toward the lien or levy.

The Trustees may permit participants to authorize, in writing, deductions from distributions made to them from the Plan to an Employer or the Union, for funding established programs generally funded by employee or member contributions. Any such Participant authorizations are entirely voluntary and may be revoked at any time. Any such authorized deductions will only be made at the time a distribution is made from the Plan. Only those deductions approved by the Trustees, at the request of an Employer or the Union, are permissible. The Fund Office will provide information to participants on permissible deductions upon request.

## SECTION 12. APPLICATION AND APPEALS PROCEDURE

This Plan includes a claims and appeal procedure that must be followed. Be sure to read it carefully before filing a claim or a lawsuit involving the Plan, the Board of Trustees, or the Fund. The purpose of the appeals procedure is to make it possible for claims and disputes to be resolved fairly and efficiently without costly litigation.

#### A) Processing a Claim for Benefits

The Fund will treat any application or written request for a Plan benefit or any other written claim for Fund action made by you or your authorized representative in accordance with the procedures described in this SPD as a "claim for benefits". You have the right to appeal any Fund decision regarding the amount or timing of a benefit or any other Fund decision affecting your rights under the Plan using the procedures set forth below.

Except for benefits from the Fund that are paid automatically, in order to make a claim for benefits, you must obtain an application form from the Fund Office. The form must be completed, signed and submitted to the Fund Office. A claim will be treated as submitted on the date it is received by the Fund Office. If your application is incomplete, you will be notified as soon as possible with a written request for additional information.

Every effort will be made to process your claim within 90 days after its receipt by the Fund Office. This 90-day period will begin upon receipt of the completed and signed application form by the Fund Office without regard to whether all of the information necessary to decide the application has been submitted.

If a decision on your claim for benefits cannot be made within 90 days of its receipt, a letter will be sent to you, prior to the expiration of the 90 days, explaining the special circumstances requiring another 90 days to take action. If final action cannot be taken at the end of the second 90-day period, you will be sent a written explanation in advance of the expiration of the second 90-day period. Where appropriate, you will be awarded any partial benefits that can be determined with the available information. If partial benefits cannot be awarded because of a lack of necessary information, the Fund Office will conditionally deny your claim. The Fund Office will continue to seek the necessary information to make a final determination.

#### **B) Notice of Decision on Your Claim**

If your claim for benefits is denied, in whole or in part, the Fund Office will provide you with a written notice that states (1) the specific reason(s) for the denial, (2) refers to the specific Plan provisions on which the denial is based, (3) describes any additional material or information that might help your claim, (4) explains why that information is necessary, and (5) describes the Fund's review procedures and applicable time limits, including a right to bring a lawsuit under Section 502(a) of ERISA.

#### C) Appealing a Benefit Denial

If your claim for benefits is denied, in whole or in part, you may request that the Board of Trustees review the benefit denial. The Board of Trustees has delegated the responsibility to decide appeals to its Appeals Committee. (In some cases, the Board of Trustees may decide to consider an appeal, and in other cases the Appeals Committee may delegate the responsibility to consider an appeal to a subset of the Committee.) All appeals must be in writing and must be received by the Fund Office within 180 calendar days after you receive the written notice of the denial from the Fund Office. Failure to file a timely written appeal shall constitute a complete waiver of your right to appeal, and the decision of the Fund Office will be final and binding.

In presenting your appeal, you have the opportunity to submit written comments, documents, records, and other information relating to your claim. You are also entitled to receive, upon request and free of charge, reasonable access to, and copies of, all documents, records, and other information relevant to your claim. Personal appearances on appeals are at the discretion of the Appeals Committee.

Your written appeal should state the specific reasons why you believe the denial of your claim was in error. You should also submit any documents or records that support your claim. This does not mean that you are required to cite all of the Plan provisions that apply or to make "legal" arguments; however, you should state clearly why you believe you are entitled to the benefits or other relief you are claiming. The Appeals Committee can best consider your position if it clearly understands your claims, reasons, or objections.

The review of the Appeals Committee will take into account all comments, documents, records, and other information that you submit, without regard to whether such information was submitted or considered by the Fund Office in its determination. The Appeals Committee will also not afford deference to the initial determination by the Fund Office.

The Fund Office maintains records of determinations on appeal and Plan interpretations so that those determinations and interpretations may be referred to in future cases with similar circumstances.

The Appeals Committee will meet at least once each quarter to review pending appeals. The decision of the Appeals Committee will be made by the meeting immediately following the date the appeal is received by the Fund Office. If the appeal is received during the 30 days preceding the meeting, the decision will not be made until the second meeting following receipt of the appeal. The time for processing an appeal may be extended in special circumstances by written notice to you prior to the beginning of the extension. Such an extension may only last until the third meeting following receipt of the appeal.

#### **D)** Notice of Decision on Appeal

Written notice of the decision of the Appeals Committee will be sent within five days from the date of the meeting at which the appeal was reviewed.

If your appeal is denied, in whole or in part, you will receive a written decision that will include: (1) the specific reason(s) for the denial; (2) the specific Plan provisions on which the denial is based; (3) a statement that you are entitled to receive, upon request and free of charge, reasonable access to, and copies of, all documents, records, and other information relevant to your appeal; and (4) a statement of your right to bring a lawsuit under Section 502(a) of ERISA.

#### E) The Decision on Appeal is Final and Binding

The decision of the Appeals Committee is final and binding on all parties, including anyone claiming a benefit on your behalf.

Once a final decision is rendered there is no right to re-file the same appeal, or request reconsideration, and if such an appeal or request for reconsideration is filed the Appeals Committee may refuse to consider it.

The Board of Trustees and, by delegation, the Appeals Committee, has full discretion and authority to determine all matters relating to appeals including, but not limited to, eligibility for benefits, the amount of benefits to which individuals are entitled, the standard of proof required for any claim and the application and interpretation of the Plan. The Board of Trustees has ultimate authority to hear any appeal and has generally delegated this authority to the Appeals Committee to decide appeals. However, the Board of Trustees has the right and authority to hear any appeal and in such case the rights and procedures set forth herein shall apply equally to the Board of Trustees.

If the Appeals Committee denies your appeal, and you decide to seek judicial review, the Appeals Committee's decision will be subject to limited judicial review to determine only whether the decision was arbitrary and capricious. Generally, no lawsuit may be brought without first exhausting the above claims and appeals procedure, nor may any evidence be used in court unless it was first submitted to the Appeals Committee prior to the decision on your appeal. No legal action may be commenced against the Trust, the Plan, or the Trustees more than two years after the claim has been denied on appeal.

#### F) Right to Be Represented

In making a claim or appeal, you may be represented by any authorized representative. If your representative is not an attorney or court appointed guardian, you must designate the representative by a signed written statement. However, neither you nor your representative has a right to an in-person hearing or appearance before the Trustees or the Appeals Committee.

#### G) Any Adverse Decision May be Appealed

The recipient of any written correspondence from the Fund Office that could be interpreted as adversely affecting the recipient's interest may appeal to the Appeals Committee for a determination of the content of that correspondence. Such a request for review must be in writing and must be made within 180 calendar days after receipt of the correspondence from the Fund Office. Such appeals will be processed in the same manner as appeals from determinations on benefit applications.

## SECTION 13. IMPORTANT NOTICES

#### A) No Assignment of Benefits

You may not pledge your Individual Account as security for a loan or any other purpose. You may not assign your benefit to any other individual, entity or party. Also, as a welfare benefits plan, the Vacation & Holiday Fund does not recognize Qualified Domestic Relations Orders and will not pay benefits to a former Spouse or any alternate payee under a Qualified Domestic Relations Order.

#### **B) Erroneous Payments**

Every effort will be made to ensure accuracy in the payment of your benefits. If an error is discovered, regardless of how long ago it occurred, and it is determined that the Fund has paid any benefits that you are not entitled to, you are obligated to reimburse the Fund for the erroneous payments. The Trustees have the right to seek repayment from you through any legal means, including the right to reduce future benefit payments by the amount of the erroneous payment.

#### **C) Misrepresentation or Fraud**

If you receive benefits as a result of false information or a misleading or fraudulent representation, you will be required to repay all erroneous amounts paid by the Fund and you will be liable for all costs of collection including attorneys' fees. The Trustees have the right to seek repayment from you through any legal means, including the right to reduce future benefit payments by the amount of the payment made because of fraud or misrepresentation.

## SECTION 14. INFORMATION REQUIRED BY ERISA

The following additional information concerning the Plan is provided to you in accordance with the Employee Retirement Security Act of 1974 (ERISA). The terms in this section are generally as defined in ERISA, unless capitalized.

#### A) Name and Type of Plan

The name of the Plan is the Southern California Pipe Trades Vacation & Holiday Plan. It is a multiemployer welfare benefit plan.

#### **B) Identification Numbers**

The Fund's Internal Revenue Service tax identification number is 95-6097354. The Plan number is 502.

#### C) Plan Year

The Plan Year is the Calendar Year from January 1st through December 31st.

#### D) Plan Sponsor, Named Fiduciary, and Administrator

The Plan is maintained pursuant to a collectively bargained, jointly trusteed labor-management trust. The Board of Trustees is the plan sponsor, the legal plan administrator, and the named fiduciary under ERISA.

#### E) Board of Trustees

The Board of Trustees consists of Employer and Union representatives, selected by the Employers and Unions, in accordance with the Trust Agreement that relates to this Plan. If you wish to contact the Board of Trustees, you may do so at:

Board of Trustees Southern California Pipe Trades Vacation & Holiday Fund 501 Shatto Place, Suite 500 Los Angeles, CA 90020 (800) 595-7473 (213) 385-6161 www.scptac.org info@scptac.org

#### F) Fund Office

The Board of Trustees has designated the Southern California Pipe Trades Administrative Corporation to perform the daily business functions of the Plan. You may contact the Fund Office at:

Southern California Pipe Trades Administrative Corporation	(800) 595-7473
Attention: Joel Brick	(213) 385-6161
501 Shatto Place, Suite 500	www.scptac.org
Los Angeles, CA 90020	info@scptac.org

#### G) Agent for Service of Legal Process

The name and address of the agent designated for the service of legal process is:

Southern California Pipe Trades Vacation & Holiday Fund Attention: Joel Brick 501 Shatto Place, Suite 500 Los Angeles, CA 90020

Service of legal process may also be made upon a plan trustee or the plan administrator.

#### H) Source of Contributions

All contributions to the Fund are made by Employers in accordance with their Collective Bargaining Agreements or in accordance with the terms of a Participation Agreement. The Collective Bargaining Agreements and Participation Agreements require that contributions be made to the Fund at fixed rates per hour of work.

The Fund Office will provide you, upon written request, a complete list of Employers and Unions that are parties to Collective Bargaining Agreements and their addresses. The Fund Office will also provide information about whether a particular employer is obligated to contribute to the Fund on behalf of employees working under a Collective Bargaining Agreement or Participation Agreement and the address of any such employer.

The Fund's assets are held in trust by the Board of Trustees. Custody of the Fund's assets is with U.S. Bank, N.A. Benefits are provided directly from the Fund's assets, which are accumulated under the provisions of the Trust Agreement. The assets are used exclusively for providing benefits to participants and beneficiaries in accordance with the provisions of the Plan, and for paying the reasonable administrative expenses of the Fund.

All of the types of benefits provided by the Plan are set forth in this SPD.

#### I) Collective Bargaining Agreement

Contributions to the Fund are made in accordance with Collective Bargaining Agreements between Employers and District Council No. 16 of the United Association or affiliated local Unions of District Council No. 16 or of the United Association. The United Association local Unions affiliated with District Council No. 16 are numbers 78, 114, 230, 250, 345, 364, 398, 403, 460, 484, 582 and 761. The Fund Office will provide you, upon written request, a copy of the applicable Collective Bargaining Agreement. The Collective Bargaining Agreements are also available for examination at the Fund Office. The following are the employer associations with which District Council No. 16 has a bargaining relationship which requires contribution to this Fund:

- i) California Plumbing & Mechanical Contractors Association (CPMCA);
- ii) Airconditioning, Refrigeration and Mechanical Contractors Association of Southern California, Inc. (ARCA/MCA); and
- iii) Mechanical Service Contractors of San Diego (MSCSD).

#### J) Plan Termination

It is intended that this Plan will continue indefinitely, but the Board of Trustees reserves the right to change and/or discontinue the Plan at any time. The Trustees may terminate the Plan by a document in writing adopted by a majority of the Union Trustees and a majority of the Employer Trustees if, in their opinion, the Fund is not adequate to carry out its intended purpose or is not adequate to meet the payments due or which may become due. The Plan may also be terminated if there are no individuals living who can qualify as participants or beneficiaries under the Plan or if there are no longer any Collective Bargaining Agreements requiring contributions to the Fund. The Trustees have the complete discretion to determine when and if the Fund should be terminated.

If the Plan is terminated, the Trustees will: (i) pay the expenses of the Fund incurred up to the date of termination as well as the expenses in connection with the termination; (ii) arrange for a final audit of the Fund; (iii) give any notice and prepare and file any reports required by law; and (iv) apply the assets of the Fund in accordance with the law and the Plan, including amendments adopted as part of the termination, until the assets are distributed, including paying benefits to the Participants or Beneficiaries. Under no circumstances will any portion of the Fund revert to the benefit of an Employer, any employer association, or the Union.

Upon termination of the Plan and Fund, the Trustees will promptly notify the Union, any employer association, Employers, and all other interested parties. The Trustees will continue as Trustees for the purpose of winding up the affairs of the Plan.

#### **K)** Actions of Trustees

The Trustees have full discretion and authority over the standard of proof for any inquiry, claim, or appeal, and over the application and interpretation of the Plan and trust. No legal proceeding may be filed in any court or before an administrative agency against the Plan or its Trustees, unless all review procedures with the Trustees have been exhausted. No legal action may be commenced against the trust, the Plan, or the Trustees more than two years after a claim has been denied on appeal.

#### L) Right to Amend

The Trustees have the complete discretion to amend or modify the Plan or Trust Agreement, and any of their provisions, in whole or in part, at any time.

#### **M) ERISA Rights**

As a participant in the Southern California Pipe Trades Vacation & Holiday Plan, you are entitled to certain rights and protections under the Employee Retirement Income Security Act of 1974 (ERISA). ERISA provides that all Plan participants shall be entitled to:

#### i) Receive Information about Your Plan and Benefits

a) Examine, without charge, at the plan administrator's office and at other specified locations, such as worksites and union halls, all documents governing the Plan, including insurance contracts and collective bargaining agreements, and a copy of the latest annual report (Form 5500 Series) filed by the Plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration.

- b) Obtain, upon written request to the plan administrator, copies of documents governing the operation of the Plan, including insurance contracts and collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and an updated summary plan description. The administrator may make a reasonable charge for the copies.
- c) Receive a summary of the Plan's annual financial report. The plan administrator is required by law to furnish each participant with a copy of this summary annual report.

#### ii) Prudent Actions by Plan Fiduciaries

In addition to creating rights for Plan participants, ERISA imposes duties upon the people who are responsible for the operation of the Plan. The people 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 and beneficiaries. No one, including your employer, your union, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a welfare benefit or exercising your rights under ERISA.

#### iii) Enforce Your Rights

If your claim for a welfare benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules.

Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of Plan documents or the latest annual report 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 plan administrator to provide the materials and 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 plan administrator. If you have a claim for benefits that is denied or ignored, in whole or in part, you may file suit in a state or Federal court. In addition, if you disagree with the Plan's decision or lack thereof concerning the qualified status of a domestic relations order or a medical child support order, you may file suit in 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.

#### iv) Assistance with Your Questions

If you have any questions about your Plan, you should contact the plan administrator. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the plan administrator, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, D.C. 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

#### IMPORTANT

None of the benefits described in this SPD/Rules & Regulations are insured by any contract of insurance and there is no liability on the part of the Board of Trustees or any individual or entity to provide payment over and above the amounts in the Fund collected for such purpose.

### SECTION 15. DEFINITIONS

#### **Appeals Committee**

A subset of the Board of Trustees empowered to review any claims as described in Section 12.

#### **April Payment**

The Normal Benefit payable in April. See Section 6(A)(ii), page 4.

#### **Available Balance**

The portion of your Individual Account that has been on deposit with the Plan for at least seven days.

#### **Beneficiary**

A Beneficiary is a person designated by you or by the Plan to receive benefits when you die.

#### **Board of Trustees**

All of the Trustees established as one body pursuant to the Trust Agreement.

#### **Calendar Year**

Calendar Year means January 1st through December 31st of each year.

#### **Collective Bargaining Agreement**

Any and all negotiated labor agreements between an Employer, or employer association acting on behalf of Employers, and Southern California Pipe Trades District Council No. 16 of the United Association of Journeymen and Apprentices of the Plumbing and Pipe Fitting Industry of the United States and Canada ("United Association"), or any local union affiliate of the District Council that requires contributions to the Southern California Pipe Trades Retirement Fund. It also refers to an agreement, to which the United Association is a party, requiring contributions to the Fund.

#### **December Payment**

The Normal Benefit payable in December. See Section 6(A)(i), page 4.

#### **Employee**

An Employee is anyone employed by a Contributing Employer in a position for which the Employer makes contributions to the Fund under a Collective Bargaining Agreement. Employees may also include an Employer or someone employed by an organization signatory to a Participation Agreement.

#### **Employer**

An Employer signed to a Collective Bargaining Agreement or Participation Agreement, or an Employer that assigns its bargaining rights to an employer association signed to a Collective Bargaining Agreement, that requires contributions to the Fund.

#### **ERISA**

Employee Retirement Income Security Act of 1974, as amended. See Section 14(M), page 11 for an explanation of your ERISA rights.

#### Fund

The Southern California Pipe Trades Vacation & Holiday Fund created by the Trust Agreement establishing that Fund.

#### **Fund Office**

Southern California Pipe Trades Administrative Corporation	(800) 595-7473
501 Shatto Place, Suite 500	(213) 385-6161
Los Angeles, CA 90020	www.scptac.org
	info@scptac.org

#### **Individual Account**

The account established in the Plan for each Participant. The balance of your Individual Account equals all contributions made by your Employer, plus any Surplus Income allocated to you, less any Plan expenses, Monthly Benefit option fees, and any individual fees.

#### **Interim Withdrawal**

A voluntary withdrawal of 100% of your Individual Account balance, permitted once during each Calendar Year. See Section 6(B), page 4.

#### **Monthly Benefit**

A voluntary option to withdraw 100% of your Individual Account balance each month, for a fee. See Section 6(C), page 5.

#### **Normal Benefit**

The automatic benefit paid by the Plan. Contributions received during the twelve months ending November 30th are paid 30% in December and 70% in the following April. See Section 6(A), page 4.

#### **Participant**

An Employee who has satisfied the rules to become eligible under the terms of the Plan.

#### **Participation Agreement**

An agreement approved by the Board of Trustees permitting a Contributing Employer or a related organization, whose participation in the Fund has been approved by the Board of Trustees, to pay contributions to the Plan for Employees who are not covered by a Collective Bargaining Agreement.

#### Plan

The benefits, rules, limitations, exclusions, and other provisions described in this SPD.

#### **Plan Year**

January 1st through December 31st of each year.

#### SPD

Summary Plan Description. This document. A summary of the provisions of, and benefits available under, the Southern California Pipe Trades Vacation & Holiday Fund.

#### Spouse

Any person to whom a Participant was legally married at the time of the Participant's death.

#### **Surplus Income**

Investment earnings, plus forfeitures, plus Monthly Benefit fees, less Plan expenses, less a small amount held in reserve.

#### **Trust Agreement**

The written document titled "Restated Agreement and Declaration of Trust Continuing the Southern California Pipe Trades Vacation and Holiday Fund" pursuant to which the Fund has been established and maintained and to which this Plan has been adopted and any amendments thereto.

#### **Trustees**

Employer and Union representatives designated under the Trust Agreement as the individuals responsible for overseeing and administering the Fund.

#### Union(s)

Southern California Pipe Trades District Council No. 16 of the United Association of Journeymen and Apprentices of the Plumbing and Pipe Fitting Industry of the United States and Canada, AFL-CIO ("United Association"), and its affiliated local Unions, and such other unions which have or may in the future become parties to and agree to be bound by the Trust Agreement.

## SECTION 16. TRUSTEES

The following is a list of the Trustees as of the publication date of this SPD. The members of the Board of Trustees may change from time to time. If you want a current listing of the Trustees, contact the Fund Office.

#### A) Employer Trustees

#### WALTER SCOTT BAKER

Kinetic Systems, Inc. 1620 S. Sunkist Street Anaheim, CA 92806

DON CHASE Muir-Chase Plumbing Co., Inc. 4530 Brazil Street Los Angeles, CA 90039

JOHN FEIKEMA (seated February 13, 2019) California Spectra Instrumentation, Inc. 21818 S. Wilmington Avenue, Suite 402 Carson, CA 90810

#### **ROBERT FELIX**

All Area Plumbing/ACCO Engineered Systems, Inc. 6446 E. Washington Blvd. Commerce, CA 90040

JASON GORDON (seated February 13, 2019) Xcel Mechanical Systems, Inc. 1710 W. 130th Street Gardena, CA 90249

**KEN GREER** (seated February 13, 2019) Murray Company 18414 South Santa Fe Avenue Rancho Dominguez, CA 90221

**CHIP MARTIN** CPMCA 3500 West Olive, Suite 860 Burbank, CA 91505

JOHN MODJESKI University Mechanical & Engineering Contractors 1290 N. Hancock Street, Suite 100 Anaheim, CA 92807

BRYAN SUTTLES Suttles Plumbing

2267 Agate Court Simi Valley, CA 93065

LAWRENCE VERNE Verne's Plumbing, Inc. 8561 Whitaker Street Buena Park, CA 90621

**DAVID ZECH** Pacific Plumbing Company 615 E. Washington Avenue Santa Ana, CA 92701

#### **B) Union Trustees**

#### SHANE BOSTON

U.A. Local No. 484 1955 N. Ventura Avenue Ventura, CA 93001

**RODNEY COBOS** (seated May 8, 2019) District Council No. 16 501 Shatto Place, Suite 400 Los Angeles, CA 90020

JEREMY DIAZ (seated August 23, 2019) U.A. Local No. 78 1111 W. James M. Wood Blvd. Los Angeles, CA 90015

#### STEVEN GOMEZ

U.A. Local No. 460 6718 Meany Avenue Bakersfield, CA 93308

#### MIKE HARTLEY

U.A. Local No. 230 6313 Nancy Ridge Drive San Diego, CA 92121

RAY LEVANGIE, JR.

U.A. Local No. 398 8590 Utica Avenue, Suite 200 Rancho Cucamonga, CA 91730

**GREG LEWIS** (seated May 8, 2019) U.A. Local No. 761 1305 North Niagara Street Burbank, CA 91505

#### MICHAEL LOPEZ

U.A. Local No. 114 93 Thomas Road Buellton, CA 93427

#### ANTHONY NOVELLO

U.A. Local No. 582 1916 W. Chapman Avenue Orange, CA 92868

#### **RICARDO PEREZ**

U.A. Local No. 345 1430 Huntington Drive Duarte, CA 91010

#### AL POWERS

U.A. Local No. 364 223 S. Rancho Avenue Colton, CA 92324

#### **GLENN SANTA CRUZ**

U.A. Local No. 250 18355 South Figueroa Street Gardena, CA 90248

#### JEFF THOMAS

U.A. Local No. 403 3710 Broad Street San Luis Obispo, CA 93401