



ADMINISTRATIVE OFFICES

HEALTH & WELFARE, PENSION AND DEFINED CONTRIBUTION

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www.azpipe.org

MEMORANDUM

To: All Active Participants
From: Board of Trustees
Date: June 2026
Re: Arizona Pipe Trades Defined Contribution Trust Fund
Open Enrollment for 401(k) Elective Deferral Option

During the month of June, the Board of Trustees is holding open enrollment for the 401(k) option for all active participants. If you are a new enrollee, your 401(k)-deferral election will be effective July 2026. If you have already enrolled with your current employer, you do not need to take action, unless you want to change your election.

This open enrollment gives you the opportunity to defer and direct to your individual account in the Plan a portion of your wages on a tax-favored basis. This will help you invest for your future while you receive tax advantages today. The wage deferral is in addition to the contributions which your Employer is making under the Collective Bargaining Agreement.

You may defer a portion of your wages in the following increments: \$.50, \$1.00, \$1.50, \$2.00, \$2.50, \$3.00, \$4.00, \$5.00, \$6.00, \$7.00 or \$8.00 per hour or additional amounts in \$1.00 increments of your hourly wage subject to the following limits. **The amount deferred cannot exceed \$24,500 for the 2026 taxable year, as indexed by the IRS.** In addition, under current IRS law and regulations, if you are age 50 or over, you may make an additional catch-up contribution of up to \$8,000 for the 2026 taxable year (or up to \$11,250, if you attain age 60, 61, 62, or 63 during 2026). Those limits do not include the contributions that your Employer has made on your behalf.

The enclosed authorization form is a written wage deferral agreement between you and your Employer. Once you complete the form, give it to your Employer. Your Employer will withhold the amount which you designate from your wages and send it to the Fund. This wage deferral can be elected only during open enrollment each year (January 1 and July 1) or when you start with a new Employer.

You may revoke the authorization at any time by signing a new form. If you revoke, you may reinstate deferrals during any future Open Enrollment period or upon being dispatched from the hiring hall.

Please note that this form must be turned into your Employer by June 30, 2026. Your Employer will email or fax a completed copy to the Trust Fund's Administrative Office. Your 401(k) deferred contributions will be accounted for separately from the Employer contributions.

Should you have any questions, please contact the Administrative Office.

ARIZONA PIPE TRADES DEFINED CONTRIBUTION TRUST FUND
EMPLOYEE AUTHORIZATION TO DEFER ELECTIVE CONTRIBUTIONS

I hereby authorize my Employer _____ to withhold from my hourly wage the amount selected below. The Employer shall report the amount withheld on the monthly Employer Reporting Form beginning no later than the first reporting month after the Employer receives a copy of this Authorization form. The Employer shall send the report and the money withheld to the Administrative Office no later than the 15th day of the next month. The Employer shall not report the deferred elective contributions as Federal or State taxable income but will withhold FICA (Social Security) and Medicare taxes.

NOTICE TO TRAVELERS: You are eligible to elect 401(k) wage deferrals only if your home local maintains either a 401(k) plan or a defined contribution plan with a 401(k) option. **You should check with your home local before electing a deferral.** If you are not eligible, deferral amounts will be refunded through your employer to you as taxable income.

DEFERRAL LIMITS: You may defer \$.50, \$1.00, \$1.50, \$2.00, \$2.50, \$3.00, \$4.00, \$5.00, \$6.00, \$7.00 or \$8.00 per hour or additional amounts in increments of \$1.00 of your hourly wage. In 2026, IRS rules limit deferrals to \$24,500 per year except if you are age 50 or over, you may defer up to \$32,500 (and up to \$35,750 if you attain age 60, 61, 62, or 63 in 2026). The limits do not include the contributions your Employer makes on your behalf. Deferral amounts in excess of these limits will be refunded through your employer to you as taxable income.

I choose to defer \$ _____ per hour worked.

I choose to change my deduction from \$ _____ to \$ _____ per hour worked.

I choose to stop my payroll deduction of \$ _____. Date: _____

I understand that:

- (1) I may change the deferral amount only during an annual enrollment period or upon dispatch to a new employer;
- (2) I may terminate this authorization at any time by completing a new form; and
- (3) This contribution is strictly voluntary and is in addition to the mandatory employer contribution.

Signature: _____ Date: _____

Printed Name: _____ SSN: _____

Address: _____

Email Address: _____

EMPLOYER please email or fax copy and mail ORIGINAL to:

Arizona Pipe Trades Trust Fund
3109 N. 24th Street, Suite 105
Phoenix, AZ 85016
Fax #: 602-956-3016; Email: staff@azpipe.org

U.A. Local #469
3109 N. 24th Street
Phoenix, AZ 85016
Fax #: 602-956-9782; Email:
tpleitez@ualocal469.org

EMPLOYEE & EMPLOYER please RETAIN COPY for your records.