# TABLE OF CONTENTS

FISCAL YEAR OF THE PLAN. ................................................................. 1

ESTABLISHMENT AND ADMINISTRATION OF THE PLAN. .............. 1

CONTRIBUTING EMPLOYERS AND COLLECTIVE BARGAINING AGREEMENTS AVAILABLE TO PARTICIPANTS AND BENEFICIARIES. .............................................. 4

ELIGIBILITY AND EMPLOYER CONTRIBUTIONS. .................................... 4

TIME AND MANNER OF PAYMENT OF BENEFITS. ................................ 4

WRITTEN APPLICATION FOR BENEFITS NECESSARY. ...................... 5

BENEFITS NOT CLAIMED. .................................................................... 6

UNDELIVERED OR UNCASHED BENEFIT CHECKS WILL BE VOIDED AFTER 90 DAYS. .............................................................................. 6

ALLOCATION OF ADMINISTRATIVE EXPENSES. ................................... 7

FAILURE TO MAKE APPLICATION OR WHERE CHECKS ARE UNCASHED AND VOIDED. ................................................................. 7

DEATH OF A PARTICIPANT-BENEFICIARY PROVISIONS. ...................... 8

DISTRIBUTIONS UNDER USERRA .......................................................... 8

FILING CLAIMS AND REVIEW OF DENIED CLAIMS. ......................... 8

TERMINATION OF THE PLAN. .............................................................. 9

STATEMENT OF ERISA RIGHTS ......................................................... 9
Dear Participants:

We are pleased to distribute this booklet summarizing and describing the benefits under your Vacation Plan. The booklet summarizes how and when the benefits are provided, the procedures involved in filing an appeal and other matters concerning the operation of the Plan. Also included is information concerning the administration of the Plan and your rights as a participant.

If you have any questions, do not hesitate to call or write the Trustees at the Fund Office address.

Sincerely,

Mr. Reginald L Thomas, Trustee
Mr. Tim L. Bell, Trustee
Mr. Mitchell P. Rowley, Trustee
Mr. Tim Price, Trustee
Mr. Don Greenwell, Trustee
Mr. Dan R. Meyer, Trustee
Mr. Robert Plisky, Trustee
Ms. Bridgette Williams, Trustee

Greater Kansas City Laborers Vacation Plan
6405 Metcalf, Suite 200
Overland Park, Kansas 66202
(913) 236-5490

TO RECEIVE YOUR VACATION BENEFIT CHECK, YOU MUST COMPLETE AN APPLICATION FORM EACH YEAR BETWEEN SEPTEMBER 1 AND NOVEMBER 1.

You can obtain the claim form only at the following locations:

Laborers Local Union No. 264
1101 East 87th Street, Suite 103
Kansas City, Missouri 64131
(816) 361-1000

Laborers Local Union No. 1290
2600 Merriam Lane
Kansas City, Kansas 66106
(913) 432-1903

Heavy Construction Laborers’ Local Union No. 663
7820 Prospect
Kansas City, Missouri 64132
(816) 444-0062
Laborers Local Union No. 579
1203 North 6th Street
St. Joseph, Missouri 64501
(816) 232-9160

Laborers Local Union No. 319
2001 Empire Avenue
Joplin, Missouri 64804
(417) 623-5458

Laborers Local Union No. 110
11000 Lin Valle Drive
St. Louis, Missouri 63123
(314) 892-0777

This is for your protection! In this way, only you will receive your vacation benefit check, and it will be mailed to you at your current address.
SUMMARY PLAN DESCRIPTION

GREATER KANSAS CITY LABORERS VACATION PLAN

The following is the Summary Plan Description of the Greater Kansas City Laborers Vacation Plan and accurately reflects the contents of the Plan as of November, 2015. The Plan provides Vacation benefits to participants or beneficiaries.

FISCAL YEAR OF THE PLAN

The financial records of the Vacation Plan are kept on fiscal year basis beginning on the first day of November of one year and ending on the thirty-first day of October of the following year.

ESTABLISHMENT AND ADMINISTRATION OF THE PLAN

The Plan was established April 1, 1973, pursuant to a collective bargaining agreement between Laborers Local Unions No. 264, 555 and 1290 of the Western Missouri and Kansas Laborers District Council of the International Laborers Union of North America and The Builders’ Association. The Greater Kansas City Laborers Vacation Plan and Construction Industry Laborers Vacation Fund merged pursuant to the terms and conditions of a Merger Agreement effective October 31, 2008. The Plan is now maintained pursuant to collective bargaining agreements between Laborers Local Unions No. 264 and 1290 of the Western Missouri and Kansas Laborers District Council of the International Laborers Union of North America and The Builders’ Association and Heavy Construction Laborers’ Local Union No. 663 of the Western Missouri and Kansas Laborers District Council of the International Laborers Union of North America and Heavy Constructors’ Association of Greater Kansas City Area. Pursuant to contract stipulations, other employers who are non-members of The Builders’ Association or the Heavy Constructors Association also make contributions to the Plan on behalf of employees represented by Laborers Local Unions No. 264 and 1290 and 663.

The Vacation Plan is maintained and administered by a Board of Trustees on which the Unions and employers are equally represented. There are four union Trustees and four employer Trustees on the Board. The Trustees are listed below. The Board has the primary responsibility for decisions regarding eligibility rules, time and manner of payment of benefits, administrative policies, management of Plan assets and interpretation of Plan provisions.

Although the Trustees are legally designated as the Plan Administrator, they have delegated many of the day-to-day functions to a professional Administrative Manager or Contract Administrator, TIC International Corporation. The Administrative Manager maintains the eligibility records, accounts for employer contributions, makes benefit payments and performs other routine administrative functions under the direction of the Trustees. The Administrative Manager and Fund Office is located at:
6405 Metcalf, Suite 200  
Overland Park, Kansas  66202-4084  
(913) 236-5490

If you wish to contact the Board of Trustees, write to:

Board of Trustees  
Greater Kansas City Laborers Vacation Plan  
6405 Metcalf, Suite 200  
Overland Park, Kansas  66202-4084  
(913) 236-5490

The Trustees of the Plan are:

**MANAGEMENT TRUSTEES**

Mr. Don Greenwell  
Chairman, Board of Trustees  
The Builders Association  
720 Oak Street  
Kansas City, Missouri  64106

Mr. Dan R. Meyer  
Rau Construction Company  
9101 W. 110th Street, Suite 150  
Overland Park, Kansas  66210

Mr. Robert Plisky  
American Paving & Construction Co.  
1203 East 85th Street  
Kansas City, Missouri  64131

Ms. Bridgette Williams  
The Heavy Constructors Association of the Greater Kansas City Area  
Town Pavilion  
1100 Walnut, Suite 2950  
Kansas City, Missouri  64106
Any interpretation of the Plan provisions rests with the Board of Trustees. The Vacation Plan may be amended or changed at any time by a vote of the Board of Trustees subject to the applicable provisions of the Trust Agreement and the applicable collective bargaining agreements.

No employer or union, nor any representative of any employer or union, is authorized to interpret this Plan on behalf of the Board nor can an employer or union act as an agent of the Board of Trustees.

The Trustees of the Plan have the sole authority to interpret, construe and apply the provisions of the Declaration and Agreement of Trust and Plan Documents and any rules and regulations established by the Trustees to determine a participant’s eligibility for, entitlement to and/or the nature, duration and amount of benefits.

As required by law, an independent auditor examines the financial records each year and certifies them as to their accuracy, completeness and fairness. In addition, the Trustees are required to submit annual financial statements and other reports to the United States Department of Labor and the Internal Revenue Service. These reports are available for inspection at the offices of the Board of Trustees and other specified locations during normal business hours.

The Trustees have the power and discretion to invest the assets of the Plan in accordance with the Trust Agreement. The Trustees, in the future, may designate a professional manager to invest Plan assets.
All expenses incurred to administer the Plan are paid out of amounts derived from income on the investments and from monies accumulated through participants' funds being returned undelivered and from uncashed checks which have been voided. If these sources are not adequate to pay the administrative expenses of the Fund, the Board of Trustees may charge each individual participant’s account with a proportionate share of such expenses.

CONTRIBUTING EMPLOYERS AND COLLECTIVE BARGAINING AGREEMENTS AVAILABLE TO PARTICIPANTS AND BENEFICIARIES

A complete list of the employers sponsoring the Plan and/or making contributions to the Plan may be obtained by participants and beneficiaries upon written request to the Board of Trustees, and such list is available for examination by participants and beneficiaries at the administrative offices of the Board of Trustees. Participants and beneficiaries may also receive from the Board of Trustees, upon written request, information as to whether a particular employer or employee organization (union) is a Plan sponsor and, if the employer or union is a Plan sponsor, the address of the employer or union.

A copy of any collective bargaining agreement between Laborers Local Unions No. 264 and 1290 and The Builders’ Association or Heavy Construction Laborers’ Local Union No. 663 of the Western Missouri and Kansas Laborers District Council of the International Laborers Union of North America and Heavy Constructors Association or any other employer who is required to make contributions to the Plan may be obtained by participants and beneficiaries upon written request of the Board of Trustees at the above address and is available for examination by participants and beneficiaries at the administrative offices of the Board of Trustees.

A reasonable charge, not to exceed actual expense of copying, will be made for copies.

ELIGIBILITY AND EMPLOYER CONTRIBUTIONS

Contributions are made to the Plan on behalf of employees working under collective bargaining agreements between their employer and Laborers Local Unions No. 264, 1290, 663, 579, 319, and 110 which require such contributions. Contributions are due from such employer on the basis of a certain amount for each hour worked by the employee under the collective bargaining agreement. The hourly rate is set out in the collective bargaining agreement. Withholding taxes and FICA on the contributions are deducted from the gross pay by the employer before the contributions are sent to the Plan.

TIME AND MANNER OF PAYMENT OF BENEFITS

Each employee (participant) for whom an employer has made contributions to the Vacation Plan is entitled to receive all accumulated vacation benefits in mid-November of each year. Monies credited to the participant’s account for hours worked in the period October 1st to September 30th of the following year will be paid annually to
the participant as an initial payout in mid-November and a second payout in mid-
December for payment of late contributions.

Except that, (1) delinquent employer contributions for work performed prior to
September 30th of any year which are received by the Fund after the close of the books
for that plan year, shall be paid to participants during the month following the month in
which the delinquent or late contributions are received; and (2) unclaimed benefits may
be paid to any participant who failed to apply, or failed to cash a benefit check in the
month following the month such participant is located up to one year after benefits have
been paid.

For example, if the employer failed to make hourly vacation contributions for the
month of September 2015, and later makes payments of those contributions in
March 2016, those contributions will be paid as benefits during April 2016.

WRITTEN APPLICATION FOR BENEFITS NECESSARY

To receive vacation benefits, you must obtain a vacation form each year from
one of the Laborers Local Union offices. The location of the Union offices are:

**Laborers Local Union No. 264**
1101 East 87th Street, Suite 103
Kansas City, Missouri 64131
(816) 361-1000

**Laborers Local Union No. 1290**
2600 Merriam Lane
Kansas City, Kansas 66106
(913) 432-1903

**Laborers Local Union No. 663**
7820 Prospect
Kansas City, Missouri 64132
(816) 444-0062

**Laborers Local Union No. 579**
1203 North 6th Street
St. Joseph, Missouri 64501
(816) 232-9160

**Laborers Local Union No. 319**
2001 Empire Avenue
Joplin, Missouri 64804
(417) 623-5458
The vacation form may be obtained from the Local Union offices during business hours, Monday through Friday, except for holidays, and during the period September 1st through November 1st of each year.

After the participant fills out the vacation form, the Local Union will deliver the vacation form to the Board of Trustees and the Trustees will authorize the payment of benefits at the time set forth above.

**BENEFITS NOT CLAIMED**

If a participant fails to make an application for benefits between September 1st and November 1st of any year and Trustees are not reasonably able to locate such individuals, the assets will be deposited in the general account of the Fund and after one (1) year may be used for payment of administrative expenses or paid to the Greater Kansas City Laborers Welfare Fund to provide benefits to eligible participants of the Welfare Fund. In the case of contributions received on behalf of participants working under the Heavy Construction Laborers’ Local Union No. 663 collective bargaining agreements, funds will be accounted for separately and after one (1) year may be used for payment of administrative expenses or paid to the Construction Industry Laborers Welfare Fund to provide benefits to eligible participants of the Welfare Fund.

**UNDELIVERED OR UNCASHED BENEFIT CHECKS WILL BE VOIDED AFTER 90 DAYS**

Any checks not delivered to participants and returned to the Bank or the Board of Trustees or any checks not cashed within ninety (90) days of the date of the check will be voided and the assets deposited in the general account of the Fund. Such assets may be used for the payment of administrative expenses after one (1) year or paid to the Greater Kansas City Laborers Welfare Fund to provide benefits to eligible participants of the Greater Kansas City Laborers Welfare Fund. In the case of participants working under the Heavy Construction Laborers’ Local Union No. 663 collective bargaining agreement, any checks not delivered or returned will be treated in accordance with the above procedures and such assets will be used for payment of administrative expenses after one (1) year or paid to the Construction Industry Laborers Welfare Fund to provide benefits to eligible participants of the Construction Industry Laborers Welfare Fund.

The following Procedures will be followed in order to distribute unclaimed checks:

1. Each month after employer contributions are received, the Fund Administrator will cross check with local unions and request addresses from employers if not included in the remittance reports.
2. Before the annual payout, the Fund Administrator will send a list of names of participants without addresses to the participating local unions to obtain last known addresses.

3. After the annual payout, the Fund Administrator will utilize a third party agent or online service to attempt to locate participants with unclaimed checks. The cost of this search shall be allocated to such participant's accounts reducing the total benefit payable.

4. The Fund Administrator will send letters to the last known addresses of participants with unclaimed vacation checks.

5. In the spring of each year the Fund Administrator will publish, in general circulation newspapers, the remaining list of participants' names with unclaimed checks.

ALLOCATION OF ADMINISTRATIVE EXPENSES

In the event that administrative expenses or other proper expenses exceed the income of the Fund plus unclaimed, undelivered or uncashed vacation checks, the Board of Trustees may charge each individual participant’s account with proportionate share of such expenses. The Trustees reserve the right to charge the expenses associated with the Plan’s unclaimed benefit procedures to individual participant’s accounts who have not claimed their benefits.

FAILURE TO MAKE APPLICATION OR WHERE CHECKS ARE UNCASHED AND VOIDED

If a participant fails to make an application for benefits between September 1st and November 1st of any year, the participant may obtain such benefits by writing to the Board of Trustees at the above address after February 10th requesting payment of such benefits and stating participant's address, Social Security number and the period for which the participant claims participant did not receive benefits. You may only obtain payment of those benefits that have not been used for administrative expenses or transferred in accordance with the procedures on page 6 under the section “Undelivered or Uncashed Benefit Checks”.

For example: If you did not make a written claim for your vacation benefits between September 1 and November 1, 2015, or the check was uncashed and voided, your benefit will be paid as soon as administratively possible after verification of benefits and address by the Board of Trustees. However, you must apply by the end of the following year. If you did not apply for benefits between September 1 and November 1 of 2015, for your 2014-2015 benefits, you must do so before November 1, 2016, or you will forfeit your benefits. Therefore, it is in your interest to make a timely application each year for vacation benefits.
DEATH OF A PARTICIPANT-BENEFICIARY PROVISIONS

If a participant dies prior to receiving the participant’s vacation benefits, the participant’s designated beneficiary shall make written application to the Board of Trustees for payment of such benefits within six months of the death of the participant. A copy of the death certificate shall accompany the written application. Upon receipt of the written application and approval by the Board of Trustees, the payment of the vacation benefits shall be made immediately to the designated beneficiary or in accordance with the provisions set forth below:

The participant may designate any person as the participant’s beneficiary by filing a beneficiary designation form with the Board of Trustees. A beneficiary designation form is included in this booklet and additional forms may be obtained by calling or writing the Board of Trustees. If no beneficiary designation form is on file with the Board of Trustees, then the accumulated vacation benefits shall be paid to the beneficiary designated by the participant for death benefits from the Greater Kansas City Laborers Welfare Fund or Construction Industry Laborers Welfare Fund, as applicable. If there is no designated beneficiary form on file with the Greater Kansas City Laborers Welfare Fund or the Construction Industry Laborers Welfare Fund, then the accumulated vacation benefits shall be paid to the beneficiary designated by the participant for death benefits from the Greater Kansas City Laborers Pension Fund or Construction Industry Laborers Pension Fund, as applicable. If no beneficiary whatsoever has been designated by the participant in writing or if the designated beneficiary dies before receiving the benefits, then the vacation benefits shall be paid to the participant’s estate.

THE PARTICIPANT MUST COMPLETE A VACATION FORM EACH YEAR SO THAT THE BENEFIT CHECK CAN BE MAILED TO THE PARTICIPANT BETWEEN NOVEMBER 15TH AND NOVEMBER 30TH. BENEFITS WHICH ARE NOT APPLIED FOR OR RETURNED BECAUSE THE PARTICIPANT CANNOT BE LOCATED OR THE CHECK IS VOIDED WILL BE PLACED IN THE GENERAL ACCOUNT AND, IF NECESSARY, MAY BE USED TO PAY ADMINISTRATIVE EXPENSES OF THE FUND OR PAID TO EITHER THE GREATER KANSAS CITY LABORERS WELFARE FUND OR CONSTRUCTION INDUSTRY LABORERS WELFARE FUND.

DISTRIBUTIONS UNDER USERRA

If you are or were a military reservist called to active duty for more than 179 days, you may be eligible to receive an immediate distribution of your Vacation Fund benefit. For more information, contact the Fund Office.

FILING CLAIMS AND REVIEW OF DENIED CLAIMS

A Participant or beneficiary should file a written claim with the Board of Trustees if:

1. A claim is made for late payment of vacation benefits;
2. A claim is made by a beneficiary; or

3. A claim is made that vacation benefits were not received by the participant for any other reason.

The Board of Trustees must approve or deny the claim within ninety (90) days of receipt.

No particular claim form for making such a claim is necessary. Such a claim may be made by merely writing a letter or note to the Trustees stating your claim. The Board of Trustees must provide a written explanation of why the claim is denied in full or in part.

If a claim is denied by the Board of Trustees, a claimant may request in writing within sixty (60) days a review of the denial to the Board of Trustees and also may request a hearing before the Board.

The Board shall have the authority to interpret, construe and apply all terms of the Summary Plan Description, the Amended Agreement and Declaration of Trust, and/or any rules and regulations established by the Trustees including, but not limited to, provisions concerning eligibility for, entitlement to and/or nature, amount and duration of benefits, in reaching a decision on the claimant’s request for review of the denial of the claim.

The complete Claims Procedure, Claims Review Procedures and Hearing Procedure will be provided upon request to the Board of Trustees and should be referred to and followed in the event a participant or beneficiary has a claim or desires a review or hearing.

**TERMINATION OF THE PLAN**

The Trustees retain the right to terminate this Plan in whole or in part. In the event the Plan is terminated, the Trustees shall apply the Fund to pay or provide for the payment of any and all obligations of the Fund and shall distribute and apply any remaining surplus in such manner as will, in their opinion, best effectuate the purposes of the Fund. However, no part of the corpus or income of the Fund shall be used for or diverted to purposes other than for the exclusive benefit of the covered persons or their beneficiaries or the administrative expenses of the Fund or for other payments in accordance with the provisions of the Fund. Under no circumstances shall any portion of the corpus or income of the Fund, directly or indirectly, revert or accrue to the benefit of the employers, the Association or the Union.

**STATEMENT OF ERISA RIGHTS**

THE FOLLOWING STATEMENT OF ERISA RIGHTS IS REQUIRED BY FEDERAL LAW AND REGULATION:
As a participant in the Greater Kansas City Laborers Vacation 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:

RECEIVE INFORMATION ABOUT YOUR PLAN AND BENEFITS

Examine, without charge, at the plan administrator's office and at other specified locations, such as worksites and union halls, all documents governing the plan, including insurance contracts and collective bargaining agreements, and a copy of the latest annual report (Form 5500 Series) filed by the plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration. [EBSA technical correction, 68 FR 16399 (April 3, 2003)]

Obtain, upon written request to the plan administrator, copies of documents governing the operation of the plan, including insurance contracts and collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and updated summary plan description. The administrator may make a reasonable charge for the copies.

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.

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 vacation benefit or exercising your rights under ERISA.

ENFORCE YOUR RIGHTS

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

Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of plan documents or the latest annual report from the plan and do not receive them within 30 days, you may file suit in a Federal court. In such a case, the court may require the plan administrator to provide the materials and pay you up to $110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the 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. 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 nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, D.C. 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

The Contract Administrator or Administrative Manager is:

TIC International Corporation
6405 Metcalf, Suite 200
Overland Park, Kansas 66202
(913) 236-5490

The agent for service of legal process is:

Linda N. Winter
Attorney of Law
1100 Main Street, Suite 2001
Kansas City, Missouri 64105-5178
(816) 421-5788

(SERVICE OF PROCESS MAY ALSO BE MADE UPON ANY TRUSTEE)

The attorney for the Fund is:

Linda N. Winter
Arnold, Newbold, Winter & Jackson, P.C.
Attorneys of Law
1100 Main Street, Suite 2001
Kansas City, Missouri 64105-5178
(816) 421-5788

The Employer Identification Number is:

EIN 48-6200960

The Plan Number is:

501