

**AMENDMENT No. ____ TO THE WELFARE PLAN
OF THE CENTRAL LABORERS' WELFARE FUND**

WHEREAS, the right to further amend the Summary Plan Description has been reserved by the Board of Trustees, which right the Board of Trustees now desires to exercise.

WHEREAS, we the undersigned, being all of the Trustees and all of the persons entitled to notice of, to attend and to vote at meetings do hereby authorize, consent and agree that the following action may be taken and adopted for the benefit of the Participants covered under the Plan.

NOW, THEREFORE, the Board of Trustees amend the Welfare Plan as follows subject to the conditions specified above:

1. The section of the Summary Plan Description entitled "Adding a Child by Birth or Adoption" is hereby amended to read as follows:

Adding a Dependent Child or Adult Dependent by Birth, Adoption or Open Enrollment

Generally, the Plan covers natural born children, adopted children (including placement for adoption), stepchildren and children for whom you are the legal guardian subject to the following requirements:

- For initial enrollment of ***natural born, adopted children (including placement for adoption), stepchildren and children for whom you are the legal guardian***, you must notify the Fund Office and provide the required documentation within 31 days of the qualifying event (i.e., adoption, placement for adoption, legal guardianship or marriage for addition of stepchildren) for coverage to begin as of the date of the qualifying event.
- For initial enrollment of ***natural born children, being added due to birth***, you must notify the Fund Office and provide the required documentation within 90 days of the qualifying event (i.e., the birth) for coverage to begin as of the date of birth. If you notify the Fund Office or delay providing required documentation for a period greater than 31 days (90 days in the case of a birth), coverage will begin on the first day of the month following the month in which the Fund Office receives notification and all required documentation.

If you adopt a child or have a child placed with you for legal guardianship or adoption, coverage will become effective on the date of placement as long as you are responsible for health care coverage. Stepchildren are eligible for coverage on the date of your marriage, provided your spouse is required to maintain medical and/or dental coverage. All children need to meet the Plan's definition of a Dependent described in the definitions section of this Summary Plan Description.

You may add a Dependent without a qualifying event during the Plan's annual Open Enrollment process. If adding your Dependent during Open Enrollment and that enrollment is not due to a qualifying event, your Dependent's eligibility will be effective, the first day of the plan year for which you are enrolling, the first day of the participant's eligibility, if after the start of a plan year, or the first day of the month following receipt of the Open Enrollment form and all required documents if they are submitted after the Open Enrollment deadline date, whichever is later.

Please remember that your Dependent(s)' eligibility may be subject to verification and may require additional documentation such as a birth certificate(s), divorce decree(s), marriage license, death certificate(s) or other information necessary to confirm a Dependent's relationship and eligibility for benefits. Some of the documentation can be completed by you or your Dependent. However, some forms

must be completed by a Dependent's insurance carrier or Dependent's employer, if applicable. If the required documentation is not received on a timely basis, then your Dependent's eligibility may be delayed as provided above.

2. The section of the Summary Plan Description entitled "Child Losing Eligibility" is hereby amended to read as follows:

Dependent Child or Adult Dependent Losing Eligibility

In general, your dependent child or adult dependent is no longer eligible for coverage when he or she no longer meets the definition of Dependent as described in this Summary Plan Description. You should notify the Fund Office immediately when your dependent child or adult dependent is no longer eligible for coverage. See the definition of Dependent in the Definitions section of the Summary Plan Description.

Your Dependent may consider applying for COBRA Continuation Coverage as he or she nears the age of 26 or otherwise loses eligibility as a result of no longer being a Dependent under the Plan. Generally, your Dependent may elect COBRA Continuation Coverage for up to 36 months when his or her Plan coverage ends provided you notify the Fund Office within 60 days of your Dependent losing eligibility for Plan coverage.

3. The definition of "Dependent" in the Definitions section of the Summary Plan Description is hereby amended to read as follows:

Dependent means:

- Your lawful spouse; and
- Your child (including a natural child, legally adopted child, child formally placed for adoption, stepchild, and a child under legal guardianship).
- An unmarried child who is over age 26 who:
 - continues to be incapable of self-sustaining employment by reason of any handicap condition;
 - otherwise meets the criteria previously described;
 - is chiefly dependent upon you for lifetime care and supervision; and
 - who was considered to be handicapped upon reaching age 26.

Upon request of the Plan, proof of such incapacity and dependency is to be furnished from time to time, but in no event more frequently than once a year. The child must maintain a principal residence with you for more than one-half of the calendar year and must be dependent on you for more than one-half of his or her support for the calendar year.

- An unmarried disabled child who has reached age 26, is covered as a Dependent if the child does not live with you, provided that:

- the child's parents:
 - are divorced or legally separated under a decree of divorce or separate maintenance;
 - live apart at all times during the last six (6) months of the calendar year;
 - provide over one-half of the child's support for the calendar year;
 - the child is in the custody of one or both of his or her parents for more than one-half of the calendar year; and
 - the child is the qualifying child or qualifying relative, as defined in the Tax Code, of one of the parents.
- Your child who is under age 26 and is named as an alternate recipient in a Qualified Medical Child Support Order (QMCSO) approved by the Board of Trustees or a National Medical Support Notice issued by an authoritative agency within the state where the child, custodial parent or Participant resides.
 - Notwithstanding anything contained in this Plan to the contrary, you or your Dependent has the affirmative duty to inform the Plan if and when an individual ceases to be a Dependent within sixty (60) days of such event.

The Board of Trustees hereby adopts this amendment to the Central Laborers' Summary Plan Description as of this ____ day of November, 2018.

Chairman

Secretary