

403(b) Plan
SUMMARY
PLAN
DESCRIPTION

Introduction

Your Employer has adopted a 403(b) Plan designed to help you meet your financial needs during your retirement years. To become a Participant in the Plan, you must meet the Plan's eligibility requirements. Once you become a Participant, the Plan Administrator will maintain an Individual Account for you. Each Plan Year your account will be adjusted to reflect contributions, gains, losses, etc. The percentage of your account to which you will be entitled when you terminate employment depends on the Plan's vesting schedule. The features of the Plan are explained further in the following pages.

The actual Plan is a complex legal document that has been written in the manner required by tax laws and regulations. This document is called a Summary Plan Description (or SPD) Booklet and explains and summarizes the important features of the Plan. The SPD consists of this SPD Booklet along with the General Information Sheet. The General Information Sheet contains information unique to the Plan which your Employer has adopted. As you read the SPD Booklet, you will need to refer to the General Information Sheet to understand how your Plan works. You should consult the Plan document for technical and detailed Plan provisions. The legal operation of the Plan is controlled by the Plan document and the Funding Vehicles that are issued under the Plan and not this SPD.

If at any time you have specific questions about the Plan as it applies to you, please bring them to the attention of the Plan Administrator whose address and telephone number appear on the General Information Sheet. You also may examine the Plan document itself at a reasonable time by making arrangements with the Plan Administrator.

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SECTION ONE: DEFINITIONS

The following definitions are used in the text of this SPD. These words and phrases are capitalized throughout the SPD for ease of reference. Depending upon your Plan, some may not apply.

ACP – Actual Contribution Percentage

Beneficiary – the person(s) and/or entity(ies) that will receive all or a specified portion of your Individual Account in the event of your death.

Catch-up Contributions – additional Elective Deferrals, not to exceed the applicable dollar amount for a given year, made under this Plan by Participants who attain age 50 before the close of the Plan Year

Compensation – means the earnings paid to you by your Employer that are taken into account for purposes of calculating contributions to the Plan. Refer to the General Information Sheet.

Custodian – means the entity holding the 403(b) mutual fund assets in a custodial account.

Direct Rollover – a way of rolling over an Eligible Rollover Distribution from a 403(b) plan directly to an Eligible Retirement Plan (or from an Eligible Retirement Plan to a 403(b) plan) thereby avoiding federal income tax withholding.

Early Retirement Age – the age upon attainment of which you may become 100 percent vested in your Individual Account and may possibly be entitled to receive a distribution.

Effective Date – means the date the Plan becomes effective as stated in the General Information Sheet.

Elective Deferrals – means the dollars you contribute into the Plan through before-tax payroll deductions.

Eligible Retirement Plan – an eligible 457(b) plan maintained by a state governmental entity, a Traditional Individual Retirement Account (IRA), a qualified retirement plan, a qualified annuity plan and a 403(b) plan.

Eligible Rollover Distribution – any distribution to your credit that does not include the following: any distribution that is one of a series of substantially equal periodic payments for your life or a period of 10 years or more; required minimum distributions; and hardship distributions. In addition, an Eligible Rollover Distribution includes a Direct Rollover of Nondeductible Employee Contributions made to a Traditional IRA or 403(b) plan, if those amounts are separately accounted for in the receiving plan.

Employee – means any person employed by the Employer.

Employee Contribution - means the amount you contribute to the Plan as an Elective Deferral, Nondeductible Employee Contribution or Mandatory Employee Contribution.

Employer – means the organization maintaining this Plan.

Employer Contribution – means the amount contributed to the Plan on your behalf by your Employer.

Entry Dates – means the dates on which you will enter the Plan upon satisfying the age and service requirements.

Forfeitures – non-vested portions of a Plan Participant's Employer Contributions and Matching Contributions which are allocated to other Plan Participants, applied to reduce Employer Contributions and/or Matching Contributions, or used toward administrative expenses of the Plan.

Funding Vehicles – means the investment products (annuities and/or mutual funds) that are available for investment of Plan contributions.

General Information Sheet – means the completed form outlining the provisions of the Plan selected by your Employer. You should have received a copy of the General Information Sheet along with this SPD Booklet.

Hours of Service – means each hour for which you are paid or entitled to payment for the performance of duties for your Employer, unless the General Information Sheet specifies otherwise.

Individual Account – means the contribution account established and maintained for you by the Issuer or Custodian which is made up of all contributions made by you or on your behalf, adjusted according to any earnings or losses due to market fluctuations.

Issuer – means the insurance company that issues the annuity contracts used as Funding Vehicles under the Plan.

Loan Information Sheet – the completed form outlining the loan program, if any, available under your Plan. If your Plan offers a loan program, you should have received a copy of the Loan Information Sheet along with this SPD Booklet.

Mandatory Employee Contributions – means employee contributions that are made as a condition of employment or that are made pursuant to a one time irrevocable election.

Matching Contribution – means a contribution made by your Employer to the Plan on your behalf based upon your Employee Contributions made to the Plan.

Nondeductible Employee Contributions – any contribution that you make to the Plan on an after-tax basis.

Normal Retirement Age – means the age specified on the General Information Sheet, and if no age is specified, the Normal Retirement Age is 59½. Upon attaining the specified age, you will become 100 percent vested in your Individual Account and entitled to distribution.

Participant – means an Employee who has met the eligibility requirements, has entered the Plan, and has become eligible to make or receive a contribution to his or her Individual Account.

Plan – means the specific 403(b) retirement Plan your Employer has set up. The Plan is governed by a legal document containing various technical and detailed provisions. The Plan Administrator has a copy of the Plan document.

Plan Administrator – means the Employer unless otherwise designated in the General Information Sheet. The Plan Administrator is responsible for directly administering the Plan.

Plan Year – means the 12-consecutive month period upon which the Plan is maintained. Refer to the General Information Sheet.

Qualified Joint and Survivor Annuity (QJSA) – a lifetime annuity payment to a Participant who separates from service. When the Participant dies, periodic payments will continue to a surviving spouse equal to 50 percent of the original annuity payment unless a different percentage is specified in the General Information Sheet. A Plan Participant may waive the QJSA form of distribution and elect an alternative form of distribution.

Required Beginning Date – the distribution of benefits which is generally required to commence no later than April 1 of the calendar year following the year you attain age 70½ or, if later, April 1 of the calendar year following the year in which you retire.

Salary Reduction Agreement – means the agreement you signed to authorize your Employer to deduct your Elective Deferrals from your Compensation and put them into the Plan. Your Employer may accept your authorization in electronic, telephone or paper formats.

Taxable Wage Base – the base salary amount, as indexed annually by the Social Security Administration, upon which the Employer's Social Security obligation is determined.

SECTION TWO: FUNDING AND ADMINISTRATION OF THE PLAN

Part 1. What are the sources of Plan contributions?

- * Employee Contributions. If the Plan permits, you may be allowed (or required) to make before-tax or after-tax contributions to the Plan called Employee Contributions through a payroll deduction..
- * Employer Contributions. These contributions are either discretionary or fixed as indicated on the General Information Sheet. Your entitlement to an Employer Contribution is not dependent upon making Elective Deferrals.
- * Matching Contributions. These contributions match a percentage of the Employee Contributions you make to the Plan.

Refer to the General Information Sheet for more information about whether Employee, Employer or Matching Contributions will be made to the Plan.

Part 2. Who is responsible for the daily operations of the Plan?

Your Employer is responsible for the day-to-day administration and management of the Plan unless the General Information Sheet indicates otherwise. To insure efficient and sound operation and management of the Plan, your Employer has the discretionary authority to appoint other persons as may be necessary to act on its behalf or assist in performing these responsibilities.

Part 3. Where will Plan contributions be invested?

Contributions will be invested, at your election, in one or more of the Funding Vehicles that are available under the Plan. See the General Information Sheet for a list of the approved Funding Vehicles. Your Employer (or the investment providers or Insurers who offer the Funding Vehicles) may give you additional information about Funding Vehicles. Your Employer will not provide investment advice to you.

SECTION THREE: ELIGIBILITY AND PARTICIPATION

Part 1. What are the eligibility requirements of the Plan?

Employees Eligible to Participate

If the Plan provides for Employee Contributions, generally, all Employees will be eligible to contribute to the Plan. However, the Plan may permit your Employer to exclude certain classifications of Employees from participation. Refer to the General Information Sheet to determine if any Employee classifications have been excluded from participation in your Plan.

Age and Service Requirements

If the Plan provides for Employer or Matching Contributions, to be eligible to receive Employer Contributions or Matching Contributions, you may be required to reach a certain age and complete a certain number of years of service for your Employer. Under some circumstances, you may be given credit for prior years of service with eligible employers. The minimum age and service requirements and information about credit for prior service are shown on the General Information Sheet.

Replacement Plan

If this is a restatement of a prior Plan with the same Employer, in which you were a Participant, you will automatically participate.

Part 2. After I meet the eligibility requirements, when do I actually become a Participant in the Plan?

During each Plan Year there are at least two Entry Dates upon which you can begin participation for purposes of Employer Contributions and Matching Contributions. The Plan Entry Dates for your Plan are shown on the General Information Sheet. After you have met the eligibility requirements, you will enter the Plan and thus become a Participant on the next Entry Date.

For purposes of making Elective Deferrals, generally your date of hire is an Entry Date.

Part 3. Once I am a Plan Participant, what must I do to continue to participate in the Plan?

You will continue to participate in the Plan as long as you do not incur a break in service. A break in service is a consecutive 12-month period during which you fail to work more than the minimum number of Hours of Service indicated on the General Information Sheet. However, no break in service will occur if the reason you did not work more

than the required number of hours was because of certain absences due to birth, pregnancy or adoption of children, military service or other service during a national emergency during which your re-employment under a federal or state law is protected and you do, in fact, return to your employment within the time required by law.

If you return to employment after periods of military service, you may be eligible to make additional Elective Deferrals and receive additional Employer Contributions to make up for the period during which you served in the military. See your Plan Administrator for additional information.

SECTION FOUR: CONTRIBUTIONS TO THE PLAN

Part 1. Employee Contributions

The General Information Sheet provides specific information about Employee Contributions unique to your Plan. Employee Contributions include Elective Deferrals, Nondeductible Employee Contributions and Mandatory Employee Contributions.

A. How do I make Elective Deferrals?

If the Plan permits and you wish to make Elective Deferrals, you must complete and sign a Salary Reduction Agreement. However, refer to the General Information Sheet or Salary Reduction Agreement to determine if your Employer may make payroll deductions automatically without you completing and signing a Salary Reduction Agreement.

EXAMPLE: Your Compensation is \$15,000. You wish to make an Elective Deferral to the Plan and sign a Salary Reduction Agreement authorizing an Elective Deferral of five percent of your Compensation. As a result, your Employer will pay you \$14,250 as gross taxable income and will deposit your five percent Elective Deferral (i.e., \$750) into the Plan for you.

You can change the amount or percentage of your pay which you are putting into the Plan as often as specified in the General Information Sheet or in the Salary Reduction Agreement. If you want to change the percentage or amount of your Elective Deferral, you must sign a new Salary Reduction Agreement and return it to your Plan Administrator at least 30 days before the change will take effect or a lesser number of days if the Plan Administrator permits.

NOTE: If the Plan provides for Matching Contributions and elects to follow the Actual Contribution Percentage (ACP) safe harbor contribution provisions, a notice from the Employer will be provided to you if you are a Participant. This notice will be provided at least 30 days, but no more than 90 days, before the beginning to the Plan Year. The notice will also be provided within 90 days prior to and no later than the day you first become a Participant. Once you have received the notice, you have 30 days to make or modify an Elective Deferral election. This election period is in addition to any other election period allowed by the Employer to modify or discontinue Elective Deferrals.

B. How much may I defer into the 403(b) Plan?

Your elective deferral contributions to this and any other 403(b) or qualified plan may not exceed the following amount for each year:

\$14,000 for 2005
\$15,000 for 2006 and thereafter

These amounts are indexed for cost-of-living adjustments and may be adjusted in increments of \$500 beginning after 2006.

In addition, you may be able to contribute up to an additional \$3,000 if you have at least 15 years of service with an eligible employer. See your Plan Administrator for additional information.

C. May I stop making Elective Deferrals?

Yes, you may stop making Elective Deferrals by signing a Salary Reduction Agreement which your Employer will provide. Your General Information Sheet provides additional information about making Elective Deferrals to your

Plan. Once you stop putting money into the Plan, you must wait until the time designated by the Plan or the Employer to begin putting money in again.

D. What if I defer more than the maximum amount allowed?

If you put too much money into the Plan through Elective Deferrals, the excess amount and any earnings you may have received on the excess must be taken out of the Plan by April 15 of the year following the year the money went into the Plan. You are responsible for notifying your Employer of the excess Elective Deferral by the date specified in the General Information Sheet. Any contributions in excess of the Internal Revenue Code limits generally will become taxable income for the year in which you put the excess into the Plan. If the excess is not removed from the Plan by April 15, you will have to pay additional income tax in the year of distribution as well as for the year of contribution.

EXAMPLE: You made an excess contribution of \$1,000 in 2006 and you had earnings of \$100 on your excess. You removed your \$1,000 excess and the \$100 earnings by April 15, 2006. The excess will be reported on your 2005 1040 and you will pay income tax on that amount. The earnings will be reported in 2006. If you miss the April 15th deadline, you will be taxed on the excess contribution in both 2005 as well as 2006.

You must sign a form to claim a return of any excess amounts which you put into the Plan. Your Employer will furnish the form to you and you must return it to your Employer by the date specified in the General Information Sheet.

E. Are Catch-up Contributions available under your Plan?

Unless otherwise indicated in the General Information Sheet, all Employees who are eligible to make Elective Deferrals under your Plan and who have attained age 50 before the close of the Plan Year are eligible to make Catch-up Contributions, not to exceed the applicable dollar amount for the year. For 2006, the age 50 catch-up is \$5,000. This limit will be adjusted annually for cost of living increases beginning after 2006

Part 2. Employer Contributions

A. How will the Employer Contribution be determined?

If the Plan provides for Employer Contributions, it depends on whether Employer Contributions will be made in accordance with a fixed or a discretionary formula. Refer to the General Information Sheet. If the discretionary option is elected, your Employer will determine the amount to contribute to the Plan each Plan Year. If the fixed option is elected, your Employer will contribute the percentage of Compensation specified on the General Information Sheet.

B. What must I do to share in the Employer Contribution?

To share in the Employer Contribution, you must be a Participant in the Plan and complete any necessary enrollment forms. Some plans require that you work a minimum number of hours each year to share in the Employer Contribution. Refer to the General Information Sheet to determine if this applies in your Plan.

Some plans may require that you be working for the Employer on the last day of the Plan Year to share in the Employer Contribution. Refer to the General Information Sheet to determine if this requirement applies in your Plan.

Plans may waive hourly and/or last day requirements under certain circumstances such as death, disability, etc. Refer to the General Information Sheet to determine, if and when, the minimum hour of service and/or last day requirements may be waived.

C. What portion of the Employer contribution will be allocated to my account?

How the Employer contribution is allocated to your Individual Account depends on the allocation formula selected by your Employer. Refer to the General Information Sheet to determine which of the following formulas will be used.

Pro Rata Allocation

If the plan allocates on a pro rata basis and your Employer has elected to contribute a percentage of Compensation, you will receive a contribution equal to the percentage multiplied by your Compensation.

If this Plan allocates contributions on a basis other than a percentage of compensation, you will receive a pro rata portion of the contribution equal to the ratio of your Compensation to the Compensation of all Participants.

EXAMPLE: Assume you are one of 10 Participants in the Plan and your Compensation is \$10,000. Assume further the Compensation of all Participants when added together equals \$100,000. The ratio of your Compensation (\$10,000) to that of all Participants (\$100,000) is 1/10. Therefore, 1/10 of the contribution made by your Employer to the Plan will be allocated to your account.

Flat Dollar Allocation

If this Plan allocates contributions on a flat dollar basis, each Participant in the Plan will receive the same contribution dollar amount

Integrated Allocation

If this Plan is integrated, the contribution your Employer makes will consist of two parts; a base contribution and an excess contribution. The base contribution will be a percentage of your Compensation up to the integration level. The excess contribution will be a percentage of your Compensation above the integration level. The integration level is the Taxable Wage Base for the year unless otherwise specified in the General Information Sheet.

D. How does the nonelective contribution under an ACP safe harbor plan work?

If your 403(b) Plan elects the ACP safe harbor contribution provisions, your Employer must make either a Matching Contribution or a nonelective contribution. Refer to the General Information Sheet for the contribution type and amount to be contributed.

1. What must I do to share in the nonelective contribution?

To share in the nonelective contribution, you must have satisfied the Plan's eligibility requirements and entered the Plan

2. What part of the nonelective contributions will be allocated to my account?

If you are eligible to receive a nonelective contribution, you will receive a contribution equal to a specified percentage of your Compensation indicated in the General Information Sheet.

E. Where does the contribution made on my behalf go?

The Employer makes the contribution to the Funding Vehicle you select where dollars are held for the benefit of Participants. Accumulations may be transferred among the approved Funding Vehicles as permitted by the Funding Vehicles and the Insurers and investment providers that offer the Funding Vehicles.

Part 3. Matching Contributions

Your Plan may provide for Matching Contributions. If so, the General Information Sheet provides specific information about Matching Contributions unique to your Plan.

A. What must I do to share in a Matching Contribution?

If your Plan provides for Matching Contributions, Participants will receive Matching Contributions if they make Employee Contributions to the Plan.

To share in the Matching Contribution, you must be a Participant in the Plan. Some plans require that you work a minimum number of hours to share in the Matching Contribution. Refer to the General Information Sheet to determine if an hourly requirement applies to your Plan.

The Plan may require you to be working for the Employer on the last day of the Plan Year to share in the Matching Contribution. Refer to the General Information Sheet to determine if this requirement applies to your Plan.

Plans may waive hourly and/or last day requirements under certain circumstances such as death, disability, etc. Refer to the General Information Sheet to determine if and when such requirements are waived.

The amount of your Matching Contribution will be based upon the formula described in the General Information Sheet.

EXAMPLE: Your annual Compensation is \$40,000. For Plan Year 2006, you agree to make an Elective Deferral of 10 percent of your Compensation. Under the terms of the Plan, assume your Employer has selected a Matching Contribution formula that will match your Elective Deferrals on the basis of 50 cents for each dollar you contribute

up to 10 percent of Compensation. Your Elective Deferral for 2006 will be \$4,000 and the Matching Contribution will be \$2,000 for a total contribution for Plan Year 2006 of \$6,000.

B. Are highly compensated Participants eligible to receive Matching Contributions?

Yes. However, additional limitations may exist on the Matching Contribution amounts. The Internal Revenue Code and tax rules define highly compensated Employee for these purposes. If these limits apply to you, your Plan Administrator can provide additional information about them.

Part 4. What is meant by my Compensation?

In general, the amount of your earnings from your Employer taken into account under the Plan is all earnings reported to you on Form W-2. In the event your Compensation exceeds \$200,000 (indexed) per year, only the first \$200,000 will be counted as Compensation under the Plan. This \$200,000 cap will be adjusted periodically by the Internal Revenue Service (IRS) for increases in cost-of-living. See your Plan Administrator for the current year's limit on Compensation. Refer to the General Information Sheet to determine whether a more specific definition of Compensation is provided under the Plan.

Part 5. Do any limits apply to the amount which may be allocated to my Individual Account for any Plan Year?

Yes. The total amount which may be allocated to your Individual Account for any year is subject to Internal Revenue Code provisions limiting your allocation amount to the lesser of \$40,000 (indexed) or 100 percent of your compensation paid to you by your Employer for a given year. The \$40,000 limit will be adjusted periodically by IRS for increases in the cost-of-living. See your Plan Administrator for the current year's limit.

You may wish to consult your tax advisor or refer to IRS Publication 571 for more information about these rules. Your Employer is not responsible for calculating your individual contribution limits.

Part 6. Rollover/Transfer Contribution

Unless otherwise stated in your General Information Sheet, your Plan will allow you to make rollover and/or transfer contributions (including a direct transfer pursuant to IRS Revenue Ruling 90-24) to the Plan. If rollover contributions are permitted under the Plan, the Plan may accept rollover contributions and/or Direct Rollovers of distributions made after December 31, 2001 from an Eligible Retirement Plan. Nondeductible Employee Contributions may be directly rolled into the Plan from another 403(b) retirement plan. Rollover contributions from Traditional IRAs and qualified plans are limited to pre-tax contributions.

Part 7. Nondeductible Employee Contributions

Your Plan may allow Nondeductible Employee Contributions. The General Information Sheet will indicate whether or not these contributions can be made under your Plan.

• **Are Nondeductible Employee Contributions subject to a vesting schedule?**

No. You are always 100 percent vested in your Nondeductible Employee Contributions.

• **When may I withdraw Nondeductible Employee Contributions?**

Refer to your General Information Sheet to determine when Employee Contributions can be withdrawn from the plan.

Part 8. Mandatory Employee Contributions.

Your plan may require Mandatory Employee Contributions. If these contributions are required pursuant to a one-time election, this election must be made when you are first eligible for the Plan and the election cannot be changed while employment continues. If you elect not to contribute, you will not be given another opportunity to elect. If you elect to contribute, you cannot later revoke the election. Mandatory Employee Contributions are not subject to the annual elective deferral limit (see Section 4, Part 1, B). The General Information Sheet will indicate whether or not these contributions must be made under your Plan.

SECTION FIVE: DISTRIBUTION OF BENEFITS AND VESTING

Part 1. When may I withdraw money from the Plan?

Certain events must occur before you can withdraw money from the Plan. Benefits may be withdrawn if any of the following occur.

- A. **Severance from service after attaining Normal Retirement Age** – Normal Retirement Age under the Plan is specified on the General Information Sheet.
- B. **Severance from service after satisfying any Early Retirement Age requirement** – The Early Retirement Age conditions, if any, are specified on the General Information Sheet.
- C. **If your Plan allows for Elective Deferrals**
Your Plan may also allow you to take the portion of your account attributable to your Elective Deferrals out of the Plan prior to severance upon attainment of age 59½ as specified on the General Information Sheet.

NOTE: Nonelective and basic or enhanced Matching Contributions under the ACP safe harbor contribution provisions, if provided under the Plan, are subject to the same distribution restrictions as Elective Deferrals except that the ACP safe harbor contributions specified here may not be distributed under the hardship distribution provisions.

Part 2. May I take a payout from the Plan under any other circumstances?

Refer to your General Information Sheet to determine if in-service withdrawals are permitted under your Plan. If so, under certain circumstances, you may take a payout of all or a portion of your vested benefits invested in annuity contracts. The amount which you may withdraw may depend upon whether you have attained age 59½ or not. See your Plan Administrator for further information on in-service withdrawals.

Refer to your General Information Sheet to determine if hardship withdrawals are permitted under the Plan. If so, the amount which you may withdraw may depend on the source of the contribution and the date the funds were credited to your Individual Account. Special rules relating to hardship withdrawals are discussed in more detail below.

In addition, refer to the Distribution Section of your General Information Sheet for additional circumstances, if any, under which you may take distributions after you terminate employment but before you attain Normal or Early Retirement Age.

Part 3. Forms of Distribution

A. How will my benefits be paid to me?

When you are eligible to receive a payout under your Plan, you may always elect to receive a distribution under one of the income options as provided under the terms of the Funding Vehicles you are invested in. Your right to elect a lump sum benefit or installment payment may be limited by the terms of the Plan and the Funding Vehicle that you have invested in as well as your spouse's right to a Qualified Joint and Survivor Annuity (QJSA). Refer to your General Information Sheet and the terms of the Funding Vehicle for more information.

B. May I elect to rollover a distribution to another plan or IRA?

Payments from the Plan that are Eligible Rollover Distributions may be taken in two ways. You may have all or any portion of your Eligible Rollover Distribution either (1) paid in a Direct Rollover to a Traditional individual retirement account (IRA) or another qualifying employer plan or (2) paid to you and you may roll over all or a portion of it within 60 days to an Eligible Retirement Plan. If you choose to have your Plan benefits paid to you, you will receive only 80 percent of the payment, because the Plan Administrator is required to withhold 20 percent of the payment and send it to the IRS as income tax withholding to be credited against your taxes.

If you do not elect to have your distribution either paid to you or paid in a Direct Rollover and your Individual Account does not exceed a certain dollar amount (the "cashout level"), your Employer will make a distribution without your consent if the cashout provision applies to your Plan. However, a distribution will not be made without your consent if the Funding Vehicle you choose under the Plan is either an individual custodial account or an individual annuity contract or the cashout provisions do not apply to your Plan. Refer to the General Information Sheet to determine if the Plan permits cashout distributions and, if so, the cashout level. If the Plan permits cashout distributions, refer to the General Information Sheet to determine if you must include your rollover contributions, if any, in the balance of your Individual Account for purposes of determining whether your Individual Account exceeds the cashout level.

C. What if I have only a small accumulation in the Plan?

The following rules apply to your distribution if the cashout provision applies and your vested Individual Account does not exceed the cashout level:

- i. If the distribution is not an Eligible Rollover Distribution, it will be paid directly to you in a single lump sum.

- ii. If the distribution does not exceed \$1,000 and it qualifies as an Eligible Rollover Distribution, it will be paid, either directly to you or as a Direct Rollover to an IRA, in a single lump sum payment. However, if you do not specify how you would like to receive your distribution, the Plan Administrator will make a single lump sum payment to you unless the General Information Sheet specifies otherwise.
- iii. If the distribution exceeds \$1,000 and it qualifies as an Eligible Rollover Distribution, it will be paid, either directly to you or as a Direct Rollover to an IRA, in a single lump sum payment. However, if you do not specify how you would like to receive your distribution, the Plan Administrator will pay the distribution in a Direct Rollover to an IRA designated by the Plan Administrator.

An amount distributed and rolled over into an IRA by the Plan Administrator under the Plan's cashout distribution provisions will be invested in a product designed to preserve principal and provide a reasonable rate of return and liquidity. The IRA provider that receives the rollover may charge fees and expenses for maintaining the IRA, and these fees and expenses may be assessed directly against the assets of the IRA or billed directly to you. For more information concerning the rollover procedures, the IRA provider, and the fees and expenses relating to the IRA, please contact your Plan Administrator whose address and telephone number are found in the General Information Sheet.

D. What are my spouse's rights under this Plan to survivor benefits?

If your Plan is not subject to the Qualified Joint and Survivor Annuity (QJSA) requirements, payouts of your benefits under the Plan may be made in a form other than a life annuity, as permitted by the terms of the Plan and the Funding Vehicle. Refer to the General Information Sheet to determine if your Plan is subject to the QJSA Requirements.

E. When will my payout be in the form of an annuity?

If your Plan is subject to the QJSA requirements and your vested Individual Account balance is more than \$5,000, and benefits commence before your death, your payout will be in the form of an annuity, unless the annuity option is waived. An annuity will provide you with a series of periodic payments, usually monthly. The annuity must be purchased from an insurance company. The size of the payments you receive from the annuity will depend upon many factors including the value of your vested Individual Account balance.

- i. If you are married, the annuity will provide monthly payments for as long as you or your spouse live. This type of annuity is called a Qualified Joint and Survivor Annuity. If you die before your spouse, the monthly payments to your spouse will be at least 50 percent of the payments you had been receiving before your death. Unless otherwise stated in the General Information Sheet, your survivor annuity percentage will be 50 percent.
- ii. If you are not married, the type of annuity you will receive will provide you with monthly payments for as long as you live.
- iii. If you do not want an annuity payout, you may choose other types of payments, as permitted by the terms of your Plan and the Funding Vehicles you are invested in. To waive the annuity option, you must fill out and sign a waiver form. If you are married, your spouse must consent to and sign the waiver form in the presence of a Notary Public. You and your spouse may sign the waiver form any time within 90 days of the start of your payments.

EXAMPLE: Bill wants to start receiving money on March 31, 2006. He and his spouse may sign the waiver form any time from January 1 through March 31, 2006. Bill may now take his money in another form of payment, such as a single lump sum payment, to the extent permitted by the Plan and the Funding Vehicle.

Part 4. Once I become eligible to receive benefits, when will they be distributed to me?

If the cashout provisions apply and the value of your Individual Account does not exceed the cashout level, the Plan Administrator will direct that your benefits be paid as soon as administratively practicable if you terminate employment. Refer to your General Information Sheet to determine if the cashout provisions apply to your Plan.

If the cashout provision do not apply or if the value of your Individual Account exceeds the cashout level, your benefits will not be paid until you submit a written request to the Plan Administrator for payment. The Plan Administrator will provide you with the proper request forms. Once you have returned the completed request form to the Plan Administrator, payment will be made as soon as administratively practicable after the Plan Administrator received your request.

Part 5. Even if I am eligible to receive benefits, must I have my benefit distributed from the Plan?

If the value of your Individual Account exceeds the cashout limit, your benefit will not be distributed until you request payment from the Plan Administrator. You could choose to leave your benefit in the Plan. However, you must generally begin taking required minimum distributions either at age 70½ or when you retire, if later, as explained in your SPD.

Part 6. What are required minimum distributions?

The tax laws and regulations require you to start taking minimum distributions from the Plan by April 1 of the year following the year in which you turn 70½ years of age, or, if later, April 1 of the year following the year in which you retire. Minimum distributions must continue every year thereafter and must be taken by December 31. In general, the amount of the annual minimum distribution is determined by dividing the balance in your Individual Account by a life expectancy factor. Failure to begin minimum distribution by the required beginning date may subject you to a substantial federal tax penalty.

Part 7. When I request my benefits, will I receive the full value of my account(s) established under the Plan?

It depends upon the reason you are receiving the distribution and your vested percentage in your contributions.

You will always be 100 percent vested in your Employee Contributions, but a vesting schedule may be applied to Employer or Matching Contributions, as explained below.

Your distribution will be the full value of your Individual Account (that is, you will be 100 percent vested) if you reach Normal Retirement Age, become disabled or if your Employer terminates the Plan or completely discontinues contributions to the Plan. Also, your Beneficiaries will be entitled to the full value of your Individual Account at your death.

However, if you terminate employment and thus become eligible for a distribution from the Plan, your distribution will be only the vested amount in your Individual Account.

Part 8. How is my vested amount determined?

Your vested amount is determined by multiplying a percentage from a vesting schedule by the total value of your Individual Account. The vesting schedule determines how rapidly your Individual Account balance becomes nonforfeitable based on years of service.

EXAMPLE: Assume you have \$10,000 in the portion of your Individual Account attributable to Employer Contributions and you terminate employment when you are 40 percent vested. Your vested amount would be \$4,000 (.40 x \$10,000)

The vested amount of your Individual Account will depend upon the types of contributions made to your account.

As noted, all Employee Contributions are 100 percent vested at all times. Employer or Matching Contributions may be subject to a vesting schedule. Refer to the General Information Sheet to determine whether Employer or Matching Contributions to your Plan are subject to a vesting schedule. If your Employer or Matching Contributions are subject to a vesting schedule, your vested benefit is determined by multiplying a percentage from a vesting schedule by the total amount of the Employer or Matching Contributions which have been contributed on your behalf.

The vesting schedule for your Matching Contributions and Employer Contributions determines how fast your money becomes nonforfeitable based upon your years of service.

For Plans with ACP safe harbor contributions, the safe harbor basic or enhanced Matching Contributions and/or safe harbor nonelective contributions are 100 percent vested at all times.

Contributions made to the Plan by you or on your behalf may be used to purchase units in various investment funds. The value of these funds can change daily. Because the value of your units can change daily, the value shown on your statement(s) may be different than the actual amount you receive for a payout.

Part 9. Which vesting schedule will be used to determine my vested benefit?

You will become vested according to the vesting schedule(s) selected on the General Information Sheet. Different vesting schedules may apply to Matching Contributions and Employer Contributions.

Part 10. What years of service are counted for vesting purposes?

All of your years of service with your Employer are counted for the purpose of determining your vested percentage unless otherwise provided on the General Information Sheet. Your Plan may also credit prior years of service with eligible employers. Refer to the General Information Sheet.

Part 11. If I am not 100 percent vested when I terminate employment, and I receive a distribution after terminating employment, what happens to the dollars I leave in the Plan?

If you are not 100 percent vested and receive a distribution, the dollars left in the Plan are called Forfeitures. Non-vested dollars are forfeited after the terminated Participant receives a distribution of a vested benefit. Forfeitures may be used by the Employer to pay administrative expenses of the Plan. Refer to the General Information Sheet to determine how remaining Forfeitures (if any) will be used for your Plan.

Part 12. What happens if I terminate employment and return to work after receiving a distribution of my vested benefit?

A former Participant who returns to work for the Employer before incurring five consecutive one-year breaks in service may recapture the forfeited benefit. Your forfeited benefit will be restored immediately by your Employer if you have not incurred five consecutive one-year breaks in service.

Part 13. What happens if I quit my job and incur a break in service and then return? When do I participate again?

The answer to these questions depends upon whether you had a vested interest in contributions (other than your Elective Deferrals) at the time you quit and incurred a break in service.

If you had a vested interest

1. You will participate immediately upon your return to employment
2. Your vesting years of service accumulated prior to the time you quit and incurred a break in service will be counted in figuring your vested interest.

If you did not have a vested interest

1. Any eligibility years of service occurring before the break in service will be taken into account and you will begin to participate again upon your return to service unless the number of consecutive one year breaks in service equals or exceeds the greater of five years, or the aggregate number of eligibility years of service preceding the breaks in service. If your period of consecutive breaks in service exceeds the greater of 5 or your period of prior service, you will be treated as a new Employee and will participate again when you satisfy the Plans eligibility requirements.
2. Any vesting years of service occurring before the break in service will be taken into account in computing your vested interest under the Plan unless the number of consecutive one year breaks in service equals or exceeds the greater of five years, or the aggregate number of vesting years of service preceding the breaks in service. For example, if you work for two years, quit without being vested, and then return to employment after a break of two years, the Plan will give you vesting credit for the initial two year period.

Part 14. Do any restrictions or penalties apply on distributions?

Yes. If you receive a distribution before reaching age 59½, you must pay an additional 10 percent penalty tax on dollars included in income. There are, however, exceptions to the 10 percent early distribution penalty. Your tax advisor can assist you in determining if one of the exceptions applies to your distribution.

Part 15. What happens if I die before I begin to receive my benefits?

- A.** Your Beneficiary will receive the total value of your Individual Account when you die. If you are married at the time of your death and your Plan is subject to QJSA, your spouse will automatically be your Beneficiary for at least 50% of the accumulation. To choose a non-spouse Beneficiary for more than 50% of the benefit, you must sign a written form listing a nonspouse Beneficiary. Your spouse must give written consent to this in the presence of a Notary Public.

NOTE: Contact your Plan Administrator if your Plan is subject to QJSA and you wish to choose a nonspouse Beneficiary.

To the extent provided under the terms of the Funding Vehicle, you may choose one or more of the options listed in the contract for payment of the benefit to your Beneficiary or you may leave the choice to your beneficiary.

- B.** Unless otherwise provided by the Funding Vehicle, if the value of your Individual Account is no more than \$5,000, your Beneficiary will receive a lump sum payment of the entire amount. If your Beneficiary is your spouse, he or she may generally elect to roll over your Individual Account to an IRA.

- C. If your Plan is not subject to the QJSA requirements and the value of your Individual Account is greater than \$5,000, your Beneficiary may receive a payout(s) in a form other than an annuity.
- D. If the value of your Individual Account is greater than \$5,000 and your Plan is subject to the QJSA requirements, your Beneficiary will receive the money in the form of an annuity unless a special form is signed. These periodic payments will usually be made on a monthly basis for as long as your Beneficiary lives.

EXAMPLE: Clarence, age 38, signs the waiver form. Mildred, his wife, signs the waiver form in the presence of a Notary Public. Clarence dies two years later. Mildred now has a choice of payments. She can, for example, take all the money in a single lump sum and roll it into her Traditional IRA or as an annuity.
- E. If you want to designate a Beneficiary that is not your spouse for more than 50% of your benefit, you must sign a special form. This form must also be signed by your spouse in the presence of a Notary Public. If you are under age 35 when you sign this form, you must sign a new form once you reach age 35.

Part 16. Are there any circumstances under which I may lose, be denied, or have anticipated benefits reduced under the Plan?
Loss, denial or reduction of anticipated benefits may occur if you terminate employment before becoming fully vested or if all or a portion of your benefit is set aside for an alternate payee under a qualified domestic relations order (QDRO). (Participants and Beneficiaries may obtain without charge, a copy of a description of the Plan's procedures governing QDRO determinations from the Plan Administrator.) You may also lose your benefit if the Plan cannot locate you when a benefit becomes payable to you.

Part 17. Are there special rules for withdrawals on account of financial hardship?
Yes. If so indicated in the General Information Sheet, you may take a withdrawal on account of financial hardship. The General Information Sheet will indicate which, if any, contribution types (that is, Employee Contributions, Employer Contributions or Matching Contributions) you can withdraw based on the funding vehicle used for the Plan. Financial hardship means an immediate and heavy financial need which cannot reasonably be accommodated from your other resources. The amount of a hardship withdrawal cannot exceed the amount needed to satisfy the hardship. Earnings on Elective Deferrals cannot be withdrawn on account of financial hardship. Your Elective Deferrals may be suspended for six months after receipt of a hardship distribution. Hardship distributions are subjected to a 10 percent penalty tax if received before you reach age 59½.

SECTION SIX: CLAIMS PROCEDURE

Part 1. Do I or my Beneficiary have to do anything to start receiving benefits when I retire or die?
You or your Beneficiary must file a written request with the Plan Administrator in order to start receiving benefits when you become eligible for them or when you die. If you do not receive a benefit to which you believe you are entitled, you should file a claim with the Plan Administrator.

Part 2. How can a claim be filed?
You may claim a benefit to which you think you are entitled by filing a written request with the Plan Administrator. The claim must set forth the reasons you believe you are eligible to receive benefits and authorize the Plan Administrator to conduct such examinations and take such steps as may be necessary to evaluate the claim.

Part 3. What if my claim is denied?
Except as described below, if your claim is denied, the Plan Administrator will provide you or your Beneficiary with a written notice of the denial within 90 days of the date your claim was filed. This notice will give you the specific reasons for the denial, the specific provisions of the Plan upon which the denial is based, and an explanation of the procedures for appeal.

In the case of a claim for disability benefits, if the Plan Administrator is making a determination of whether you are disabled (as defined in the Plan), you will be notified of a denial of your claim within a reasonable amount of time, but not later than 45 days after the Plan receives your claim. The 45-day time period may be extended by the Plan for up to 30 days, if the Plan Administrator determines that an extension is necessary due to matters beyond the control of the Plan. The Plan Administrator will notify you, before the end of the 45-day period, of the reason(s) for the extension and the date by which the Plan expects to make a decision regarding your claim.

If, before the end of the 30-day extension, the Plan Administrator determines that, due to matters beyond the control of the Plan, a decision regarding your claim cannot be made within the 30-day extension, the period for making the decision may be extended for an additional 30 days, provided that the Plan Administrator notifies you, prior to the end of the first

30-day extension, of the circumstances requiring the additional extension and the date as of which the Plan expects to make a decision. The notice will specifically explain the standards on which the approval of your claim will be based, the unresolved issues that prevent a decision on your claim, and the additional information needed to resolve those issues. You will have at least 45 days within which to provide the specified information.

The period of time within which approval or denial of your claim is required to be made generally begins at the time your claim is filed. If the period of time is extended because you fail to submit information necessary to decide your claim, the period for approving or denying your claim will not include the period of time between the date on which the notification of the extension is sent to you and the date on which you provide the additional information.

The Plan Administrator will provide you with written or electronic notification if your claim is denied. The notification will provide the following:

- i. The specific reason or reasons for the denial;
- ii. Reference to the specific section of the Plan on which the denial is based;
- iii. A description of any additional information that you must provide before the claim may continue to be processed and an explanation of why such information is necessary;
- iv. A description of the Plan's review procedures and the time limits applicable to such procedures, including a statement of your right to bring a civil action under Section 502(a) of the Employee Retirement Income Security Act (ERISA) following a claim denial on review;
- v. In the case of a Plan providing disability benefits,

If a Plan Administrator used an internal rule or guideline in denying your claim, the Plan Administrator must provide either the specific rule or guideline or a statement that the rule or guideline was relied upon in denying your claim and that a copy will be provided free of charge to you upon request.

If the claim denial is based on a medical necessity, experimental treatment or similar situation, either an explanation of the scientific or clinical basis for the denial, applying the terms of the Plan to your medical circumstances, or a statement that an explanation will be provided free of charge upon request.

Part 4. Can the decision of the Plan Administrator be appealed?

You or your Beneficiary will have 60 days from receipt of the notice of claim denial in which to appeal the Plan Administrator's decision. You may request that the review be in the nature of a hearing and an attorney may represent you.

However, in the case of a claim for disability benefits, if the Plan Administrator is deciding whether you are disabled under the terms of the Plan, you will have at least 180 days following receipt of notification of a claim denial within which to appeal the Plan Administrator's decision.

You may submit written comments, documents, records, and other information relating to your claim. In addition, you will be provided, upon request and free of charge, reasonable access to, and copies of, all documents, records, and other information pertaining to your claim.

Your appeal will take into account all comments, documents, records, and other information submitted by you relating to the claim, even if the information was not included originally.

If the claim is for disability benefits:

- i. Your claim will be reviewed independent of your original claim and will be conducted by a named fiduciary of the Plan other than the individual who denied your original claim or any of his or her employees.
- ii. In deciding an appeal of a claim denial that is based in whole or in part on a medical judgment, the appropriate named fiduciary will consult with a health care professional who has appropriate training and experience in the field of medicine involved in the medical judgment;
- iii. The Plan Administrator will provide you with the name(s) of the health care professional(s) who was consulted in connection with your original claim, even if the claim denial was not based on his or her advice. The health care professional consulted for purposes of your appeal will not be the same person or any of his or her employees.
- iv. You will be notified of the outcome of your appeal no later than 45 days after receipt of your request for the appeal, unless the Plan Administrator determines that special circumstances require an extension of time for processing the claim. If the Plan Administrator determines that an extension is required, written notice of the extension will be provided to you prior to the end of the initial 45-day period. The notice will identify the special circumstances requiring an extension and the date by which the Plan expects to make a decision regarding your claim

The Plan Administrator will provide you with written or electronic notification of the final outcome of your claim. The notification will include:

- i. 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 claim;
- ii. A statement describing any additional voluntary appeal procedures offered by the Plan, your right to obtain the information about such procedures, and a statement of your right to bring an action under Section 502(a) of ERISA; and
- iii. If a Plan Administrator used an internal rule or guideline in denying your claim, either the specific rule or guideline; or a statement that the rule or guideline was relied upon in denying your claim and that a copy will be provided free of charge to you upon request.

If the claim denial is based on a medical necessity, experimental treatment or similar situation, either an explanation of the scientific or clinical basis for the denial, applying the terms of the Plan to your medical circumstances, or a statement that an explanation will be provided free of charge upon request.

SECTION SEVEN: MISCELLANEOUS

Part 1. May I borrow money from the Plan?

Refer to the General Information Sheet to determine if the Plan permits loans to Participants. If so, under certain circumstances you are eligible to borrow a portion of your vested Individual Account. If loans are available under your Plan, refer to the Loan Information Sheet which you received with this SPD for more information about your loan program.

Part 2. What happens if the Plan is terminated?

The Employer expects to continue the Plan indefinitely. However, in the unlikely event the Employer must terminate the Plan, you will become 100 percent vested in the aggregate value of your Individual Account regardless of whether your vesting years of service are sufficient to make you 100 percent vested under the vesting schedule(s).

If the Plan terminates, benefits are not insured by the Pension Benefit Guaranty Corporation (PBGC). Under the law, PBGC insurance does not cover the type of plans called defined contribution plans. This Plan is a defined contribution plan and, therefore, is not covered.

Part 3. May I direct the investment of the assets in my Individual Account?

Your plan permits self-direction of contributions unless otherwise stated in the General Information Sheet. Refer to the General Information Sheet to determine the Funding Vehicles that are available to you under the Plan. The Plan Administrator will establish uniform and nondiscriminatory policies describing how and when you may provide investment directions.

Your Employer will notify you if the Plan is intended to satisfy the requirements of Section 404(c) of the Employee Retirement Income Security Act (ERISA). If you are notified of this intent, your Employer will provide you the opportunity to decide how your Individual Account is invested, enabling you to choose investments that fit your personal needs. Your Employer and other people in charge of the Plan would not be responsible for the investment performance of your Individual Account which results from your investment instructions.

Part 4. May I transfer money from the Plan?

Refer to the General Information Sheet to determine if the Plan allows you to transfer your Individual Account from the Plan pursuant to IRS Revenue Ruling 90-24. Contact your Plan Administrator for more information.

Part 5. Who pays for the administrative expenses related to the Plan?

All reasonable expenses of administration, including, but not limited to, those involved in retaining necessary professional assistance may be paid from the assets of the Plan to the extent permitted by the Funding Vehicle. Such expenses may be allocated among all Plan Participants or, with respect to expenses directly related to you, charged to your Individual Account. Examples of expenses that may be directly related to you include, but are not limited to, general recordkeeping fees and expenses incurred in relation to loans (if permitted under your Plan), distributions, qualified domestic relations orders and your ability to direct the investment of your Individual Account, if applicable. For example, the Employer may pay such expenses for current Employees, but have them deducted from the Individual Accounts of former Employees who choose to leave their assets in the Plan. Finally, the Employer may, in its discretion, pay any or all of these expenses. Your Plan Administrator will provide you with a summary of all Plan expenses and the method of payment of the expenses upon request.

Part 6. Does the Employer have the authority to change provisions within the Plan?

Yes, the Employer, under certain circumstances, has the authority to amend the Plan to change or eliminate provisions. The Employer may not, however, reduce accrued or protected benefits under the Plan. See your Plan Administrator for rules and restrictions that apply.

SECTION EIGHT: RIGHTS UNDER ERISA

If your Plan is subject to ERISA, as a Participant in this 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 do the following.

Receive Information About Your Plan and Benefits

1. Examine, without charge, at the Plan Administrator's office and at other specified locations, such as worksites and union halls, all Plan 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.
2. Obtain, upon request to the Plan Administrator, copies of documents governing the operations of the Plan, including insurance contracts and collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and updated Summary Plan Description (SPD). The Plan Administrator may charge a reasonable fee for the copies.
3. 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.
4. Obtain, once a year, a statement of the total pension benefits accrued and the nonforfeitable (vested) pension benefits (if any) or the earliest date on which benefits will become nonforfeitable (vested). The Plan may require a written request for this statement, but it must 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 pension 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 may 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 which 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 the costs and fees. If you lose, the court may order you to pay these costs and fees, for example, if the court 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 nearest area 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.

Further, if this Plan is maintained by more than one Employer, you may obtain a complete list of all such Employers by making a written request to the Plan Administrator.