

Central Illinois Carpenters Retirement Savings Fund

Summary Plan Description

2021 Edition

Central Illinois Carpenters Retirement Savings Fund

200 South Madigan Drive
Lincoln, Illinois 62656
(217) 732-1919
(217) 732-7799 (Fax)

Board of Trustees

Union Trustees

R. Nathan German, Chairman
Robert J. Finneran
Jacob Moody

Employer Trustees

James L. Hein, Secretary
Bobby Taylor
Steve Aupperle

Plan Administrator

The Board of Trustees of the Central Illinois Carpenters Retirement Savings Fund
200 S. Madigan Drive
Lincoln, Illinois 62656
Phone: (217) 732-1919

Administrative Manager

Missy Sallee
200 S. Madigan Drive
Lincoln, Illinois 62656
Phone: (217) 732-1919

Legal Counsel

Cavanagh & O'Hara LLP

Fund Auditor

Romolo & Associates, CPA

Consultant

Segal Consulting

This is the 2021 edition of the Summary Plan Description and is based on all amendments made to the Plan through the date of printing of this booklet. Information in this booklet applies to all participants who become eligible for benefits or who Retire on or after May 1, 2021. The eligibility and/or benefits of an individual who Retired before May 1, 2021 are determined in accordance with the provisions of the Plan in effect at that time.

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INTRODUCTION

The Central Illinois Carpenters Retirement Savings Fund (the “Fund”, “Plan,” or “Retirement Savings Plan”) is designed to provide you with a source of financial income during retirement.

When you become a participant in the Retirement Savings Plan, an “individual account” is established in your name. Employer contributions are made on your behalf to your individual account. You are always 100% vested in, or entitled to, the money in your account. Your account balance includes Employer contributions made on your behalf and investment earnings and/or losses. The expenses of operating the Retirement Savings Plan are subtracted from all individual accounts.

The Trustees are responsible for investing the assets of the Fund. The Trustees intend to make every effort to invest the assets to produce favorable earnings. However, the investment results are not guaranteed.

Please take some time to review this booklet. If you’re married, share the information in this booklet with your spouse. If you have any questions about the Retirement Savings Plan, contact the Fund Office at 217-732-1919.

Nothing in this booklet is meant to interpret or change in any way the provisions expressed in the Plan Document. If there is a discrepancy between the wording in this Summary Plan Description and the Plan Document, the Plan Document will govern. Only the full Board of Trustees has the discretion and authority to interpret the Retirement Savings Plan described in this booklet. No Employer, Union or any representative of any Employer or Union, in such capacity, is authorized to interpret the Retirement Savings Plan nor can any such person act as agent of the Trustees. The Trustees reserve the right to amend, modify or discontinue all or part of the Retirement Savings Plan whenever, in their judgment, conditions so warrant.

RETIREMENT SAVINGS PLAN HIGHLIGHTS

The information below highlights some of the features of the Retirement Savings Plan. Detailed information is provided later in the booklet.

<i>Becoming a Participant</i>	<ul style="list-style-type: none"> ■ You become a participant on the first day for which at least one hour of contributions is required on your behalf for your work in covered employment. ■ You are always 100% vested in, or entitled to, the money in your individual account. However, you need to meet certain eligibility requirements before you are able to withdraw the money in your account.
<i>Your Retirement Plan Account</i>	<ul style="list-style-type: none"> ■ When you first become a participant, an individual Retirement Savings Plan account is established in your name. ■ The Trustees direct how your Employer contributions will be invested. ■ Your account is valued each April 30th. ■ Your account balance reflects contributions made on your behalf, investment earnings and/or losses and Retirement Savings Plan administrative expenses. ■ Each year you will receive a statement showing the balance of your account.
<i>Eligibility For Benefits</i>	<p>In general, you become eligible for benefits when you:</p> <ul style="list-style-type: none"> ■ Retire at or after age 55; ■ Qualify for a hardship distribution; ■ Die; ■ Become totally and permanently Disabled; ■ No employer contributions to the Plan are made on your behalf and you have not worked in covered employment for which contributions are due to the Fund for at least 12 consecutive months; or ■ You reach the Plan's Required Beginning Date.
<i>Choosing How Your Retirement Savings Plan Benefit Is Paid</i>	<p>The Retirement Savings Plan offers the following forms of payment:</p> <ul style="list-style-type: none"> ■ One partial distribution every twelve (12) months (Minimum Distribution Amount is \$5,000.00); ■ Lump sum; or ■ The amount that qualifies for a hardship distribution (Minimum Hardship Distribution Amount must be greater than \$2,000.00).
<i>In The Event Of Your Death</i>	<p>In the event of your death, your benefits will be paid as follows:</p> <ul style="list-style-type: none"> ■ If you are married at the time of your death, the benefit will be paid to your spouse as a lump-sum payment, unless you and your spouse previously agree in writing to have the lump-sum made to a designated beneficiary. ■ If you are not married at the time of your death, your benefit will be paid to your designated beneficiary (or beneficiaries, if applicable) as a lump-sum payment. ■ If you are not married at the time of your death and you fail to name a beneficiary or your beneficiary does not survive you, then your benefit will be paid to your estate.

BEGINNING WORK

Becoming A Participant

You become a participant on the first day for which an hour of contributions is made on your behalf for an hour of service that you perform in covered employment. Participation begins automatically; you do not need to complete any enrollment forms. However, it is important to designate a beneficiary (see below) and be sure to notify the Fund Office if your address changes.

Covered employment means employment for which your Employer is required to contribute to the Retirement Savings Plan on your behalf.

Vesting

You are always 100% vested in, or entitled to, the money in your individual account.

Naming A Beneficiary

When your participation begins, you need to complete a beneficiary designation form. You may name one or more beneficiary(ies) who will receive your Plan individual account balance in the event of your death.

To change or update your beneficiary information, you need to complete a beneficiary designation form. To obtain a copy of this form, please contact the Fund Office at 217-732-1919.

If you're married, your spouse will automatically be your beneficiary unless he or she consents in writing to your naming someone else as your beneficiary. Your spouse's signature must be witnessed by a notary public to be valid. If you revoke your election, your spouse automatically becomes your beneficiary once again. If you later decide to change your beneficiary, you will need your spouse's written consent, witnessed by a notary public.

In the event your marriage is legally terminated by divorce, then any prior beneficiary designation naming your former Spouse as beneficiary (but not other beneficiary designations) shall be null and void. If your former Spouse was named as one of multiple beneficiaries, then the former Spouse's share shall be allocated between or among the other beneficiaries in proportion to their shares. If your former Spouse was the sole beneficiary (and you fail to designate a new beneficiary), then your individual account balance will be subject to the Plan's rules that apply if you have not designated a beneficiary. If you desire to retain your former Spouse as your beneficiary after you get divorced, then you must complete a new beneficiary designation form after the marriage is legally terminated by divorce, listing such former Spouse as beneficiary.

The last beneficiary designation on file with the Fund Office shall govern the distribution of your entire balance, including any amounts received through a merger or transfer of assets.

If you should die without a valid beneficiary designation, payments will be made to your estate.

For a beneficiary designation to be effective, it must be completed correctly and on file with the Fund Office at the time of your death. You may change your beneficiary designation at any time. To obtain the necessary form, please contact the Fund Office at 217-732-1919.

YOUR RETIREMENT SAVINGS PLAN ACCOUNT

Individual Accounts

An individual account is set up for you after you become a Plan participant. All Employer contributions received on your behalf are attributed to your account. Any investment earnings/losses and administrative expenses are allocated to your account.

Your account balance increases when your Employer makes additional contributions to your account and when there are investment earnings and/or interest. However, your account can decrease if the value of your investments decreases. In addition, each participant shares in administrative expenses, which are also deducted from your account.

Valuation Date

The value of your account is calculated as of April 30th of each year. The value of your individual account includes Employer contributions, plus investment earnings and/or losses, minus your pro-rata share of administrative expenses and any distributions you received. Administrative expenses are distributed across all participants' accounts; however, any expense incurred by the Fund or Plan as a result of the review or consideration of legal pleadings or other documents in connection with a benefit distribution or any other expense that is specified in the Plan Document as an individual expense shall be charged directly against your individual account.

As soon as administratively feasible, you will receive a statement once each year that shows the value of your account, any earnings and/or losses and administrative expenses.

Military Service

If you leave covered employment to serve in the military, Employer contributions may be made to your account for the time you spend in service, up to five years (or longer if required under federal law). Any contributions may be made to your account upon your return to work. No investment earnings are credited for the period of time in the military.

To be eligible to receive these contributions, your military service must be qualified service as defined under the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA). You must also meet all USERRA regulations and apply for reemployment within the time period USERRA requires.

If you die while in qualified military service as defined in the Uniformed Services Employment Rights and Reemployment Act (USERRA), then eligibility for any death benefits under the Plan shall be determined as if you had returned to Covered Employment the day before your death. Effective for years beginning after December 31, 2008, Compensation shall include military differential wage payments (as defined in Section 3401(h) of the Internal Revenue Code.) The intent of this provision is to comply with the mandatory provisions of the Heroes Earnings Assistance and Relief Tax Act of 2008 ("HEART Act").

The value of your individual account equals:

- Employer contributions;
- Plus or minus any investment earnings or losses;
- Minus administrative expenses;
- Minus any distributions.

You will receive an annual statement that shows the value of your Retirement Savings Plan account. Please file these statements in a safe place for future reference.

Employer contributions may be made to your account for time that you spend in the military.

If you die on or after January 1, 2007 while performing qualified military service (as defined in Code §414(u)(5)), the period of such Participant's qualified military service shall be treated as Vesting Service under the Plan.

Contact your Employer or the Fund Office for additional information.

PAYMENT OF BENEFITS

Because the Retirement Savings Plan is designed to provide retirement income, certain rules apply as to when you become eligible to receive the money in your account and how your benefits will be paid.

Eligibility

1. Regular Retirement

Generally, you are eligible to receive a benefit from the Retirement Savings Plan if you retire at or after age 55 and stop working in covered employment in the geographical jurisdiction of the Union.

2. Disability

If you become “totally and permanently Disabled,” you will be eligible to receive a benefit from the Retirement Savings Plan. You will be considered totally and permanently Disabled (based on medical evidence) if:

- You have been totally disabled by bodily injury or disease so as to be prevented thereby from engaging in any further employment in a job classification of the type specified in a Collective Bargaining Agreement, and
- Your Disability is permanent and continuous for the remainder of your life.

3. If You Leave Covered Employment Before You Retire

You are eligible to receive a benefit from the Retirement Savings Plan if you have not worked in covered employment for which contributions are due to the Retirement Savings Plan for at least 12 consecutive months.

4. Qualified Domestic Relations Order

An Alternate Payee under a domestic relations order may be eligible to receive a benefit from the Retirement Savings Plan if the order is determined by the Plan to be a Qualified Domestic Relations Order and the Alternate Payee submits an application for benefits. Benefits shall be distributed in accordance with the terms of the Qualified Domestic Relations Order that is approved by the Plan.

Required Beginning Date

As required by IRS required minimum distribution rules, the payment of benefits will begin no later than April 1 of the calendar year following the calendar year in which you reach age 70½. If you reach age 70 ½ after December 31, 2019, then the payment of benefits will begin no later than April 1 of the calendar year following the calendar year in which you reach age 72.

For more information regarding required minimum distributions, please review the detailed provisions set forth in the Fund’s Plan Document.

To receive a Retirement Savings Plan benefit, you must submit a written application. Applications are available at the Fund Office.

Benefit Amount

When you become eligible for and elect distribution of your Retirement Savings Plan account, the amount of your benefit will be based on the balance of your individual account as of the last valuation date plus any Employer contributions made to your account or distributions from your account since the last valuation date.

Forms Of Payment

When you become eligible for and elect payment of your Retirement Savings Plan benefit, you will need to decide how you want to have your benefit paid. The Retirement Savings Plan offers the following forms of payment:

- Lump-sum; or
- Partial lump-sum once every 12 months.

The amount of a partial lump-sum must be \$5,000 or greater. Beneficiaries and Alternate Payees may also receive partial lump sum distributions.

HARDSHIP WITHDRAWALS

While the Plan is intended to help provide for your needs after you retire, the Trustees recognize that participants sometimes experience financial hardships. As a result, the Plan allows certain hardship withdrawals, as described below.

In order to receive a hardship withdrawal, you must apply, in writing, using a form which can be obtained from the Fund Office.

Reasons for Hardship

A hardship withdrawal can only be allowed for any the following:

1. Expenses for (or necessary to obtain) medical care that would be deductible under Internal Revenue Code Section 213(d) (determined without regard to whether or not the expenses exceed 7.5% of adjusted gross income) incurred by you, your spouse, or dependents;
2. Payments necessary to prevent your eviction from your principal residence;
3. Payments necessary to prevent the imminent judgment or mortgage foreclosure of your principal residence. "Imminent judgment or mortgage foreclosure" means that you have received formal written notice from the judgment creditor or mortgagee that commencement of formal court proceedings will be filed within no more than sixty (60) days of the notice as a consequence of non-payment of a judgment or mortgage obligation;
4. Costs directly related to the purchase of your principal residence (excluding mortgage payments); and
5. Payment of tuition, related educational fees, and room and board expenses, for up to the next 12 months of post-secondary education for you or for your spouse, children, or dependents (as defined in the Internal Revenue Code)

A withdrawal will not be treated as necessary to satisfy an immediate and heavy financial need to the extent that the amount of the withdrawal is in excess of the amount required to relieve the financial need, or to the extent such need may be satisfied from other resources reasonably available to you. To receive a hardship distribution, you will be required to confirm that you have no alternative means reasonably available to you, that you have obtained other available distributions, and that you have insufficient cash or other liquid assets to satisfy your financial need. However, any amount required to satisfy the immediate and heavy financial need may include amounts necessary to pay any taxes or penalties that may result from the distributions.

Conditions and Restrictions

There are some important conditions and restrictions on hardship withdrawals as follows:

- You are limited to one hardship withdrawal every 12 months.

- The amount you request for a hardship withdrawal must be for at least \$2,000.
- If you are married, your spouse must consent to the withdrawal in writing and your spouse's signature must be witnessed by a notary public.

Your individual account will be charged any expenses incurred by the Plan as a result of the review, consideration and approval or denial of an application for a hardship withdrawal. Such expenses are not considered common expenses of the Plan.

Tax Impact

A hardship withdrawal is paid in one lump sum and is taxable income in the year received. The withdrawal will also be subject to a 10% penalty tax unless you are at least 59½, or qualify for an exemption (see the next page under Penalty Tax). As discussed previously, you can request an amount large enough to cover the additional tax and 10% penalty.

If you wish to apply for a hardship withdrawal, you should contact the Fund Office to make sure you use the proper forms and submit the required documentation to support your request.

TAX INFORMATION

How your benefit is taxed depends on how and when you receive your distribution from the Retirement Savings Plan. Before the Plan makes a taxable payment to you or your beneficiary, the Plan will provide you with a tax notice. This notice explains the tax rules that apply to distributions from the Plan. It also informs you that you have the right to have your lump-sum taxable payment:

- Paid directly to you;
- Paid as a “direct rollover” to an eligible retirement plan or to an individual retirement account (IRA); or
- Split between payment to you and payment as a direct rollover.

To determine what may be the best way for you to receive payment of your account and the tax consequences of the benefits you receive, consult a qualified tax advisor.

Direct Payment

Whenever a taxable distribution is paid directly to you or your beneficiary, 20% of the distribution will automatically be withheld to pay federal income taxes. The entire distribution is considered taxable income in the year it is received.

To defer payment of the 20% withholding tax, you may “roll over” your distribution to an eligible retirement plan **within 60 days** of receipt of your distribution. However, this 60-day period may be extended in cases of casualty, disaster or other events beyond your reasonable control.

Penalty Tax

In addition to withholding 20% for federal income taxes, a 10% penalty tax may apply if payment is received before age 59½. The 10% penalty tax does **not** apply if the payment is received due to:

- Separation from covered employment on or after attaining age 55;
- Total and permanent Disability;
- Death;
- Payment of certain medical expenses; or
- A Qualified Domestic Relations Order (QDRO).

This penalty tax is in addition to your regular federal income taxes (and any applicable state income taxes and penalties).

Rollovers

If you or your spouse becomes eligible for a distribution from the Retirement Savings Plan, payment of the 20% withholding tax may be deferred and the 10% penalty may be avoided by rolling over the taxable portion of the distribution to an *eligible retirement plan or IRA that accepts rollovers*.

Because of how frequently tax laws change and the complexity of the tax laws applicable to Retirement Savings Plan distributions, you should consult a qualified tax advisor before receiving a distribution from the Retirement Savings Plan.

To be considered an eligible retirement savings plan, a plan must accept rollovers and be:

- A traditional or Roth IRA (not SIMPLE IRA or Coverdell Education Savings Account, formerly known as an education IRA); or
- An eligible employer plan, which includes a plan qualified under section 401(a) of the Internal Revenue Code (including a 401(k) plan, profit-sharing plan, defined benefit plan, stock bonus plan, money purchase plan, section 403(a) annuity plan, section 403(b) tax-sheltered annuity, and eligible section 457(b) plan maintained by a governmental employer).

If you elect to rollover your Retirement Savings Plan benefit, the Retirement Savings Plan will send your distribution directly to the eligible retirement savings plan.

Surviving spouses and beneficiaries who receive a distribution may also rollover the benefits to an IRA.

Any portion you don't roll over will be taxable in the year in which it is received. Keep in mind that the Fund must withhold 20% in federal taxes from any distribution that is paid directly to you. Therefore, if you roll over your full distribution after payment is made directly to you, you must replace the 20% difference from your own funds. If you do not make up the 20% difference, it will be taxable income to you. To avoid the 20% tax, you can have the Plan make a direct rollover into the new plan.

If you elect to receive your Retirement Savings Plan benefit directly and later decide to roll it over, you must do so within 60 days to avoid the 10% tax penalty.

You *cannot* rollover a payment if it is part of a series of equal (or almost equal) payments that are made at least once a year and that will last for:

- Your lifetime (or your life expectancy); or
- Your lifetime and your beneficiary's lifetime (or life expectancies); or
- A period of ten or more years.

Beginning on April 1 of the calendar year following the calendar year you reach 70½ (or, if you reach age 70½ after December 31, 2019, April 1 of the calendar year following the calendar year in which you reach age 72), a certain portion of your payment cannot be rolled over because it is a "required minimum payment" that must be paid to you.

APPLYING FOR BENEFITS

You should apply for benefits at least 90 days before you want payments to begin. For a hardship distribution, you should apply at least 30 days before you want to receive your hardship distribution. Payments cannot be made to you until an application is received at the Fund Office and is approved. The Trustees will rely on any information you provide when reviewing your application.

Generally, within 90 days of receipt of your application (or 30 days for a hardship distribution), you will be notified of whether or not you are eligible for benefits.

You may be required to provide additional information to support your application. If additional time is required to make a determination on your application, you will be notified within the initial 90-day period (or 30-day period for a hardship distribution) of the reason for the extension and when you can expect a decision (which shall not be later than 180 days (or 90 days for a hardship distribution)). If you receive a request to provide additional information, you will be given 30 days to submit the additional information. If you do not provide the additional information within the 30 day deadline, a determination will be made within 30 days of the 30 day deadline you were given to submit the information based upon the information available to the Retirement Savings Plan.

If your application is for a distribution due to a Disability, you may be required to submit evidence of your Disability. You will receive written notice of a decision on your initial application for a Disability benefit within 45 days of receipt of your application. If additional time is required to make a determination on your application, you will be notified within the initial 45-day period of the reason for the extension and when you can expect a decision. This 45-day period may be extended up to an additional 60-day maximum. However, if a determination is not made within the first 75 days, you will be notified that an additional 30 days is necessary.

In some instances, additional information may be required to process and make a determination on your application when it is due to Disability. If such information is required, you will be notified within 45 days of receipt of your request. You then have up to 45 days to submit the additional information. If you do not provide the information within this time, then your application may be denied and a determination will be made within 30 days of the 45 day deadline you were given to submit the information based upon the information available to the Retirement Savings Plan.

Generally, once your application has been approved, benefits will generally be paid as soon as administratively possible. If your application is denied, you have the right to request a review (appeal).

In the event the Trustees determine that you, your surviving spouse or beneficiary is unable to care for your affairs because of mental or physical incapacity, any payment due may be applied to your maintenance and support or to a person the Trustees find to be appropriate.

If Your Application Is Denied

If your application for benefits is denied, wholly or in part, the Fund Office will provide you with a written notice specifying the specific reason or reasons for the denial of benefits and a statement of all rights and procedures for review of the denial.

Non-Disability Claims

If your application for benefits is denied, wholly or in part, the Fund Office will provide you with a written notice that will include:

- The specific reason(s) for the denial;
- Specific reference to pertinent Plan provisions on which the denial is based;
- A description of any additional information necessary as well as an explanation of why such information is necessary;
- A description of the Plan's review procedures and applicable time limits;
- A description of the steps you will need to take if you wish to appeal; and
- A statement of your rights, under ERISA, to bring a civil action after you have exhausted the Plan's appeal process.

Disability Claims

For disability claims, the Fund Office will provide you with a written notice that will also include:

- A description of Plan's review procedures and applicable time limits applicable to such procedures, including a statement of the right to bring a civil action under ERISA Section 502(a) of the Act following an adverse benefit determination on review;
- A discussion the adverse benefit determination, including an explanation of the basis for disagreeing with or not following:
 - The views presented by the claimant to the plan of health care professionals treating the claimant and vocational professionals who evaluated the claimant;
 - The views of medical or vocational experts whose advice was obtained on behalf of the plan in connection with a claimant's adverse benefit determination, without regard to whether the advice was relied upon in making the benefit determination; and
 - A disability determination regarding the claimant presented by the claimant to the plan made by the Social Security Administration;
- If the adverse benefit determination is based on a medical necessity or experimental treatment or similar exclusion or limit, either an explanation of the scientific or clinical judgment for the determination, applying the terms of the plan to the claimant's medical circumstances, or a statement that such explanation will be provided free of charge upon request;
- The specific internal rules, guidelines, protocols, standards or other similar criteria the Plan relied upon in making the adverse determination or,

alternatively, a statement that such rules, guidelines, protocols, standards or other similar criteria of the Plan do not exist;

- A statement that the claimant is entitled to receive, upon request and free of charge, reasonable access to, and copies of, all documents, records, and other information relevant, as that term is defined at 29 CFR 2560.503-1(m)(8), to the claimant's claim for benefits; and
- The notification shall be provided in a culturally and linguistically appropriate manner. The Plan is considered to provide relevant notices in a “culturally and linguistically appropriate manner” if the Plan meets the following requirements:
 - The Plan must provide oral language services (such as a telephone customer assistance hotline) that includes answering questions in any applicable non-English language and providing assistance with filing claims and appeals in any applicable non-English language;
 - The Plan must provide, upon request, a notice in any applicable non-English language; and
 - The Plan must include in the English versions of all notices, a statement prominently displayed in any applicable non-English language clearly indicating how to access the language services provided by the Plan.

With respect to an address in any United States county to which a notice is sent, a non-English language is an applicable non-English language if ten percent or more of the population residing in the county is literate only in the same non-English language, as determined in guidance published by the Secretary.

Appeal Procedures

You, your authorized representative or beneficiary may file a written appeal with the Fund Office no later than 60 days (180 days for a Disability claim) after you receive notice that your application for benefits has been denied. You also have a right to review pertinent documents and to submit comments in writing.

You may:

- Submit additional materials, including comments, statements, or documents; and
- Request to review all relevant information (free of charge).

Appeal Decisions

At the next regularly scheduled Board of Trustees meeting (or within 45 days after receipt of the written appeal for a Disability claim), the Board of Trustees will complete a new, full, and fair review of your application based on all information available, including any additional information you provide. If special circumstances require an extension, you will be notified within the initial period of the reason for the extension and when you can expect a decision. For Disability claims, the initial period may be extended up to an additional 45 days.

For Disability claims only, the Board of Trustees may also render the decision at the next quarterly Board of Trustees meeting. If a request for appeal is received within 30 days prior to a quarterly meeting, then the decision may be rendered at the subsequent quarterly meeting or if there are special circumstances by the third meeting following receipt of the appeal.

Non-Disability Claim Appeals

After the determination on your appeal is made, you will be sent written notice of the decision. If your non-disability claim is denied on appeal, in whole or in part, the notice will include:

- The specific reason(s) for the denial;
- Specific references to the Plan provisions on which the denial is based;
- Notification of your right to access and copy (free of charge) all documents, records and other information relevant to the claim, and
- A statement of your rights, under ERISA, to bring a civil action after you have exhausted the Plan's appeal process.

Disability Claim Appeals

For disability claims, the Fund Office will provide you with a written notice that will also include:

- The specific reason or reasons for the adverse disability benefit determination;
- Reference to the specific Plan provisions on which the adverse disability benefit determination is based;
- A statement that the claimant is entitled to receive, upon request and free of charge, reasonable access to, and copies of, all documents, records and other information relevant, to the claimant's claim for disability benefits;
- A discussion of the decision, including an explanation of the basis for disagreeing with or not following:
 - i. The views presented by the claimant to the plan of health care professionals treating the claimant and vocational professionals who evaluated the claimant;
 - ii. The views of medical or vocational experts whose advice was obtained on behalf of the plan in connection with a claimant's adverse disability benefit determination, without regard to whether the advice was relied upon in making the benefit determination; and
 - iii. A disability determination regarding the claimant presented by the claimant to the plan made by the Social Security Administration;
- If the adverse disability benefit determination is based on a medical necessity or experimental treatment or similar exclusion or limit, either an explanation of the scientific or clinical judgment for the determination, applying the terms of the Plan to your medical circumstances, or a statement that such explanation will be provided free of charge upon request;
- Either the specific internal rules, guidelines, protocols, standards or other similar criteria of the Plan relied upon in making the adverse determination or, alternatively, a statement that such rules, guidelines, protocols, standards or other similar criteria of the plan do not exist; and
- A statement of your right to bring an action under Section 502(a) of ERISA; and a statement of your right to bring an action under section 502(a) of the Act; which statement shall also describe any applicable contractual limitations period that applies to your right to bring such an action, including the calendar date on which the contractual limitations period expires for the claim.

In the case of an adverse disability benefit determination on review, the notification shall be provided in a culturally and linguistically appropriate manner as described below. The Plan is considered to provide relevant notices in a “culturally and linguistically appropriate manner” if the Plan meets the following requirements:

- i. The Plan must provide oral language services (such as a telephone customer assistance hotline) that includes answering questions in any applicable non-English language and providing assistance with filing claims and appeals in any applicable non-English language;
- ii. The Plan must provide, upon request, a notice in any applicable non-English language; and
- iii. The Plan must include in the English versions of all notices, a statement prominently displayed in any applicable non-English language clearly indicating how to access the language services provided by the Plan.

With respect to an address in any United States county to which a notice is sent, a non-English language is an applicable non-English language if ten percent (10%) or more of the population residing in the county is literate only in the same non-English language, as determined in guidance published by the Secretary.

Before the Plan can issue an adverse benefit determination on review on a disability benefit claim, the Plan Administrator shall provide you, free of charge, with any new or additional evidence considered, relied upon, or generated by the Plan, or other person making the benefit determination (or at the direction of the plan or such other person) in connection with the claim. Such evidence must be provided as soon as possible and sufficiently in advance of the date on which the notice of adverse benefit determination on review is required to be provided under the Plan to give the claimant a reasonable opportunity to respond prior to that date.

In addition, before the Plan can issue an adverse benefit determination on review on a disability benefit claim based on a new or additional rationale, the Plan Administrator shall provide you, free of charge, with the rationale. The rationale must be provided as soon as possible and sufficiently in advance of the date on which the notice of adverse benefit determination on review is required to be provided under the Plan to give you a reasonable opportunity to respond prior to that date.

Timing of Decision

For non-Disability claims, you will be notified of the decision of the Board of Trustees within 30 days after conclusion of the hearing.

For Disability claims, you will be notified within 5 days of the date the decision is made.

Decision is Final and Binding

The decision of the Board of Trustees is final and binding. No benefits will be paid under the Plan unless the Trustees (or their delegate) determine that a claim for benefits is valid and that the person claiming the benefits is entitled to them. The Trustees’ decision will be given judicial deference in any later court action. You (or any person acting on your behalf) cannot bring a lawsuit against the Plan to recover benefits from the Plan if you do not request a review in accordance with the Plan’s procedures.

Limitations to File Suit

Any legal action against the Fund/Plan, Trustees, Plan Administrator, or Administrative Manager must be filed in court within one (1) year of the date the Fund/Plan provides written notice of a decision on an appeal of an adverse benefit determination or any other alleged failure by said Fund/Plan or persons. Failure to bring an action within one (1) year will forever prevent the Participant or beneficiary from taking legal action. In the event that a Participant, beneficiary or any other person claiming interest in the Fund/Plan files suit under state or federal law, then the sole proper venue shall be in the United States District Court for the Central District of Illinois or the Circuit Court in Logan County, Illinois.

IN THE EVENT OF DEATH

If you die before you receive payment of all of your Retirement Savings Plan benefit, your Retirement Savings Plan benefit will be paid to your spouse as a lump-sum payment. You have the right to designate another beneficiary if your spouse consents in writing.

If you are not married at the time of your death and you die before you receive payment of your Retirement Savings Plan benefit, the benefit will be paid to your beneficiary as a lump-sum payment.

If you are not married at the time of your death and you fail to name a beneficiary or your beneficiary does not survive you, then your benefit will be paid to your estate.

MISSING PARTICIPANTS OR BENEFICIARIES & FORFEITED BENEFITS

If the Fund is unable to locate you or your beneficiary and obtain a written application from you or your beneficiary before you attain or would have attained the Required Beginning Date as defined in the Plan or before a distribution is due to a beneficiary pursuant to the terms of the Plan Document, then your benefit and/or your beneficiary's benefit, as appropriate, shall be forfeited.

The forfeited benefit shall be frozen and shall not accrue earnings or interest income, but shall be assessed expenses. The Fund shall maintain the frozen forfeited benefit in your Account, and such benefit shall be reinstated if a claim is made by the you or your beneficiary for the forfeited benefit.

In the event that you or your beneficiary cannot be located upon termination of the Plan, any amount payable to you or your beneficiary shall be transferred pursuant to applicable law and guidance. Upon such transfer, the Trustees shall have no further liability for the amount so transferred.

The Fund shall make diligent attempts to locate you or your beneficiary in accordance with the Plan's policies.

ADMINISTRATIVE FACTS

Fund Name

Central Illinois Carpenters Retirement Savings Fund.

Plan Name

Central Illinois Carpenters Retirement Savings Plan.

Employer Identification Number (EIN)

The Employer Identification Number (EIN) assigned to the Board of Trustees for the Central Illinois Carpenters Retirement Savings Fund is 37-1234126.

Plan Number

The Plan Number is 001.

Plan Year

The Plan year is the 12 calendar month period beginning May 1 of each year and ending April 30 of the following year.

Plan Type

The Retirement Savings Plan is a profit-sharing plan maintained for the purposes of providing retirement benefits to eligible participants and beneficiaries.

Plan Administrator And Plan Sponsor

Board of Trustees of the Central Illinois Carpenters Retirement Savings Fund
200 South Madigan Drive
Lincoln, Illinois 62656

Administrative Manager

Ms. Missy Sallee
200 South Madigan Drive
Lincoln, Illinois 62656

Plan Trustees

The Trustees of this Plan are:

Union Trustees

R. Nathan German, Chairman
Southern Region
Chicago Regional Council of Carpenters
#1 Kalmia Way
Springfield, Illinois 62702

Employer Trustees

James L. Hein, Secretary
Hein Construction
9130 Industrial Road
Peoria, Illinois 61615

Union Trustees

Robert J. Finneran
Southern Region
Chicago Regional Council of Carpenters
#1 Kalmia Way
Springfield, Illinois 62702

Jacob Moody
Southern Region
Chicago Regional Council of Carpenters
#1 Kalmia Way
Springfield, Illinois 62702

Employer Trustees

Bobby Taylor
Mid-Illinois Companies
905 N.E. Adams Street
Peoria, Illinois 61603

Steve Aupperle
Builders Association of
Tazewell County
182 E. Washington Street
Morton, Illinois 61550

Administration

The Board of Trustees administers the Plan. They are assisted by an administrative staff.

Agent For Service Of Legal Process

Cavanagh & O'Hara LLP
2319 West Jefferson Street
Springfield, Illinois 62702

Legal papers may also be served on the Board of Trustees collectively or on any individual Trustee.

Collective Bargaining Agreement

This Plan is maintained pursuant to collective bargaining agreements between the Employers and certain local Unions affiliated with the United Brotherhood of Carpenters and Joiners of America.

Source Of Contributions

Contributions made by contributing Employers to this Plan are specified in the Collective Bargaining Agreements, negotiated by the participating local Unions with the participating Employers. Contributing Employers may also contribute to this Plan pursuant to the terms of a participation agreement.

All contributions and Plan assets are held in trust. All Participants share in the administrative expenses by having fees deducted from individual account balances.

Contributing Employers

Upon request, the Fund Office will provide you with information as to whether a particular Employer is contributing to the Plan on behalf of employees working under the collective bargaining agreements.

Plan Interpretation and Determination By Trustees

The Board of Trustees has full discretionary authority to interpret the Plan and its provisions to the maximum extent permitted by law. However, the Plan's Administrative Manager is responsible for answering all day-to-day questions concerning eligibility, benefits, and claims procedures.

Only the Board of Trustees has the discretion and authority to determine eligibility for benefits, and the right to participate in the Retirement Savings Plan and to exercise all the other powers specified in the Plan Document. No officer, agent or employee of the Union or Employer or any other person, is authorized to speak for, or on behalf of, or to commit the Board of Trustees, on any matter relating to the Retirement Savings Plan.

Right To Change Or Terminate The Plan

The Board of Trustees has the right to amend or terminate this Plan when required by law or when deemed appropriate. If the Plan is amended or terminated, you will be notified in writing.

The Plan may be amended at any time if the Trustees agree to do so in writing, except that no amendment can divert the Plan's assets from the Plan's purposes of providing benefits.

Should the Plan be terminated, participants will remain 100% vested in their account balances. After payment of Plan expenses and previously approved distributions, the remaining Plan assets will be distributed among the participants. Each participant will receive a part of the assets determined to be in the same ratio that their account balance bears to the aggregate of all participant account balances.

Once the Plan is terminated and all assets have been distributed, the Board of Trustees will be discharged from all liability under the Plan and participants will have no further rights or claims.

No assets will be returned to any Employer or inure to the benefit of any Employer or the Union. In the event that a participant cannot be located and no claim is made for him or her for payment of his vested account balance within five years following the sending of notice by registered mail to the participant's last known address, his or her vested account balance will be forfeited and redistributed on a uniform basis among the participants to whom payments are being made or can be made.

Non-Assignment Of Benefits

The benefits under the Retirement Savings Plan are your own. This means that you cannot assign or transfer them to someone else, except as otherwise provided under federal law, and they are exempt from execution, attachment, garnishment, pledge, bankruptcy or claims for alimony. However, the Board of Trustees will honor a Qualified Domestic Relations Order (QDRO).

Qualified Domestic Relations Order (QDRO)

Under the terms of a Qualified Domestic Relations Order (QDRO), certain payments could be made from your account to pay alimony, child support or marital property

rights. If the Board of Trustees receives a QDRO, you will be notified. A QDRO may affect the amount of benefits you will receive or are receiving. If you have questions about QDROs or would like to receive a copy of the Plan's QDRO procedures or model QDRO, please contact the Fund Office.

Any expense incurred by the Plan as a result of the review, consideration or approval of a domestic relations order or QDRO shall be charged directly against the account of the Participant and alternate payee, if one is named in the domestic relations order in equal amounts, and shall not be considered a common expense of the Plan.

Top-Heavy Provisions

Federal law requires that if the Retirement Savings Plan becomes a "top-heavy" plan as described in the Internal Revenue Code, minimum contributions may apply. In the unlikely event that this Retirement Savings Plan becomes top-heavy, you will be notified accordingly.

Maximum Contributions

The Internal Revenue Code imposes limitations on maximum contribution amounts that may be made annually on behalf of participants under qualified plans. These limits are liberal and would not normally prevent you from receiving full benefits. In the unlikely event that contributions made by contributing Employers on your behalf are limited, you will be notified.

No Employment Guarantee

Your participation in the Plan does not constitute a guarantee of your continued employment.

Legal Expenses

Any expense incurred by the Fund or Plan as a result of the review, consideration or approval of a domestic relations order shall be charged directly against the account of the Participant and alternate payee, if one is named in the domestic relations order, in equal amounts, and shall not be considered a common expense of the Fund or Plan.

Any expense incurred by the Fund or Plan as a result of the review or consideration of legal pleadings or other documents in connection with a benefit distribution shall be charged directly against the account of the Participant.

Any reasonable expenses incurred by the Plan related to efforts to locate the Participant or Beneficiary shall be charged directly against the account of the Participant or Beneficiary. Reasonable expenses shall include, but not be limited to, the use of third party service providers, database inquiries, and any other methodology used by the Plan. Such expenses are not considered common expenses of the Plan.

YOUR ERISA RIGHTS

As a participant in the 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 are entitled to certain rights, as outlined in the following information.

Receive Information About Your Plan And Benefits

You have the right to:

- 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, 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 (EBSA);
- Obtain, upon written request to the Plan Administrator, copies of documents governing the operation of the Plan, including insurance contracts, Collective Bargaining Agreements and copies of the latest annual report (Form 5500 Series) and updated Summary Plan Description (the Plan Administrator may make a reasonable charge for the copies);
- Receive a summary of the Plan's annual financial report, which the Plan Administrator is required by law to furnish each Participant with a copy of this summary annual report; and
- Obtain a statement telling you whether you have a right to receive a benefit at your Normal Retirement Age (generally age 55) and if so, what your benefits would be at your Normal Retirement Age if you stop working under the Plan now. If you do not have a right to a benefit, the statement will tell you how many more years you have to work to get a right to a benefit. This statement must be requested in writing and is not required to be given more than once every 12 months. The Plan will provide the statement free of charge.

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 employee benefit 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 benefit or exercising your rights under ERISA.

Enforce Your Rights

If your claim for a 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 the 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, 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.

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 EBSA at:

Nearest Regional Office

Employee Benefits
Security Administration
Chicago Regional Office
200 West Adams Street, Suite 1600
Chicago, Illinois 60606
312-353-0900

National Office

Division of Technical Assistance and
Inquiries Employee Benefits Security
Administration
U.S. Department of Labor
200 Constitution Avenue N.W.
Washington, D.C. 20210
866-444-3272

You may also find answers to your questions and learn more about your rights and responsibilities under ERISA by visiting the EBSA's Web site at www.dol.gov/ebsa.

GLOSSARY

Normal Retirement Age

The Plan's Normal Retirement Age is age 55.

Required Beginning Date

Your Required Beginning Date for benefits is April 1 of the calendar year following the calendar year in which you reach age 70½. If you reach age 70½ after December 31, 2019, then the payment of benefits will begin no later than April 1 of the calendar year following the calendar year in which you reach age 72

Spouse

Your Spouse shall mean any individual to whom you are lawfully married under any state law or the law of any foreign jurisdiction. Spouse also includes same sex spouses if you were married in a state or foreign jurisdiction that recognizes same sex marriages. Same sex spouses do not include civil unions, domestic partnerships, or similar formal relationships.