
SUMMARY PLAN DESCRIPTION

Bluestone Physician Services

401(k) Plan

This information is not intended to be a substitute for specific individualized tax, legal, or investment planning advice. Where specific advice is necessary or appropriate, you should consult with a qualified tax advisor, CPA, Financial Planner, or Investment Manager.

Prepared November 2025

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Introduction

Type of Plan

Effective November 1, 2025, Bluestone Management Services, LLC amended and restated its 401(k) plan. The plan is named the Bluestone Physician Services 401(k) Plan, but it will be referred to in this Summary as the *Plan*. The Plan contains a cash or deferred arrangement, and once you're eligible to participate, you can contribute to the Plan on a tax deferred basis by payroll deductions.

Plan Sponsor

Bluestone Management Services, LLC is the sponsor of the Plan and will sometimes be referred to in this Summary as the "Sponsoring Employer," the "Employer," "we," "us" or "our". Our address is 270 North Main Street, Suite 300, Stillwater, MN 55082; our telephone number is (651) 342-1039; and our employer identification number is 46-2486806.

Additional Adopting Employers

Bluestone Physician Services, P.A.; Bluestone Physician Services, Wisconsin SC; Bluestone National, LLC; and Bluestone Physician Services Southeast, LLC have also adopted this Plan as Adopting Employers for the benefit of any of their employees who are eligible to participate. Any reference to the Employer in this Summary will generally also be a reference to any Adopting Employer.

Purpose of This Summary

This booklet is called a Summary Plan Description (the "SPD") and it is meant to describe highlights of the Plan in understandable language. It is not, however, meant to be a complete description of the Plan, nor is it meant to interpret, extend or change the provisions of the Plan in any way. If there is a conflict between this SPD and the Plan, the provisions of the Plan control your right to benefits. A copy of the Plan and related documents are on file with the Administrator, and you can read them at any reasonable time. Also, no provision of the Plan or this SPD is intended to give you the right to continued employment or to prohibit changes in the terms or conditions of your employment. If you have any questions that are not addressed in this SPD, you can contact the Administrator (described in the next section) during normal business hours.

Who to Contact for Account Questions¹

Schwab Retirement Plan Services, Inc. is the plan recordkeeper. Participant Services Representatives are available at 800-724-7526 during prescribed business hours if you have questions about your Account or want to know more about saving.

Account Access

You can check balances, request investment information, choose investments, change how much you save, and more at 800-724-7526 or <https://workplace.schwab.com>.

Plan Administration

Plan Trustee²

The Plan is administered under a written plan and trust agreement, with Charles Schwab Trust Bank as the trustee. The trustee can be contacted at 2360 Corporate Circle, Suite 400, Henderson, NV 89074.

Plan Administrator

All matters that concern the operation of the Plan are the responsibility of the Plan Administrator ("Administrator"). The Administrator is Bluestone Management Services, LLC, whose address is 270 North Main Street, Suite 300, Stillwater, MN 55082, and whose telephone number is (651) 342-1039. The Administrator has the power and discretionary authority to interpret the terms of the Plan based on the Plan document and existing laws and

¹ Schwab Retirement Plan Services, Inc. provides recordkeeping and related services with respect to retirement plans and has provided this communication to you as part of the recordkeeping services it provides to the Plan.

² Trust, custody, and deposit products and services are available through Charles Schwab Trust Bank.

regulations, as well as the power to determine all questions that arise under the Plan. Such power and authority include, for example, the administrative discretion necessary to resolve issues with respect to an Employee's eligibility for benefits, credited service, Disability, and retirement, or to interpret any other term contained in the Plan and related documents. The Administrator's interpretations and determinations are binding on all Participants, employees, former employees, and their beneficiaries.

Plan Number

For identification purposes, we have assigned number 001 to the Plan.

Plan Year

The Plan Year is the 12-month accounting year of the Plan, which begins each January 1st and ends the following December 31st.

Service of Legal Process

If you have to bring legal action against the Plan for any reason, legal process can be served on the Director of Human Resources at Bluestone Management Services, LLC, 270 North Main Street, Suite 300, Stillwater, MN 55082. Legal process can also be served on the trustee or on the Administrator. You must exhaust the Plan's claims procedures (see the Section titled *Claims Procedures*) before you can bring legal action against the Plan.

Service Crediting

Your Service refers to the portion of your employment with us or with an Adopting Employer that is used to determine your eligibility to participate in the Plan; to determine the Vested Interest in your Account; and to determine whether you are entitled to a contribution allocation for an Allocation Period. The way your Service is determined is described in more detail below.

Hour of Service

You are credited with an Hour of Service for each hour that you have a right to be paid by us for the performance of your duties. This includes the actual number of hours that you work and hours for which you are paid but are not at work, such as paid vacation, paid holidays, or paid sick leave.

Year of Eligibility Service

A Year of Eligibility Service is a period of time used to determine your eligibility to participate in one or more parts of the Plan. You will be credited with a Year of Eligibility Service for each 1-year Period of Service.

Break in Eligibility Service

You will incur a Break in Eligibility Service if you are not credited with at least one Hour of Service during the 1-year period beginning on the earlier of (a) the date you quit or your employment was terminated, or (b) the first anniversary of your absence for any other reason (your "severance date"). However, in certain circumstances, such as taking time off to give birth to a child or to adopt a child, or taking time off to care for a child following the birth or adoption, you will not incur a Break in Eligibility Service until the second anniversary of your severance date. However, the second 12 months will not be used to determine your Years of Eligibility Service.

Long-Term Part-Time Employees

If the Plan is subject to the Long-Term Part-Time rules, and you are a Long-Term Part-Time Employee (and not otherwise excluded under the Plan), you will be eligible to make 401(k) Contributions upon the earlier of (a) satisfaction of the Plan's service requirement applicable to you; or (b) completion of at least 500 Hours of Service during each of three consecutive 12-month Eligibility Computation Periods (which changed to two consecutive 12-month Eligibility Computation Periods effective for Plan Years beginning on or after January 1, 2025). You must also meet any age and Entry Date requirements imposed by the Plan. Any 12-month Eligibility Computation Period prior to January 1, 2021, is not considered when determining eligibility for Long-Term Part-Time Employees. This special rule for participation does not apply to you if you are subject to a collective bargaining agreement. If you become eligible to participate solely by reason of this special rule, you will be credited with a Year of Vesting Service for each Vesting Computation Period for which you are credited with at least 500 Hours of Service. Any 12-month Vesting

Computation Period prior to January 1, 2021 is also not taken into account. The rules for determining your service under these Long-Term Part-Time rules are complex. For more information, please contact the Administrator.

Year of Vesting Service

A Year of Vesting Service is a period of time used to determine your Vested Interest in one or more of your Accounts. You will be credited with a Year of Vesting Service for each Vesting Computation Period during which you are credited with at least 1,000 Hours of Service. The Vesting Computation Period is the Plan Year.

You will be credited with a Year of Vesting Service as explained above based on an equivalency method where you earn 190 Hours of Service for each month in which you work at least one Hour of Service. This equivalency method will be used to credit Vesting Service for all employees.

Break in Vesting Service

You will incur a Break in Vesting Service if you are not credited with more than 500 Hours of Service during a Vesting Computation Period. However, in certain circumstances, such as taking time off to give birth to a child or to adopt a child, or taking time off to care for a child following the birth or adoption, you will be credited with 501 Hours of Service even though you did not actually work 501 hours in order to prevent you from incurring a Break in Vesting Service (but this type of special credit will not be used to determine your Years of Vesting Service or to determine your entitlement to a contribution for any Allocation Period).

Period of Service

A Period of Service, in general, is a period of time that begins on your date of hire and ends on the date you terminate employment or incur a Break in Eligibility Service or a Break in Vesting Service. The rules for determining your Period of Service are more complex than the explanation described in this section, especially the rules that apply if you terminate employment and are then rehired. For more information, you can check with the Administrator.

Prior Service Crediting

All service with us, any Adopting Employer, and any Affiliated Employer, if applicable, will be credited when determining your eligibility to participate in the Plan and to determine your Vested Interest in all your Accounts. Please see the Administrator for specific details.

401(k) Contributions

How the Contribution Is Determined

Once you become a Participant, you can begin making 401(k) Contributions. 401(k) Contributions are amounts that you elect to contribute to the Plan through payroll withholding, and they are made on a pre-tax basis (that is, they are deducted from your Compensation free of current income taxes but are fully taxable when they are subsequently distributed from the Plan) or on an after-tax basis (that is, as Roth 401(k) Contributions, which are deducted from your Compensation on an after-tax basis but may be distributed on a tax-free basis if certain requirements are met). You can designate up to 100% of your 401(k) Contributions as Roth 401(k) Contributions.

Your pre-tax 401(k) Contributions, plus any Roth 401(k) Contributions you make, can't exceed 75% of your Compensation, or if less, the dollar limit on 401(k) Contributions announced annually by the IRS, which is \$23,500 for the 2025 calendar year. In addition, for any calendar year in which you are age 50 or older, you can also make additional "catch-up" 401(k) Contributions in excess of the annual dollar limit on 401(k) Contributions described above. The catch-up contribution limit is also announced annually by the IRS and is \$7,500 for the 2025 calendar year, not to exceed 75% of your compensation. For taxable years beginning after December 31, 2024, the limits on Catch-Up Contributions are increased for eligible Participants who would attain age 60 but would not attain age 64 before the close of the taxable year to \$11,250 (as adjusted for cost-of-living increases). The Administrator can provide you with the maximum limit on Catch-Up Contributions upon request.

Starting January 1, 2026, if your wages for the preceding calendar year from the employer sponsoring the Plan exceeded \$145,000 (subject to cost-of-living increases) and you are age 50 or older, you will only be permitted to make catch-up contributions (if any) on a Roth basis. Previously, you had the choice to make your catch-up contributions on either a pre-tax or Roth basis. For this purpose, the term "employer sponsoring the Plan" refers to

your common law employer and “wages” are those determined for Federal Insurance Contributions Act (Social Security) purposes that are generally reported on Form W-2 Box 3.

The Plan includes a deemed Roth catch-up election feature. This means that your catch-up contributions (i.e., those contributions above the regular dollar limit announced annually by the IRS or a Plan limit (if applicable)) will be treated as Roth 401(k) catch-up contributions, even if you previously chose to make pre-tax 401(k) contributions. However, you will have the opportunity to stop making Roth catch-up contributions at any time.

Roth 401(k) Contributions

There are two types of 401(k) Contributions permitted under the Plan – pre-tax 401(k) Contributions and Roth 401(k) Contributions. You may make either or both types of 401(k) Contributions during a year, provided the total amount of your combined pre-tax 401(k) Contributions and Roth 401(k) Contributions does not exceed any plan-imposed limitation (e.g., a specified percentage of Compensation) or the IRS maximum deferral limit for that year.

Generally, pre-tax 401(k) Contributions are deducted from your paycheck each pay period before Federal and most state income taxes have been calculated. That means pre-tax 401(k) Contributions lower your current taxable income. You do not pay income taxes on your pre-tax 401(k) Contributions until you receive them as a distribution when you retire or terminate employment.

In contrast, Roth 401(k) Contributions are deducted from your paycheck after income taxes have been calculated. However, you will not pay additional taxes on Roth 401(k) Contributions, or the investment earnings on Roth 401(k) Contributions, when they are distributed from the Plan provided that you meet certain criteria (see the section titled *Tax Withholding on Distributions*).

Unless specifically stated otherwise, Roth 401(k) Contributions are treated just like pre-tax 401(k) Contributions for all plan purposes. As such, any reference in this Summary Plan Description to “401(k) Contributions” or “elective deferrals” shall mean both your pre-tax 401(k) Contributions and Roth 401(k) Contributions.

How You Become a Participant

To become a Participant in this part of the Plan, you must satisfy the following criteria: (a) you must be an Eligible Employee; (b) you must satisfy the age requirement and the service requirement (and all Service with us and with any Adopting Employer will be counted for this purpose); and (c) you must be employed by us, or an Adopting Employer, on the applicable Entry Date.

- **Eligible Employees.** All employees are Eligible Employees for this part of the Plan except (a) Union Employees; and (b) Merger and Acquisition Employees. Employees classified as Puerto Rico Based Employees are also ineligible to participate under the Plan.
- **Age Requirement.** You must be at least 18 years of age.
- **Service Requirement.** You must be credited with at least a 6-month Period of Service.
- **Entry Date.** You will enter this part of the Plan as a Participant on the first day of the month that coincides with or follows the date that you satisfy both the age and service requirements described above.

Salary Deferral Agreements

You must file a Salary Deferral Agreement with the Administrator before you can begin making 401(k) Contributions to the Plan. Your Salary Deferral Agreement is where you indicate the amount that you want us to withhold from your Compensation and contribute to the Plan on your behalf. This is also where you indicate if you want all or any part of the amount withheld to be treated as a Roth 401(k) Contribution. You can elect to contribute either a percentage of your Compensation or a flat dollar amount as your 401(k) Contributions.

After your initial election, you can change your Salary Deferral Agreement by filing a new agreement with the Administrator at any time. You can also cancel your Salary Deferral agreement at any time by giving written notice

to the Administrator on the date(s) established by the Administrator for such purpose. Your cancellation will be implemented as soon as administratively possible after your notice is received. If you do cancel your agreement, you will not be permitted to make a new election until the first available date that you would otherwise be entitled to change an existing agreement as described above. If your employment terminates, and you are rehired, your Salary Deferral Agreement will not be reinstated.

The Administrator from time to time may establish additional administrative procedures (or change existing procedures) concerning deferral elections, in which case you will be appropriately notified. The Administrator can also temporarily suspend your deferral agreement if you reach the maximum deferral amount that is permitted by law or by the Plan, or if the Administrator believes the Plan may fail certain required non-discrimination tests. You will be notified if your deferral agreement is temporarily suspended.

How Your Compensation Is Determined

In general, you can make 401(k) Contributions from all of the Compensation that is paid or made available to you during the Plan Year, excluding any Compensation received as (a) Fringe Benefit Payments; (b) Deemed Code §125 Compensation; (c) provider profit sharing; (d) short-term disability; (e) extended leave past due to COVID; (f) relocation bonus; (g) signing bonus; (h) personal use of auto; (i) severance; (j) unused PTO; and (k) phantom share distribution.

How Your Vested Interest Is Determined

Your Vested Interest in your 401(k) Contributions Account is 100% at all times.

Safe Harbor Matching Contributions

How the Contribution Is Determined

In order to satisfy certain testing requirements, we will make a Safe Harbor Matching Contribution to the Plan for each eligible Participant equal to 100% of the Participant's 401(k) Contributions (including "catch-up contributions") that do not exceed 4% of Compensation for the Allocation Period.

How You Become a Participant

To become a Participant in this part of the Plan, you must satisfy the following criteria: (a) you must be an Eligible Employee; (b) you must satisfy the age requirement and the service requirement (and all Service with us and with any Adopting Employer will be counted for this purpose); and (c) you must be employed by us, or an Adopting Employer, on the applicable Entry Date.

- **Eligible Employees.** All employees are Eligible Employees for this part of the Plan except (a) Union Employees; and (b) Merger and Acquisition Employees. Employees classified as Puerto Rico Based Employees are also ineligible to participate under the Plan.
- **Age Requirement.** You must be at least 18 years of age.
- **Service Requirement.** You must be credited with at least a 6-month Period of Service.
- **Entry Date.** You will enter this part of the Plan as a Participant on the first day of the month that coincides with or follows the date that you satisfy both the age and service requirements described above.

How You Qualify For a Contribution

Once you become a Participant in this part of the Plan, you will be eligible to receive a Safe Harbor Matching Contribution provided you are also eligible to make 401(k) Contributions to the Plan at any time during that Plan Year.

How Your Compensation Is Determined

In general, the amount of any Safe Harbor Matching Contributions made on your behalf is based on all of the Compensation that is paid or made available to you during the Allocation Period, excluding any Compensation received as (a) Fringe Benefit Payments; (b) Deemed Code §125 Compensation; (c) provider profit sharing; (d) short-

term disability; (e) extended leave past due to COVID; (f) relocation bonus; (g) signing bonus; (h) personal use of auto; (i) severance; (j) unused PTO; and (k) phantom share distribution. However, no contributions will be made with respect to Compensation in excess of the annual dollar limit on Compensation, which is announced annually by the IRS, and which is \$350,000 for the 2025 calendar year.

How Your Vested Interest Is Determined

Your Vested Interest in your Safe Harbor Matching Contribution Account is 100% at all times.

Profit Sharing Contributions

How the Contribution Is Determined

We may also make Profit Sharing Contributions to the Plan. Making these contributions is totally discretionary on our part, as is the amount should we decide to make them. The Allocation Period for this contribution is the Plan Year.

How You Become a Participant

To become a Participant in this part of the Plan, you must satisfy the following criteria: (a) you must be an Eligible Employee; (b) you must satisfy the age requirement and the service requirement (and all service with us and with any Adopting Employer will be counted for this purpose); and (c) you must be employed by us, or an Adopting Employer, on the applicable Entry Date.

- **Eligible Employees.** All employees are Eligible Employees for this part of the Plan except (a) Union Employees; and (b) Merger and Acquisition Employees. Employees classified as Puerto Rico Based Employees are also ineligible to participate under the Plan.
- **Age Requirement.** You must be at least 18 years of age.
- **Service Requirement.** You must be credited with at least a 6-month Period of Service.
- **Entry Date.** You will enter this part of the Plan as a Participant on the first day of the month that coincides with or follows the date that you satisfy both the age and service requirements described above.

How You Qualify For a Contribution Allocation

Once you become a Participant in this part of the Plan, you are eligible for a Profit Sharing Contribution for any Allocation Period in which we make one if you satisfy the requirements (if any) described below for that Allocation Period.

- **Active Participants.** If you are still employed by us on the last day of an Allocation Period, you will be eligible to receive an allocation regardless of the length of your service during the Allocation Period.
- **Terminated Participants.** If you terminate employment for any reason before the last day of an Allocation Period and you were an Eligible Employee at anytime during the Allocation Period, you will be eligible to receive an allocation for that Allocation Period.

How the Contribution Is Allocated

Profit Sharing Contributions are allocated in the ratio that your Compensation for the Allocation Period bears to the total Compensation of all Participants eligible to receive an allocation for the Allocation Period. This means that the amount allocated to each eligible Participant's Profit Sharing Contribution Account will, as a percentage of Compensation, be the same. For example, if the contribution is equal to 5% of all eligible Participants' Compensation, then that is the amount that will actually be allocated to each eligible Participant's Profit Sharing Contribution Account.

How Your Compensation Is Determined

In general, the amount of any Profit Sharing Contributions made on your behalf is based on all of the Compensation that is paid or made available to you during the Allocation Period, excluding any Compensation received as (a) Fringe Benefit Payments; (b) Deemed Code §125 Compensation; (c) provider profit sharing; (d) short-term disability; (e) extended leave past due to COVID; (f) relocation bonus; (g) signing bonus; (h) personal use of auto; (i) severance; (j) unused PTO; and (k) phantom share distribution. However, no contributions will be made with respect to Compensation in excess of the annual dollar limit on Compensation, which is announced annually by the IRS, and which is \$350,000 for the 2025 calendar year.

How Your Vested Interest Is Determined

Your Vested Interest in your Profit Sharing Contribution Account is determined by the schedule following this paragraph, based on your Years of Vesting Service, including Service with us and with any Adopting Employer. Any part of this Account which is not vested will be forfeited when you receive a distribution or after you incur 5 consecutive Breaks in Vesting Service, if earlier.

1 Year of Vesting Service	0% Vested
2 Years of Vesting Service.....	20% Vested
3 Years of Vesting Service.....	40% Vested
4 Years of Vesting Service.....	60% Vested
5 Years of Vesting Service.....	80% Vested
6 Years of Vesting Service.....	100% Vested

Top Heavy Requirements

Under certain circumstances, you may be entitled to a minimum allocation for any Plan Year in which the Plan is considered "top heavy." The Plan is considered top heavy for any Plan Year in which more than 60% of Plan assets are allocated to the Accounts of Participants who are Key Employees. However, the Plan may be exempt from this requirement in any Plan Year if certain conditions are satisfied. If the Plan is not exempt, then for each Plan Year in which the Plan is considered top heavy and in which you are a non-Key Employee who is employed by us on the last day of the Plan Year, you will receive a minimum allocation to this Plan or another plan that we sponsor equal to the lesser of 3% of your Compensation for the entire Plan Year or the highest percentage of Compensation allocated for that Plan Year to the Accounts of Participants who are Key Employees.

Maximum Allocation Limitations

The amount of contributions and forfeitures that can be allocated to your Account for any Plan Year is limited by law to the lesser of 100% of your Compensation or the annual dollar limit, which is announced annually by the IRS and is \$70,000 for the 2025 calendar year. However, this dollar limit does not apply to the amount of earnings that can be allocated to your Account, to the "catch-up" contributions you can make to the Plan, to the amount of any Rollover Contributions you can make to the Plan, or to any other funds transferred to this Plan on your behalf from another qualified plan.

Rollover Contributions

If you participated in another retirement plan, you may be permitted to roll over any distribution you receive from the other plan to this Plan if all legal requirements and any requirements imposed by the Administrator on such rollovers are satisfied. If you decide to make a rollover contribution and it is accepted by the Administrator, it will be kept in a separate Rollover Account established on your behalf. If this Plan accepts a Rollover Contribution of Roth 401(k) Contributions, it will separately account for the Roth 401(k) Contributions and for any prior and subsequent earnings or losses attributable to such Roth 401(k) Contributions. Your Vested Interest in your Rollover Account will be 100% at all times.

Specifically, if you are eligible to participate in this Plan (whether or not you have met the participation requirements), then you may roll over amounts from the following retirement plans:

- qualified plans excluding After-Tax Contributions;
- 403(a) or 403(b) annuity plans excluding After-Tax Contributions;
- governmental plans (Code Section 457(b) plans);
- Roth 401(k) Contributions made to any plan described above;
- Individual Retirement Accounts (“IRAs”) and individual retirement annuities; and
- Participant loans from such plans as permitted by the Administrator.

Distribution of Benefits

Distributions for Reasons Other Than Death

If your employment is terminated for any reason other than death, your Vested Interest will be distributed within an administratively feasible time after you request payment. Your Vested Interest will be distributed in a lump sum which can be paid to you or, at your election, can be rolled over to another qualified retirement plan or to an individual retirement account. You can also elect not to receive a lump sum and instead elect (a) substantially equal installment payments over a specified period of time; or (b) partial payments in amounts that you request from time to time.

There are rules which require that certain minimum distributions be made from the Plan. Generally, these minimum distributions must begin by the later of the April 1st following the end of the calendar year in which you reach the age in the chart below or the April 1st following the end of the calendar year in which you retire. However, if you are a 5% owner, you must begin receiving these distributions by the April 1st following the end of the calendar year in which you reach the age specified in the chart even if you are still employed by the Employer. If the minimum distributions do not become payable until after you terminate employment, and the only form of distribution at termination is a lump sum, you will receive your entire Account balance.

Age	Birth Date
70 ½	If you were born before July 1, 1949
72	If you were born between July 1, 1949 and December 31, 1950
73	If you were born between January 1, 1951 and December 31, 1959
75	If you were born after January 1, 1960

Minimum Required Distributions of Roth Accounts.

Effective for taxable years beginning after December 31, 2023, your Roth Accounts, if any, will not be included when determining the minimum required distribution or incidental death benefit prior to your death. This consideration will not be applied to any distributions made before January 1, 2024, that are paid on or after such date.

Distributions Upon Death

Your Vested Interest will be distributed to your beneficiary as soon as administratively feasible after your death. If you are not married, you can name anyone to be your beneficiary. If you are married, your Spouse by law is your beneficiary unless he or she waives the death benefit in writing. Your beneficiary can elect to receive (a) a lump sum; (b) substantially equal installment payments over a specified period of time (although there are limits on how long installment payments can be made, which will be explained to your beneficiary at the appropriate time); or (c) partial payments in amounts requested by your beneficiary from time to time.

If you fail to designate a beneficiary, or if the beneficiary is not alive at the time of your death, the death benefit will be paid in the following order of priority to: (a) your Spouse; (b) your children and any descendants of deceased children (i.e., “per stirpes”); and (c) your estate. If you designate your Spouse as beneficiary and later become divorced, the designation of your Spouse as beneficiary will no longer be valid. Under these circumstances, you should submit a new beneficiary designation.

After your death, the distribution to your beneficiary must be made within certain legal timeframes that are dependent upon several factors, including (a) whether you have a designated beneficiary, (b) your relationship to the beneficiary (spousal or non-spousal beneficiary), and (c) certain elections that your beneficiary may make after

your death. Contact the Administrator or consult with a qualified tax advisor or financial planner for more information regarding payments to beneficiaries.

Cash-Outs of Small Accounts

If your employment is terminated for any reason and your Vested Interest is \$7,000 or less (excluding your Rollover Account balance) it will be distributed in a lump sum, or, at your election, will be rolled over to another qualified retirement plan or to an individual retirement account ("IRA") of your choosing. However, if you do not make an election, then the distribution (a) will be made in a lump sum if your Vested Interest is \$1,000 or less; or (b) if your Vested Interest is more than \$1,000, will be rolled over to an IRA that we establish for you at an IRA provider. The IRA provider may charge your IRA for any expenses associated with the establishment and maintenance of the IRA and with the investments of the IRA. You will be given more information at the time of distribution regarding the IRA provider and any associated fees or expenses.

In-Service Distributions

As long as you remain employed by us, you can elect at any time to take a lump sum distribution of up to 100% of your Vested Interest in the following Accounts:

- **Safe Harbor Contribution Account.** You can request a distribution from your Safe Harbor Contribution Account if you have reached age 59½.
- **401(k) Contributions Account.** You can request a distribution from your 401(k) Contributions Account if you have reached age 59½.
- **Qualified Matching Contribution Account.** You can request a distribution from your Qualified Matching Contribution Account if you have reached age 59½. This Account is one to which we may elect to make contributions in order to pass certain Plan testing requirements.
- **Qualified Non-Elective Contribution Account.** You can request a distribution from your Qualified Non-Elective Contribution Account if you have reached age 59½. This account is one to which we may elect to make contributions in order to pass certain Plan testing requirements.
- **Profit Sharing Contribution Account.** You can request a distribution from your Profit Sharing Contribution Account if you have reached age 59½.
- **Rollover Contribution Account.** You can request a distribution from your Rollover Contribution Account at any time.

You may also receive an in-service distribution of your Account within an administratively feasible time after you are determined to be disabled (see the *Glossary* for the definition of Disability).

Hardship Distributions

As long as you are an employee, you can take a distribution to pay for a financial hardship caused by one or more of the following circumstances:

- Unreimbursed expenses for medical care (or unreimbursed expenses necessary to obtain medical care) incurred by you, your Spouse, your dependents, or the person named as your primary Plan beneficiary, provided the expenses are the type that are considered tax deductible under the Internal Revenue Code.
- Costs related to the purchase of your principal residence (excluding mortgage payments).
- Payments necessary to prevent eviction from your principal residence or to prevent foreclosure on the mortgage of your principal residence.
- Tuition, related educational fees, and room and board, for up to the next 12 months of post-secondary education for you, your Spouse, your children, other eligible dependents, or the person named as your primary Plan beneficiary.

- Funeral expenses for your parent, your Spouse, your children, other eligible dependents, or the person named as your primary Plan beneficiary.
- Expenses for repair of damage to your principal residence that would qualify for a casualty deduction (without regard to whether the loss exceeds 10% of your adjusted gross income or whether the loss is attributable to a federally declared disaster).
- Expenses and losses (including loss of income) you incur on account of a disaster declared by the Federal Emergency Management Agency (FEMA) provided that your principal residence or principal place of employment at the time of the disaster was located in an area designated by FEMA for individual assistance with respect to the disaster.
- Any other distribution which is deemed by the Commissioner of Internal Revenue to be made on account of immediate and heavy financial need as provided in Treasury Regulations.

If you have one of the above expenses, a hardship distribution can only be made if the following rules are also satisfied:

- The hardship distribution is not in excess of the amount of your immediate and heavy financial need. The amount of your immediate and heavy financial need may include any amounts necessary to pay any federal, state, or local income taxes or penalties reasonably anticipated to result from the hardship distribution.
- You must have taken any other distribution available under this or any Plan maintained by us.
- You must represent, in writing, by an electronic medium, or in such other form required by the Administrator, that you have insufficient cash or other liquid assets reasonably available to satisfy your financial need.

Hardship distributions can be taken from (a) your Pre-tax 401(k) Contributions Account(s); (b) your Roth 401(k) Contributions Account(s); (c) your Profit Sharing Contribution Account(s); (d) your Qualified Non-Elective Contribution Account(s); (e) your Qualified Matching Contribution Account(s); and (f) your Safe Harbor Matching Contribution Account(s).

Qualified Birth or Adoption Distributions

You may request a Qualified Birth or Adoption Distribution (“QBAD”) for the birth or adoption of a child. The aggregate amount of the QBAD you may take from all plans maintained by the Employer may not exceed \$5,000. This qualified distribution is not limited to the amount necessary to pay for actual expenses related to the birth or legal adoption but must be made during the 1-year period beginning on the date a child of yours is born or on which the legal adoption of an Eligible Adoptee is finalized. The QBAD will be taken from the vested portion of all of your eligible accounts and will be made in a single payment. If the Plan allows Rollover Contributions, any QBAD received from the Plan (or a portion thereof) may be repaid to the Plan as a Rollover Contribution if you are eligible to make a Rollover Contribution at the time of the repayment. The repayment must be made during the 3-year period beginning on the day after the date on which you received the QBAD. However, if you received the QBAD on or before December 29, 2022, you have until December 31, 2025 to repay the QBAD to the Plan. This qualified distribution is not subject to the 10% early distribution penalty but is generally subject to income taxation. You should consult with a tax advisor regarding the tax treatment of a QBAD. Contact the Administrator for additional information.

Disaster Recovery Relief Provisions

If you are the victim of a qualified federally declared disaster, you may be entitled to any of the following disaster recovery relief provisions available under the Plan. In order to be eligible, all of the following requirements must be met:

- A major disaster was federally declared after December 27, 2020;
- The disaster’s “incident period” (as determined by the Federal Emergency Management Agency (“FEMA”)) began on or after January 26, 2021;
- Your primary place of residence during the time of the disaster is located within the disaster area; and
- You have sustained an economic loss as a result of the disaster.

Qualified Disaster Recovery Distributions

If eligible, you can withdraw the vested portion of your eligible accounts, up to \$22,000, for each disaster as a qualified disaster recovery distribution ("QDRD"). The QDRD must be processed before the date that is 180 days after the later of: (1) the first day of the disaster's incident period, or (2) the date the disaster is federally declared. If the Plan allows Rollover Contributions, any QDRD (or a portion thereof) may be repaid to the Plan as a Rollover Contribution if you are eligible to make a Rollover Contribution at the time of the repayment. The repayment must be made during the 3-year period beginning on the day after the date on which you received the QDRD.

Higher Maximum Loan Amounts

If eligible, you may request a loan up to the lesser of 100% of your vested Account balance or \$100,000 (reduced by the excess of your highest outstanding loan balance during the prior 1-year period over the outstanding loan balance as of the day the loan is made). The loan must be processed by the date that is 180 days after the later of: (1) the first day of the disaster's incident period, or (2) the date the disaster is federally declared.

Temporarily Suspend Loan Payments

If eligible and you currently have an outstanding loan in the Plan, you can temporarily suspend your scheduled loan payments for up to one year. To qualify for the payment suspension, the scheduled payments must be originally due on or after the first day of a disaster's incident period and ending on the date which is 180 days after the last day of such incident period.

If you temporarily suspend your loan payments, interest on the loan balance will continue to accrue during the suspension period and the term of the loan will be extended by the suspension period. In addition, your loan balance will be reamortized and repayments will automatically resume following the suspension period.

Repay Hardship Distributions That Were Taken for the Purchase or Construction of a Principal Home

If eligible and the Plan allows Rollover Contributions, you can repay a hardship distribution that you previously received for the purchase or construction of a principal home that you did not use on account of a disaster with respect to the area. To qualify, the hardship withdrawal must have been received during the period which is 180 days before the first day of the disaster's incident period and ending on the date which is 30 days after the last day of such incident period. The hardship distribution (or a portion thereof) may be repaid to the Plan as a Rollover Contribution if you are eligible to make a Rollover Contribution at the time of the repayment. Your repayment(s) must be processed by the date that is 180 days after the later of: (1) the first day of the disaster's incident period, or (2) the date the disaster is federally declared.

Domestic Abuse Victim Distributions

If you are a victim of domestic abuse by a spouse or domestic partner, you may request an in-service distribution from the Plan provided that such distribution is made during the 1-year period beginning on any date on which you are a victim of such domestic abuse. The term "domestic abuse" means physical, psychological, sexual, emotional, or economic abuse, including efforts to control, isolate, humiliate, or intimidate you, or to undermine your ability to reason independently, including by means of abuse of your child or another family member living in the household. The aggregate amount of domestic abuse victim distributions you may take from all plans maintained by the Employer may not exceed the lesser of \$10,000 (*increased for cost-of-living adjustments*) or 50% of your Vested Account balance. The distribution will be taken from the vested portion of all of your eligible accounts and will be made in a single payment. If the Plan allows Rollover Contributions, any domestic abuse victim distribution received from the Plan (or a portion thereof) may be repaid to the Plan as a Rollover Contribution if you are eligible to make a Rollover Contribution at the time of the repayment. The repayment must be made during the 3-year period beginning on the day after the date on which you received the domestic abuse victim distribution. This domestic abuse victim distribution is not subject to the 10% early distribution penalty but is generally subject to income taxation. You should consult with a tax advisor regarding the tax treatment of a domestic abuse victim distribution. Contact the Administrator for additional information.

Distributions to Employees who are Terminally Ill

If you request an in-service distribution from any eligible account (other than accounts that represent assets from a merged money purchase pension plan) that would otherwise be subject to the 10% early distribution penalty tax because you are younger than 59 ½, but you are a terminally ill individual, you may request that the distribution be processed as a distribution to a terminally ill individual. To be considered a terminally ill individual, you must provide a physician's certification to the Administrator indicating that you have an illness or physical condition which can reasonably be expected to result in death in 7 years or less after the date of the certification. If the Plan allows Rollover Contributions, any distribution you received from the Plan (or a portion thereof) that qualifies as a terminally ill individual distribution may be repaid to the Plan as a Rollover Contribution if you are eligible to make a Rollover Contribution at the time of the repayment. The repayment must be made during the 3-year period beginning on the day after the date on which you received the distribution. You should consult with a tax advisor regarding the tax treatment of the distribution.

If a future law makes a distribution to a terminally ill individual a separate in-service distribution right, such distribution will be made available under the Plan. The distribution will be taken from the vested portion of all of your eligible accounts and will be made in a single payment.

Contact the Administrator for additional information.

In-Plan Roth Rollovers

You may be eligible to convert all or a portion of your accumulated account balance (other than your existing Roth account balance) to a Roth account in the Plan. This is called an In-Plan Roth Rollover.

The benefit of an In-Plan Roth Rollover is that when you eventually take a distribution from the Plan (i.e. upon Retirement or termination of employment), the entire Roth account balance, including investment earnings, may be distributed tax-free if certain requirements are met. However, you will generally be subject to income tax on the amount converted in the year that you elect the In-Plan Roth Rollover. See the Section entitled "Tax Withholding on Distributions" for more information about the tax treatment of Roth distributions.

An In-Plan Roth Rollover will not result in an actual distribution of monies; they will stay in the Plan. Please also note that you are only eligible to make an In-Plan Roth Rollover of accounts that are 100% vested. Please consult with a tax advisor before electing an In-Plan Roth Rollover as the election is irrevocable.

Loans to Participants

You are permitted to borrow from the Plan with the approval of the Administrator using an electronic authorization system available by contacting a Participant Services Representative at 800-724-7526 or on the website at <https://workplace.schwab.com> (see page 1). Loans will be made only to actively employed Participants in accordance with the Loan Policy established by the Administrator. Your vested Account balance is used as security for the loan.

Loans will be made pursuant to the following terms:

- You may have a maximum of 1 loan outstanding at any time. However, if: (a) your loans were transferred or rolled over into the Plan, or (b) the maximum number of loans permitted was reduced after the loan(s) were originally issued, then you will be allowed to have more than the maximum number of allowable loan(s).
- The minimum amount of a loan is \$1,000.
- The maximum amount of the loan, when added to the outstanding balance of all other loans from the Plan, is generally the lesser of 50% of your vested Account balance or \$50,000 (reduced by the excess of your highest outstanding loan balance during the prior 1-year period over the outstanding loan balance as of the day the loan is made).

- The loan term may not exceed 5 years, except that any loan used to purchase your principal residence may be repaid over a 10-year period. However, if: (a) your loan(s) were transferred or rolled over into the Plan, or (b) the maximum loan repayment period was reduced after the loan(s) were originally issued, then the maximum loan repayment period will be based on the original loan(s).
- Loans are available from the vested portion of all of your Accounts.
- The following loan fee will be charged to your Account: \$75 to establish the loan

You will be charged a reasonable rate of interest on any loan that you take from the Plan. Loan proceeds are generally taken pro-rata from investment funds in which your Account balance is invested. All payments of principal and interest that you make on a loan will be credited to your Account. Loan payments must be made through payroll deduction. However, if you need to make up missed payments or are a terminated Participant, you may continue to make periodic loan repayments by any method agreed to by the Administrator and Schwab Retirement Plan Services, Inc. Such payments should be made payable to the Bluestone Physician Services 401(k) Plan and submitted directly to Schwab Retirement Plan Services, Inc. for processing.

If you fail to make payments when they are due under the loan terms, you will be considered to be in "default." A loan in default may be treated as a distribution from the Plan, thus resulting in taxable income to you. In any event, your failure to repay a loan will reduce the benefit that you would otherwise be entitled to from the Plan.

Note that if you have an unpaid leave of absence or go on military leave while you have an outstanding loan, you may qualify for a suspension of loan payments. If you are on a bona fide leave of absence, you may make loan repayments by any method agreed to by the Administrator and Schwab Retirement Plan Services, Inc. Upon termination of employment, all loans will immediately become due and payable. If a loan is not repaid within a reasonable time following termination, it will be offset against your vested Account balance.

The Administrator may periodically revise the Plan's loan policy. For further details on Plan loans, you may request a copy of the Loan Policy from the Administrator.

Investment of Accounts

Subject to an investment policy established by the Administrator, you can direct how your Account will be invested. You can choose from any investment options offered by the Plan. You can switch between investments as often as is permitted under the investment options you choose. All earnings and losses on your directed investments will be credited directly to your Account. Investment results will reflect any fees and investment expenses for the investments you select. You may request more information on fees associated with an investment option from the Administrator. At the appropriate time, we will provide you with more detailed information about the investment options offered by the Plan.

We intend to comply with Section 404(c) of the Employee Retirement Income Security Act of 1974. This means that if you are permitted to exercise independent control over the investment of your Account and you are offered a reasonably diverse selection of well managed investment options, then the fiduciaries of the Plan, including the Administrator and us, may be relieved of certain liabilities for any losses which occur because you exercise control.

Generally, you will receive a quarterly statement that contains information regarding your investment choice(s), any contributions received by the Plan during that quarter, your investment gains or losses, ending fund balances, and your vested percentage.

Tax Withholding on Distributions

Due to the complexity and frequency of changes in the federal laws that govern benefit distributions, penalties and taxes, the following is only a brief explanation of the law and IRS rules and regulations as of the date this Summary is issued. You will receive additional information from the Administrator at the time of any benefit distribution, and you should consult your tax advisor to determine your personal tax situation before taking the distribution.

Direct Rollovers Not Subject to Tax

Any eligible distribution that is directly rolled over to another eligible retirement account (either another qualified retirement plan or an individual retirement account) is not subject to income tax withholding. Generally, any part of a distribution from this Plan can be directly rolled over to another eligible retirement account unless the distribution (1) is part of a series of equal periodic payments made over your lifetime, or over the lifetime of you and your beneficiary, or over a period of 10 years or more; or (2) is a minimum benefit payment which must be paid to you by law. There are other distributions that are not eligible for direct rollover treatment, and you should contact the Administrator if you have questions about a particular distribution.

Federal Income Tax Rules for In-Plan Roth Rollovers

In-Plan Roth Rollover amounts are not subject to federal tax withholding at the time of the conversion. However, taxes are due on pre-tax amounts for the year of the conversion. Therefore, you should consider your ability to pay the additional income tax on the amount converted and should consult with a tax professional for the best options for your particular situation.

20% Withholding on Taxable Distributions

If you have your benefit paid to you and it's eligible to be rolled over, you only receive 80% of the benefit payment. The Administrator is required to withhold 20% of the benefit payment and remit it to the Internal Revenue Service as income tax withholding to be credited against your taxes. If you receive the distribution before you reach age 59½, you may also have to pay an additional 10% tax. You can still rollover all or a part of the 80% distribution that is paid to you by putting it into an IRA or into another qualified retirement plan within 60 days of receiving it. If you want to rollover 100% of the eligible distribution to an IRA or to another qualified retirement plan, you must find other money to replace the 20% that was withheld. You cannot elect out of the 20% withholding (1) unless you are permitted (and elect) to leave your benefit in this Plan, or (2) unless you have 100% of an eligible distribution transferred directly to an IRA or to another qualified retirement plan that accepts rollover contributions.

Tax Treatment of Roth 401(k) Distributions

The tax treatment of a distribution of Roth 401(k) contributions (and the associated investment earnings) depends upon whether the distribution is a "qualified Roth distribution" or a "nonqualified Roth distribution". If the distribution is a "qualified Roth distribution," then the entire amount distributed is tax-free, even the portion attributable to investment earnings on the Roth 401(k) contributions. To be considered a "qualified Roth distribution," the following two conditions must be met:

- You have satisfied the 5-year rule (also known as the 5-year clock); and
- The distribution is made after you have reached age 59 ½, died or become disabled.

The 5-year rule is satisfied if the Roth 401(k) distribution occurs at least five (5) years following the year the first Roth 401(k) Contribution is made to the plan. For example, if you first make Roth 401(k) contributions in 2025, you will satisfy the 5-year rule as of January 1, 2030. It is not necessary that you make a Roth 401(k) contribution in each of the five (5) years.

A "non-qualified Roth distribution" is any distribution that is not a "qualified Roth distribution." Non-qualified Roth distributions are subject to taxation (and in some cases, a 10% early distribution penalty) on the portion of the distribution which is attributable to investment earnings, unless you roll over the distribution as described below.

You may elect to make a rollover of your Roth 401(k) contributions and earnings to a Roth IRA. The tax treatment of any subsequent distribution from the Roth IRA will be governed by the tax rules attributable to Roth IRA distributions. Please note that the 5-year clock for a Roth IRA distribution will not include the portion of time that the Roth 401(k) contributions were in the Plan.

You may also elect to make a rollover to an eligible retirement plan that accepts rollovers and agrees to separately account for Roth 401(k) Contributions. To the extent that you make a plan-to-plan rollover (direct rollover), you will be provided a statement indicating the amount of your Roth 401(k) Contribution (basis) and the year that your 5-year clock started. This information must generally be provided to the recipient plan in conjunction with your

rollover. Please note that the 5-year clock in the recipient plan will include the portion of time that you made Roth 401(k) contributions to this Plan.

When you roll a Roth 401(k) balance to a new Roth IRA, the 5-year qualification period starts over. This may impact the rollover decision. If you have an established Roth IRA, then the qualification period is calculated from the initial deposit into the IRA and the rollover will be eligible for tax-free withdrawals when that 5-year period has ended (and the age qualifier has been met).

Claims Procedures

If you feel that you are entitled to a benefit that you are not receiving from the Plan, you can make a written request to the Administrator (or its delegate) for that benefit. Plan Benefits fall into two categories – Disability related benefits and non-Disability related benefits. A Disability-related benefit means a benefit that is available under the Plan and that becomes payable upon a determination of a Participant's Disability by the Administrator. A Disability-related benefit does not include a benefit that, under the terms of this Plan, becomes payable upon a determination of a Participant's Disability by the Social Security Administration or under a long-term Disability plan sponsored by the Employer. The claims procedure for Disability-related benefits and non-Disability benefits are similar, but there are differences. While the claims procedure for each benefit is described below, this is just a Summary, and the Administrator can supply you with a more detailed claims procedure.

Exhaustion of Remedies

No civil action for benefits under the Plan will be brought unless and until you have (1) submitted a timely claim for benefits in accordance with the provisions of this Section; (2) been notified by the Administrator that the claim has been denied; (3) filed a written request for a review of the claim in accordance with the applicable provisions; and (4) been notified in writing of a final adverse benefit determination on review. Any civil action must be brought no later than the earlier of one year after the date of a final adverse determination or the shortest applicable statute of limitations provided by law.

Grounds for Judicial Review

Any civil action will be based solely on your advanced contentions in the administrative review process, and the judicial review will be limited to the Plan document and the record developed during the administrative review process as set forth in this Section.

Written Claims

Any claim for benefits must be filed in writing with the Administrator, but the Administrator may permit the filing of a claim for benefits electronically as long as the Administrator complies with certain Department of Labor requirements. Any Employee, Participant or Beneficiary who files a claim for benefits under the Plan is a "Claimant" under these claims procedures.

As a Claimant, you may authorize a representative to act on your behalf with respect to any claim under the Plan. The representative must provide satisfactory evidence to the Administrator of its authority to act on your behalf, such as a letter of authority with your notarized signature. To the extent consistent with the authority you grant to your representative, references to "you" or to "Claimant" in these claims procedures include your representative.

The Administrator may review claims under the Plan or may delegate that authority to an appropriate claims adjudicator. References in these claims procedures to the Administrator include any claims adjudicator acting on behalf of the Administrator. Benefit claim determinations shall be made based on the applicable provisions of the Plan document and any documents of general application that interpret the Plan provisions and are maintained by the Employer or the Administrator for purposes of making benefit determinations. The Administrator shall take such steps as are necessary to ensure and verify that benefit claim determinations are made in accordance with such documents and that the Plan provisions are being applied consistently with respect to similarly situated Claimants. All notices to Claimants will be written in a manner calculated to be understood by the Claimant.

Review of Non-Disability Benefit Claims

The provisions of this paragraph will apply if your claim for a benefit does not require a determination as to whether or not you are disabled or if a claim requires a Disability determination, but that determination is made outside the Plan for reasons other than determining eligibility for a Plan Benefit. Examples of this are where the Disability determination is based solely on whether you are entitled to disability benefits under either the Social Security Act or the Employer's long-term disability plan.

- **Initial Denial.** Whenever the Administrator decides for any reason to deny a claim in whole or in part, the Administrator will give you a written or electronic notice of its decision within 90 days of the date the claim was filed, unless an extension of time is necessary or you voluntarily agree to an extension. If special circumstances require an extension, the Administrator will notify you before the end of the initial review period that additional review time is necessary. The notice for an extension (a) will specify the circumstances requiring a delay and the date that a decision is expected to be made; and (b) will describe any additional information needed to resolve any unresolved issues. Unless the Administrator requires additional information from you to process the claim, the review period cannot be extended beyond an additional 90 days unless you voluntarily agree to a longer extension or the Administrator determines that special circumstances require a further extension. If special circumstances require a further extension, the Administrator will notify you before the end of the extended review period that further additional review time is necessary and such notice will describe the special circumstances requiring a further delay and specify the date a decision is expected to be made. The Administrator cannot extend the review period beyond an additional 90 days unless you voluntarily agree to a longer extension. If the Administrator requires additional information from you to process the claim and a timely notice requesting the additional information is transmitted to you, it must be provided within 90 days of the date that the notice is provided by the Administrator.
- **Notice of Denial.** If your claim is denied, the notice will contain the following information: (a) the specific reasons for the denial; (b) reference to the specific Plan provisions on which the denial is based; (c) a description of any additional material or information necessary for you to perfect your claim and an explanation of why such material or information is necessary; (d) 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; (e) a description of the Plan's review (i.e., appeal) procedures, the time limits applicable to such procedures, and in the event of an adverse review decision, a statement describing any voluntary review procedures and your right to obtain copies of such procedures; and (f) a statement that if you request a review of the Administrator's decision and the reviewing fiduciary's decision on review is adverse to you, there is no further administrative review following the initial review, and that you then have a right to bring a civil action under ERISA §502(a). The notice will also include a statement advising you that, within 60 days of the date on which you receive such notice, you may obtain review of the decision as explained in the next paragraph.
- **Right to Appeal.** Within the 60-day period beginning on the date you receive notice regarding disposition of your claim, you may request that the claim denial be reviewed by filing with the Administrator a written request for such review. The written request must contain the following information: (a) the date on which your request was received by the Administrator; (b) the specific portions of the denial of your claim which you request be reviewed; (c) a statement setting forth the basis upon which you believe the Administrator's denial of your claim should be reversed and your claim should be accepted; and (d) any other written information (offered as exhibits) which you want to be considered to explain your position, without regard to whether such information was submitted or considered in the initial benefit determination.
- **Review on Appeal.** In general, your appeal will be reviewed within 60 days of the date it is received by the Administrator (unless special circumstances require an extension to 120 days and you are so notified before the end of the 60-day review period). The review will take into account all comments, documents, records, and other information submitted by you relating to the claim, without regard to whether such information was submitted or considered in the initial determination. The decision on review will contain the following: (a) the specific reasons for the denial on review; (b) reference to specific Plan provisions on which the denial is based; (c) 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; (d) a statement describing any voluntary review procedures and your right to obtain copies of them; and (e) a statement that there is no further administrative review of decision and that you have a right to bring a civil action under ERISA §502(a).

Review of Disability Benefit Claims

The provisions of this paragraph will apply if your claim for a benefit requires a determination as to whether or not you are disabled. These provisions will not apply if a Disability determination is made outside the Plan for reasons other than determining eligibility for a Plan Benefit. Examples of this are where the Disability determination is based solely on whether you are entitled to disability benefits under either the Social Security Act or the Employer's long-term disability plan.

- **Initial Denial.** Whenever the Administrator decides for any reason to deny a claim for a Disability benefit in whole or in part, the Administrator will transmit to you a written or electronic notice of its decision within 45 days of the date the claim was filed, unless an extension of time is necessary or you voluntarily agree to an extension. If, prior to the expiration of the initial 45-day period, the Administrator determines that a decision cannot be made within that initial 45-day period due to matters beyond the control of the Plan, the Administrator will provide you a notice before the end of the 45-day review period that a 30-day extension of time is necessary. If, prior to the end of the first 30-day extension period, the Administrator determines that a decision cannot be made within that first 30-day extension period due to matters beyond the control of the Plan, the Administrator will provide you a notice before the end of the first 30-day extension period that an additional 30-day extension of time is necessary. Any notice of an extension of time will (a) specify the circumstances requiring the extension of time and the date a decision is expected to be rendered; (b) explain the standards on which entitlement to a Disability Benefit is based; (c) state the unresolved issues that prevent a decision on the claim; and (d) describe any additional information needed to resolve those issues. If the Administrator requires additional information from you to process the Disability Benefit claim and a timely notice requesting the additional information is transmitted to you, you must provide the additional information within 45 days of the date the notice is provided. The claims review period will be temporarily suspended until the earlier of the date you provide the required information or the end of your permitted response period.

The notice requesting additional information may also serve as notice of a claim denial if the notice clearly states that unless you provide the requested information within the prescribed time period, the claim will be denied for failure to provide sufficient information. A combined notice must provide both the information described above and the information under *Notice of Denial* below. If you are required to provide additional information, the Administrator has discretion to decide whether to request the information and extend the initial review period as described in this section or, instead, to deny the claim on the basis that there is not sufficient information to proceed.

- **Notice of Denial.** If your claim is denied, the notice will contain the following information: (a) the specific reasons for the denial; (b) reference to the specific Plan provisions on which the denial is based; (c) a description of any additional material or information necessary for you to perfect your claim and an explanation of why such material or information is necessary; (d) 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; (e) either (1) if the claim denial is based on an internal rule, guideline, protocol, or other similar provision, a copy of the specific rule, guideline, protocol, or other similar criterion relied upon, or (2) an affirmative statement that the claim denial is **not** based on an internal rule, guideline, protocol, or other similar criterion; (f) if the claim denial is based on a medical necessity or experimental treatment or similar exclusion or limit, either an explanation of the scientific or clinical judgment for the determination, applying the terms of the plan to the Claimant's medical circumstances, or a statement that such explanation is available upon request, free of charge; (g) a discussion of the decision, including an explanation for disagreeing with or not following (1) the views you presented of health care professionals who treated you and vocational professionals who evaluated you; (2) the views of medical or vocational experts whose advice was obtained on behalf of the Plan in connection with the adverse benefit determination, without regard to whether the advice was relied on in making the determination; and (3) any Disability determinations made by the Social Security Administration; (h) a description of the review (i.e., appeal) procedures, the time limits applicable to such procedures, and in the event of an adverse review decision, a statement describing any voluntary review procedures and your right to obtain copies of such procedures; and (i) a statement that if you request a review of the Administrator's decision and the review is adverse to you, that there is no further administrative review following such initial review, and that you have a right to bring a civil action under ERISA §502(a). The notice will also include a statement advising you that, within 180 days of the date you receive the notice, you may obtain review of the decision as explained in the next paragraph.

- **Right to Appeal.** Within the 180-day period beginning on the date you receive notice regarding disposition of your claim, you may request that the claim denial be reviewed by filing with the Administrator a written request for such review. The written request for such review must contain the following information: (a) the date on which your request was received by the Administrator; (b) the specific portions of the denial of your claim which you request be reviewed; (c) a statement setting forth the basis upon which you believe the Administrator's denial of your claim should be reversed and your claim should be accepted; and (d) any other written information (offered as exhibits) which you want to be considered to explain your position, without regard to whether such information was submitted or considered in the initial benefit determination.
- **Review by Alternate Reviewer.** Review of a Disability Benefit claim that has been denied under the procedures described in the preceding two paragraphs will be conducted by a reviewer who is neither the individual who made the adverse benefit determination that is the subject of the appeal, nor the subordinate of such individual. The reviewer will not afford deference to the initial adverse benefit determination, but will take into account all comments, documents, records, and other information submitted by you relating to the claim, without regard to whether such information was submitted or considered in the initial benefit determination. If the adverse benefit determination was based on a medical judgment, the reviewer will consult with an appropriate health care professional who (a) was not consulted on the original adverse benefit determination, (b) is not subordinate to someone who was consulted on the original adverse benefit determination, and (c) has appropriate training and experience in the field of medicine involved in the medical judgment. The reviewer will either (1) provide you with a list of any experts whose advice was obtained on the original adverse determination, without regard to whether the advice was relied upon in making the determination or (2) notify you that you may request, in writing, a list of such experts. You must also be provided reasonable access to, and copies of, all documents, records and other information relevant to your claim. No fee may be charged for such access and/or copies.
- **Review on Appeal.** In general, your appeal will be reviewed within 45 days of the date it is received by the Administrator (unless special circumstances require an extension to 90 days and you are so notified before the end of the 45-day review period). The reviewer will conduct a full and fair review of the Administrator's decision denying your claim for benefits and will render its written decision. If the reviewer anticipates denying your appeal, whether in whole or in part, based on new or additional evidence or a new or additional rationale, the reviewer must provide you with (i) the new or additional evidence considered, relied upon, or generated by or at the direction of the Plan, the insurer, the reviewer, or any other person making the benefit determination and/or (ii) the new or additional rationale for the determination. The information must be provided to you free of charge and as soon as possible so that you have a reasonable opportunity to review the information and submit a response before the reviewer is required to render its decision. If the reviewer decides for whatever reason to deny, whether in whole or in part, your appeal of an adverse benefit determination, the reviewer's decision will be provided in a culturally and linguistically appropriate manner and contain the following: (a) the specific reasons for the denial; (b) reference to specific Plan provisions on which the denial is based; (c) 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; (d) either (1) if the claim denial is based on an internal rule, guideline, protocol, or other similar criterion, a copy of the specific rule, guideline, protocol, or other similar criterion relied upon, or (2) an affirmative statement that the claim denial is **not** based on an internal rule, guideline, protocol, or other similar criterion; (e) if the claim denial is based on a medical necessity or experimental treatment or similar exclusion or limit, either an explanation of the scientific or clinical judgment for the determination, applying the terms of the Plan to your medical circumstances, or a statement that such explanation is available upon request, free of charge; (f) a discussion of the decision, including an explanation for disagreeing with or not following (1) the views you presented of health care professionals who treated you and vocational professionals who evaluated you; (2) the views of medical or vocational experts whose advice was obtained on behalf of the Plan in connection with the adverse benefit determination, without regard to whether the advice was relied on in making the determination; and (3) any Disability determinations made by the Social Security Administration; (g) a statement describing any voluntary review procedures and your right to obtain copies of such procedures; and (h) a statement that you have a right to bring a civil action under ERISA §502(a).
- **Additional Levels of Appeal.** If the Plan provides additional level(s) of appeal, the Plan may not require you to file more than two appeals of an adverse benefit determination prior to bringing a civil action under ERISA Section

502(a). If the Plan offers voluntary level(s) of appeal, then (a) the Plan waives any right to assert that you failed to exhaust administrative remedies because you did not submit a benefit dispute to any voluntary level of review provided by the Plan; (b) any statute of limitations or other defense based on timeliness is temporarily suspended during the time that a voluntary appeal pursuant to the Plan's procedures is pending; (c) you may only submit a benefit dispute to a voluntary level of review if you have exhausted the appeals permitted above; and (d) the Plan provides to you, upon request, sufficient information concerning the voluntary level(s) of appeal to enable you to make an informed decision about whether to submit a benefit dispute to the voluntary level of appeal, including (1) a statement that your decisions as to whether or not to submit a dispute to the voluntary level of appeal will have no effect on your right to other benefits under the Plan, (2) information about the applicable rules, (3) your right to representation, (4) the process for selecting a decision maker, and (5) any circumstances that may affect the impartiality of the decision maker. No fees or costs may be imposed on you as part of the voluntary level of appeal.

Participants Absent Because of Military Duty

Participants Who Die During Military Absence

If you are absent from employment with us because of military service and you die on or after January 1, 2007 while you are performing "qualified" military service (as defined under the Internal Revenue Code), you will be treated as having returned to employment on the day before your death for Vesting purposes. However, you will not be entitled to any additional benefits or contributions with respect to your period of military leave.

Qualified Reservist Distributions

A Qualified Reservist Distribution may be made to a Participant who is a Qualified Reservist under any circumstance and/or for any reason. A Qualified Reservist Distribution is any distribution of 401(k) Contributions to a Qualified Reservist that is made during the period beginning on the date the Qualified Reservist is ordered or called to active duty and ending on the last day of active duty. A Qualified Reservist is an individual who is a member of a reserve component and is called to active duty after September 11, 2001 either for a period in excess of 179 days or for an indefinite period.

A Participant who is a Qualified Reservist may request a Qualified Reservist Distribution on or after the date of the order or call to active duty and before the last day of the Plan Year during which the order or call to active duty occurred. The Administrator must receive a copy of the order or call to active duty prior to any amounts being distributed. The Administrator may rely on the order to determine the period that the Qualified Reservist has been ordered or called to active duty. The Qualified Reservist is eligible for a Qualified Reservist Distribution if the order specifies a period of 180 or more days. It does not matter if the actual period of active duty is less or otherwise changed. A Qualified Reservist will be eligible for a Qualified Reservist Distribution if the original order or call is less than 180 days and subsequent calls or orders increase the total period of active duty to 180 or more days.

Qualified Reservist Distributions are not subject to the 10% early withdrawal penalty tax. In addition, at any time during the two-year period beginning on the day after the last day of the Qualified Reservist's active duty, a Qualified Reservist who has received one or more such distributions may make one or more repayment contributions to an IRA, up to the total amount of the Qualified Reservist Distributions, and the dollar or Compensation limitations that apply to contributions to an IRA do not apply to these repayments. However, you will not receive any tax deduction for repayment of Qualified Reservist Distributions to an IRA.

Active Duty Severance Distributions

If you are absent from employment with us while you are on active military duty for a period of more than 30 days, you are considered to have terminated employment with us and you can therefore elect to take a distribution of some or all of your 401(k) Contributions Account or Voluntary Employee Contributions Account, if applicable. Some restrictions apply (for example, you cannot make additional 401(k) Contributions or Voluntary Employee Contributions, if applicable, for a period of 6 months after the distribution), and you should consult the Administrator in the event you are interested in taking such a distribution.

Other Information

Addition of Dividend or Income Payment Allocated Among Participants

When dividends or income payments are allocated among Participant Accounts, and the pro-rata allocation of such payment would result in the allocation of less than \$25 to a terminated Participant who had previously taken a final distribution, then such terminated Participant will not receive the allocation. Such amount will be deposited to the Trust and the Administrator will allocate all such amounts on a pro-rata basis to the other Participants receiving such dividend or income payment.

Attachment of Your Account

Your creditors cannot garnish or levy upon your Account except in the case of a proper IRS tax levy, and you cannot assign or pledge your Account except as collateral for a loan from the Plan or as directed through a Qualified Domestic Relations Order ("QDRO") as part of a divorce, child support or similar proceeding in which a court orders that all or part of your Account be transferred to another person (such as your ex-Spouse or your children). The Plan has a procedure for processing QDROs, which you can obtain free of charge from the Administrator.

Amendment or Termination of the Plan

Although we intend for the Plan to be permanent, we can amend or terminate it at any time. If we do terminate the Plan, all Participants will have a 100% Vested Interest in their Accounts as of the Plan termination date, and all Accounts will be available for distribution at the same time and in the same manner as would have been permissible had the Plan not been terminated.

Accounts Are Not Insured

Your Account is not insured by the Pension Benefit Guaranty Corporation ("PBGC") because the insurance provisions of ERISA do not apply to 401(k) plans. For more information on PBGC coverage, ask the Administrator or contact the PBGC. Written inquiries to the PBGC should be addressed to: Technical Assistance Division, PBGC, 445 12th Street SW, Washington, D.C. 20024-2101. You can also call them at 800-400-7242.

Payment of Plan Expenses

The Plan routinely incurs expenses for the services of lawyers, actuaries, accountants, third party administrators, and other advisors. Some of these expenses may be paid directly by us while other expenses may be paid from the assets of the Plan. The expenses that are paid from Plan assets will be shared by all Participants either on a pro-rata basis or an equal dollar basis. If the expense is paid on a pro-rata basis, an amount will be deducted from your Account based on its value as compared to the total value of all Participants' Accounts. For example, if the Plan pays \$1,000 of expenses and your Account constitutes 5% of the total value of all Accounts, \$50 would be deducted from your Account ($\$1,000 \times 5\%$) for its share of the expense. On the other hand, if the expense is paid on an equal dollar basis, the expense is divided by the number of Participants and then the same dollar amount is deducted from each Participant's Account.

Statement of ERISA Rights

Your Right To Receive Information

You are entitled to certain rights and protections under the Employee Retirement Income Security Act of 1974 ("ERISA"). ERISA provides that all Participants are entitled to:

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

- Description upon written request to the Administrator (the Administrator may make a reasonable charge for the copies);
- (c) Receive a summary of the Plan's annual financial report (the Administrator is required by law to furnish each Participant with a copy of this summary annual report); and
 - (d) Obtain a statement telling you whether you have a right to receive a pension at Normal Retirement Age (which is defined elsewhere in this Summary Plan Description) and if so, what your benefits would be at Normal Retirement Age if you stop working under the Plan now. If you do not have a right to a pension, the statement will tell you how many more years you have to work to get a right to a pension. This statement must be requested in writing and is not required to be given more than once every 12 months. The Plan must provide the statement free of charge.

Duties of Plan Fiduciaries

In addition to creating rights for Plan Participants, ERISA imposes duties upon the people who are responsible for the operation of the Plan. The people who operate your Plan, called "fiduciaries" of the Plan, have a duty to do so prudently and in the interest of you and other Plan Participants and beneficiaries. No one, including your Employer, your union, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a pension benefit or exercising your rights under ERISA.

Enforcement of Rights

If your claim for a pension 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 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. In addition, if you disagree with the Plan's decision or lack thereof concerning the qualified status of a domestic relations order, you may file suit in Federal court. If it should happen that Plan fiduciaries misuse the Plan's money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a Federal court. The court will decide who should pay court costs and legal fees. If you are successful, the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees, for example, if it finds your claim is frivolous.

Assistance With Your Questions

If you have any questions about your Plan, you should contact the Administrator. If you have questions about this statement or about your ERISA rights, or if you need assistance in obtaining documents from the Administrator, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory; or contact them at <https://www.dol.gov/agencies/ebsa/about-ebsa/about-us/organization-chart> or at 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 can call the Employee Benefits Security Administration (the "EBSA") at 866-444-3272 (TTY/TDD users can call 877-889-5627). You may also obtain certain publications about your rights and responsibilities under ERISA by

calling the publications hotline of the EBSA. Additional pension-related information can be obtained at the following Department of Labor's website where you can review a publication called "What You Should Know About Your Retirement Plan": <https://www.dol.gov/sites/default/files/ebsa/about-ebsa/our-activities/resource-center/publications/what-you-should-know-about-your-retirement-plan.pdf>.

Other Account Questions?

Call 800-724-7526 to talk to a Participant Services Representative during prescribed business hours.

Glossary

Many definitions are used in this Summary and most are defined in the section in which they appear, but the following terms have broader application and are used throughout the Summary:

Account. Your Account represents the aggregate value of the contributions made to the Plan on your behalf, as well as the net earnings on those contributions. Your Account may include (but is not limited to) the following sub-accounts: the 401(k) Contributions Account; the Safe Harbor Matching Contribution Account; and the Profit Sharing Contribution Account.

Allocation Period. The Allocation Period is the period of time for which a contribution to the Plan is allocated. The Allocation Period is generally the Plan Year but can be a shorter period of time.

Disability. Disability is a physical or mental impairment you suffer after you become a Participant in the Plan (and while you are still an employee) which is defined as The inability to engage in any substantial, gainful activity by reason of any medically determinable physical or mental impairment that can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months.

Eligible Adoptee. For purposes of the Qualified Birth or Adoption Distribution, an Eligible Adoptee is an individual (other than the children of an individual's spouse) who is either under the age of 18 or is physically or mentally incapable of self-support.

Fringe Benefit Payments. Fringe Benefit Payments, in general, are reimbursements or other expense allowances, cash and noncash fringe benefits, moving expenses, deferred compensation, and welfare benefits.

Key Employee. A Key Employee is an Employee who satisfies certain executive, ownership, or Compensation requirements as set forth in the Internal Revenue Code.

Merger and Acquisition Employee. A Merger and Acquisition Employee is, generally, an individual who becomes, or ceases to be, an Employee as a result of a merger or acquisition.

Normal Retirement Age. Normal Retirement Age is the date you reach age 65.

Post-Severance Compensation. In general, Post-Severance Compensation are amounts paid to you within 2½ months after your termination of employment, which, absent your termination of employment, would have been paid to you while you were still an Employee. For purposes of this Plan, Post-Severance Compensation (a) includes payments for your regular working hours, for overtime or shift differential, for commissions or bonuses, or for other similar payments; (b) includes unused paid time off such as vacation time earned while employed; (c) includes any payments made to a non-qualified deferred Compensation plan on your behalf; and (d) if you are disabled, excludes any post-termination employment payments made to you.

Profit Sharing Contribution. A Profit Sharing Contribution is an additional type of contribution we may elect to make to the Plan for any Plan Year. Profit Sharing Contributions are generally made as a percentage of pay.

Puerto Rico Based Employee. A Puerto Rico Based Employee is an Employee who resides in Puerto Rico.

Spouse. The term “Spouse” or “marriage” should be read to include either opposite or same-gender couples legally married in any state, U.S. territory or foreign jurisdiction that recognizes such marriages, regardless of where you currently live. However, a registered domestic partnership, civil union or similar relationship recognized under state law is not considered a “marriage” for purposes of this retirement plan.

Union Employee. A Union Employee is an Employee whose employment is governed by a collective bargaining agreement between Employee representatives and the Employer in which retirement benefits were the subject of good faith bargaining.

Vested Interest. Your Vested Interest is the percentage of your Account to which you are entitled at any point in time. This percentage, in turn, is the aggregate of your Vested Interest in your various sub-accounts. However, notwithstanding any vesting schedule set forth in other sections of this Summary, you will have a 100% Vested Interest in your Account upon reaching Normal Retirement Age, or upon your death or Disability while you are still a Participant but before you terminate employment.