

1199SEIU

LEGAL ASSISTANCE FUND

SUMMARY PLAN DESCRIPTION

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1199SEIU
LEGAL ASSISTANCE FUND
SUMMARY PLAN DESCRIPTION (SPD)
EFFECTIVE DATE: OCTOBER 1, 2026

This booklet serves as both the Summary Plan Description (“SPD”) and Plan Document for participants in the 1199SEIU Legal Assistance Fund, which provides or facilitates immigration-related legal services and related Benefits for eligible individuals.

The Plan is administered by the Board of Trustees (the “Trustees”) of the 1199SEIU Legal Assistance Fund (the “Fund”). No individual or entity other than the Trustees has the authority to interpret the provisions of this SPD or make any promises to you about the Plan.

The Trustees reserve the right to amend, modify, discontinue or terminate all or part of this Plan for any reason and at any time. These changes may be made by formal amendments to the Plan; Board of Trustees resolutions; Trustee action by phone or in writing without a meeting; and/or any other methods allowed for Trustee actions.

If the Plan is amended or terminated, you may not receive Benefits as described in this SPD. This may happen at any time, even after you stop working, if the Trustees decide to terminate the Plan or your coverage under the Plan. In no event will any individual, including you, your Spouse or your children, become entitled to any vested or otherwise non-forfeitable rights under the Plan.

The Trustees reserve the complete authority and discretion to construe the terms of the Plan (and any related Plan documents), including, without limitation, the authority to determine the eligibility for and the amount of benefits payable or available under the Plan. These decisions shall be final and binding upon all parties affected by such decisions.

This SPD and other Plan documents are your sources of information on the Plan. You cannot rely on information from co-workers or Union or Contributing Employer representatives. If you have any questions about the Plan and how its coverage works, contact the Fund staff, who will be glad to help you. Because telephone conversations and other oral statements can easily be misunderstood, they cannot be relied upon if they are in conflict with what is stated in this SPD.

NEED HELP WITH THE SUMMARY PLAN DESCRIPTION (“SPD”)?

This SPD is a summary of your 1199SEIU Legal Assistance Fund benefits and the policies and procedures for using these benefits. It includes, among other things, eligibility requirements, limitations and exclusions under the Plan.

If the language is not clear to you, get assistance by calling the Fund at (646) 473-9200. Outside New York City, call (800) 575-7771.

Office hours for the Fund are 8:00 am to 6:00 pm, Monday through Friday.

¿NECESITA AYUDA CON LA DESCRIPCIÓN ABREVIADA DEL PLAN (SUMMARY PLAN DESCRIPTION, “SPD”, POR SUS SIGLAS EN INGLÉS)?

Este SPD es un resumen de los beneficios de su Fondo de Asistencia Legal 1199SEIU, así como de las políticas y procedimientos para utilizar dichos beneficios. Incluye, entre otras cosas, los requisitos de elegibilidad, las limitaciones y las exclusiones del Plan.

Si no entiende bien el texto, puede obtener ayuda llamando al Fondo al (646) 473-9200. Fuera de Nueva York, llame al (800) 575-7771.

El horario de oficina para el Fondo es de 8:00 a.m. a 6:00 p.m., de lunes a Viernes.

需要計畫摘要說明(“SPD”)的協助嗎？

本《摘要计划说明书》SPD) 概述了您的 1199SEIU 法律援助福利基金 (1199SEIU Legal Assistance Fund) 所提供的福利，以及使用这些福利的相关政策与程序。其中涵盖了该计划的资格要求、限制条件及除外责任等内容。

如果您對語言有疑問，請撥打福利基金會電話 (646) 473-9200 以尋求協助。紐約市以外地區，請撥打 (800) 575-7771。

基金會辦公時間為星期一至星期五，上午8:00至下午6:00。

У ВАС ВОЗНИКЛИ ВОПРОСЫ ПОСЛЕ ОЗНАКОМЛЕНИЯ С КРАТКИМ ОПИСАНИЕМ ВАШЕГО ИНДИВИДУАЛЬНОГО ПЕНСИОННОГО ПЛАНА (SUMMARY PLAN DESCRIPTION, SPD)?

Настоящий документ (SPD) представляет собой краткий обзор льгот, предоставляемых Фондом юридической помощи 1199SEIU (1199SEIU Legal Assistance Fund), а также правил и порядка их использования. В частности, он содержит информацию о критериях права на получение льгот, а также об ограничениях и исключениях, предусмотренных Планом.

Если у вас возникают трудности с пониманием информации, изложенной в этом документе, обратитесь за помощью, позвонив в фонд Fund по номеру (646) 473-9200. Если вы проживаете за пределами г. Нью-Йорка, звоните по номеру (800) 575-7771.

Часы работы фонда Benefit Fund: с понедельника по пятницу с 8 утра до 6 вечера.

BEZWEN ÈD AVÈK REZIME DESKRIPSYON PLAN AN (SUMMARY PLAN DESCRIPTION, SPD)?

SPD sa a se yon rezime benefis Fon Asistans Legal 1199SEIU ou yo ansanm ak règleman ak pwosedi pou itilize benefis sa yo. Li gen ladan, pami lòt bagay, kondisyon kalifikasyon, limitasyon ak esklizyon anba Plan an.

Si langaj la pa klè pou ou, rele Fon pou w jwenn asistans nan (646) 473-9200. Andeyò Vil Nouyòk, rele (800) 575-7771.

Orè biwo pou Fon lan se 8:00 am pou rive 6:00 pm, Lendi rive Vandredi.

Dear 1199SEIU Member:

Your Fund provides a range of Benefits for full-time and part-time Eligible Members, including Eligible Members who recently left Covered Employment. The purpose of the Plan is to provide Eligible Individuals with both access to immigration lawyers and financial assistance for certain immigration matters.

This SPD is designed to make it easier for you to find information you need and to understand your rights and responsibilities under the Plan.

It is important that you read the entire SPD so you know:

- What Benefits you are Eligible to receive;
- What policies and procedures need to be followed to get your Benefits; and
- How to use your Benefits wisely.

The 1199SEIU Legal Assistance Fund understands there is confusion about the immigration process and that members may be hesitant to ask for help from unknown sources. This Fund contracts with immigration law firms to assist you through an often-shifting immigration landscape. These services are provided to you at little or no cost.

If you have any questions or concerns about your Benefits, call the Fund's Member Services Department at (646) 473-9200.

The Board of Trustees

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NEED TO KNOW WHAT CERTAIN TERMS MEAN IN THIS SPD?

Refer to the Definitions Section

Section V lists the terms used in this SPD and explains how they are defined by the Fund. Most defined terms are capitalized throughout this SPD.

Refer to Section V if you have any questions about the meaning of specific words or phrases, such as “Participating Law Firm” or “Eligible.” If you have any additional questions, please call our Fund’s Member Services Department at (646) 473-9200. Outside New York City, call (800) 575-7771.

SECTION I – ELIGIBILITY AND ENROLLMENT

- A. Who Is Eligible
- B. Enrollment in the Fund
- C. When Your Benefits Stop

RESOURCE GUIDE

KEY CONTACTS

Member Services Department
(646) 473-9200
(Outside New York City:
(800) 575-7771)

Call the Member Services
Department to:

- Check whether you are Eligible to receive Benefits
- Request forms

1199SEIU Legal Assistance Fund
(646) 473-6915
LegalAssistance@1199Funds.org

Contact the Fund to:

- Request an appointment with a Participating Law Firm
- Find out if you are Eligible for specific Benefits

REMINDERS

- You must enroll in the Fund to be Eligible for Benefits.
- Fill out all forms completely and attach all required documentation. If you do not, your benefits may be delayed or even denied.
- Notify the Fund of any changes to your contact information.

Visit our website, www.1199SEIUBenefits.org, for forms, directories and other information.

SECTION I. A

WHO IS ELIGIBLE

You are Eligible for Benefits in the 1199SEIU Legal Assistance Fund if:

- You are in Covered Employment and are a participant in the 1199SEIU National Benefit Fund for Health and Human Service Employees (“NBF”); or
- You are in Covered Employment and are a participant in the 1199SEIU Greater New York Benefit Fund (“GNY”);
- You work in Covered Employment for a Contributing Employer that does not participate in either the NBF or GNY; or
- You left Covered Employment less than 12 months ago; after June 25, 2026; and because your work authorization ended.

Your Spouse and your Children are also eligible if you are actively employed in Covered Employment, or you left Covered Employment less than 12 months ago, after June 25, 2026, because your work authorization ended:

- With either Wage Class I or II NBF coverage or Eligibility Class I or II GNY coverage; or
- Earning at least 60% of the minimum full-time wage with a Contributing Employer that does not participate in the NBF or GNY

SECTION I. B

ENROLLMENT IN THE FUND

You, your Spouse and your Children over age 18 must complete and provide all required forms, documentation and information. (Children under age 18 may have a parent or legal guardian assist them in completing the enrollment forms.) You may be required to sign an acknowledgement of your rights and responsibilities and/or the limits of the legal representation provided to you through this Plan. You may also be asked to provide documentation that establishes your (or your Spouse’s or your Children’s) identity, eligibility, immigration history, family relationships and employment history.

SECTION I. C

WHEN YOUR BENEFITS STOP

Your coverage under the Plan ends when you no longer meet the eligibility requirements outlined in Section I.A. Plan coverage for your Spouse and Children end when they either no longer meet the eligibility requirements outlined in Section I.A or are no longer your Spouse or Child as defined by the Plan. (See Section V for definitions.)

Your coverage under the Plan will also end if the Plan terminates or if your Employer is no longer obligated to make payments to the Fund on your behalf or if payments are no longer required to be made to the Fund on your Employer’s behalf. If your Employer continuously fails to make contributions on your behalf or is excessively delinquent in making contributions on your behalf, the Trustees have the right to terminate coverage.

If you have a legal matter being handled under the Plan and you lose eligibility, the Plan Administrator, in its discretion, may continue to pay for legal services covered by the Plan until the matter is completed.

Your coverage may be denied, suspended or terminated if you knowingly provide false information or submit fraudulent documents. Coverage may also end upon Plan termination or as of the date your Contributing Employer terminates its participation in the Fund.

SECTION II – IMMIGRATION LEGAL SERVICES

- A. Participating Law Firms
- B. Covered Services
- C. Additional Benefits for Non-working Participants
- D. What Is Not Covered
- E. Extent of Legal Representation
- F. Why a Participating Law Firm May Be Unable to Represent You

KEY CONTACTS

1199SEIU Legal Assistance Fund
(646) 473-6915
LegalAssistance@1199Funds.org

Contact the Fund to:

- Ask questions about Plan Benefits
- Find out if you are Eligible for Benefits described in this section
- Request an appointment with a Participating Law Firm

REMINDERS

- You must contact the Fund to begin using the services described in this section.
- The Fund will help determine which services are right for you.
- Prior Authorization may be required for specific categories of legal representation and services.
- If you are eligible for and use certain legal services, you will be asked to sign an agreement with the Participating Law Firm.
- The 1199SEIU Legal Assistance Fund is not a law firm and does not provide legal advice. Legal advice and help with specific legal matters are provided only by Participating Law Firms.

Visit our website, www.1199SEIUBenefits.org, for forms, directories and other information.

SECTION II. A

PARTICIPATING LAW FIRMS

Your Fund contracts with law firms that provide immigration-related legal services (“Participating Law Firms”) to Eligible Individuals and pays the Participating Law Firm directly. You must use a Participating Law Firm to receive Benefits under the Plan. The Fund reserves the right to select or replace a Participating Law Firm and to establish standards governing the scope and delivery of services. You may opt out of using Plan Benefits at any time and choose to use a non-participating law firm at your own expense.

PARTICIPATING LAW FIRMS

The Participating Law Firms, not the Fund, are responsible for evaluating each matter and determining whether representation is appropriate. The Fund does not direct, instruct, interfere with or control the professional judgment or the professional duties of lawyers at Participating Law Firms. The Fund does not interfere with the confidential relationship between you and a Participating Law Firm.

The Participating Law Firms remain solely responsible for all legal advice and representation they provide. In addition, eligibility for legal representation under the Plan is subject to each Participating Law Firm’s professional judgment, case acceptance criteria and legal assessment.

HOW IT WORKS

As an Eligible Individual, you will receive one-on-one counseling and legal consultations to assess your immigration options and determine the most appropriate legal strategy. As a condition of receiving legal services under the Plan, Eligible Individuals may be required to sign an acknowledgment of their rights and responsibilities and/or the limits of the legal representation provided through the Plan, as well as any other related authorizations required by the Participating Law Firm.

Information you provide in connection with immigration-related legal services will be maintained in accordance with applicable **privacy, confidentiality and attorney–client privilege requirements**. Any attorney–client relationship arising from services provided under the Plan exists solely between the Eligible Individual and the Participating Law Firm.

No Guarantee of Representation of Approval

Eligibility for Benefits under the Plan does not guarantee that Eligible Individuals will be accepted for legal representation by the Participating Law Firm in any particular matter.

Similarly, neither the Fund nor the Participating Law Firm guarantee the approval of any application, petition, visa, employment authorization document, immigration benefit, lawful permanent residence application, naturalization application or other immigration request.

The Participating Law Firm shall retain sole professional discretion to determine whether to accept representation of any Eligible Individual.

SECTION II. B

COVERED SERVICES

WHAT IS COVERED

If you are eligible as described in Section I.A, you are eligible for the Benefits related to matters before United States Citizenship and Immigration Services (USCIS) and the U.S. Immigration Court, described below.

Citizenship and Green Cards

Participating Law Firms provide assistance with preparing and filing the following USCIS humanitarian-based and employment-based lawful permanent residence (Green Card) applications, renewals, petitions and affidavits. They also provide assistance with responses to requests for evidence. The Fund may provide reimbursement of associated filing fees. The following are examples of USCIS forms and submissions included as Covered Services. This is not an exhaustive list:

- Application for Affirmative Asylum (Form I-589)
- Application for Temporary Protected Status (TPS) (Form I-821)
- Consideration of Deferred Action for Childhood Arrivals (DACA) and renewals (Form I-821D)
- Application for T Nonimmigrant Status (Form I-914)
- Petition for U Nonimmigrant Status (Form I-918)
- Response to a Request for Evidence (RFE)
- Miscellaneous Relief before USCIS, including requests to expedite application approval, process a change of address or communicate with USCIS for case updates
- Schedule A, Group I Designation Petitions (Form I-140 and DOL ETA Form 9089)

In addition, Participating Law Firms may help you prepare for USCIS interviews and may attend the interviews (in person or virtually).

NOTE: You may be eligible for assistance with family-based Green Card applications through NBF, GNY or the Fund, as described in Section II.C.

Immigration Court Removal Proceedings and Detention

Participating Law Firms may provide the following legal representation, and the Fund may provide reimbursement of associated filing fees, related to removal proceedings or deportation-related detention.

- Removal proceedings:
 - » Application for Asylum and for Withholding of Removal (Form I-589); services may include developing evidence and supporting documents and representation at hearings before the U.S. Immigration Court. Master calendar hearings will be attended by the Participating Law Firm virtually, and merit hearings will be attended by the Participating Law Firm in person.
 - » Family-based petitions when USCIS does not have jurisdiction of the individual case (for example, Green Card applications)
 - » Removal proceeding miscellaneous relief (e.g., dismissal motion, voluntary abandonment of case in anticipation of self-deportation, motion to transfer cases, motion to consolidate cases)
- Detention matters:
 - » Bond hearings before the U.S. Immigration Court
 - » Petition for a writ of habeas corpus before federal district court, where appropriate

In the event you are subject to an adverse immigration action or an administrative separation from your family or personal affairs, the Fund will provide counseling regarding forms designating a person to hold power of attorney, standby guardianship or parental relationship status.

NOTE: You may also have access to classes to help you prepare for the naturalization interview and test, as well as classes to learn English as a second language (ESL classes) sponsored by the 1199SEIU Training and Employment Funds. Contact the Fund to learn more.

The Benefits in this Plan are provided at no cost to you. However, the value of the Benefits described in this subsection and the amount of any income tax and other amounts (including Social Security or Medicare taxes) paid on your behalf based on the value of those benefits, taxes and other amounts are considered taxable earnings. The value will be included in an IRS Form W-2 you will receive from the Fund at the end of each calendar year. The taxes that are normally taken out of your paycheck, like FICA (Social Security and Medicare taxes) and applicable withholdings, will be paid for by the Fund. You are encouraged to consult with your tax professional regarding your tax liabilities. If you choose to

engage a Participating Law Firm for additional services not covered by the Plan, you will be responsible for the cost of those services.

SECTION II. C

ADDITIONAL BENEFITS FOR NON-WORKING PARTICIPANTS

If you left Covered Employment less than 12 months ago; after June 25, 2026; and because your work authorization ended, you are eligible for the following Benefits in addition to the Benefits described in Section II.B.

Note: Participants working in Covered Employment may be eligible for these services through the NBF or GNY.

WHAT IS COVERED

The Plan covers immigration-related legal services before the USCIS related to U.S. citizenship applications and family-based Green Card applications and renewals, including consultations, document preparation, affidavits and, where applicable, interview preparation, as well as reimbursement of filing fees. The following are examples of USCIS forms included as Benefits. This is not an exhaustive list:

- Application for Employment Authorization (Form I-765, work permit)
- Petition for Alien Relative (Form I-130)
- Application to Register Permanent Residence or Adjust Status (Form I-485, Green Card application)
- Application for Naturalization (Form N-400, citizenship)
- Application for Certificate of Citizenship (Form N-600)

SECTION II. D

WHAT IS NOT COVERED

Only services listed in Sections II.B and II.C are Benefits. The following are examples of what services are *not* covered under the Plan. This is not an exhaustive list:

- Non-immigrant visa services for Contributing Employers
- Employment-based Green Card applications other than Schedule A Designation Petitions
- Matters unrelated to immigration law
- Legal services provided by non-participating lawyers or law firms
- Reimbursement for translation expenses, expert witness fees, travel costs and other third-party expenses

SECTION II. E

EXTENT OF LEGAL REPRESENTATON

The Plan provides lawyers and legal assistance only in the United States. The Plan only provides the Benefits set forth in Sections II.B and II.C. The Plan **does not cover:**

- Disputes with your Contributing Employer or its officers, agents or subsidiaries;
- Any criminal or civil matter that is related to, or arises out of, employment with a Contributing Employer;
- Disputes with 1199SEIU United Healthcare Workers East (or any of its affiliates) or any of their employees, officers, agents or affiliated bodies or their officers or agents; or
- Disputes or potential disputes with the Fund or any other 1199SEIU United Healthcare Workers East-related benefit plan or Fund, or one of its affiliates, or a Contributing Employer or any of their employees, officers, agents or affiliated bodies.

This is not an exhaustive list.

SECTION II. F

WHY A PARTICIPATING LAW FIRM MAY BE UNABLE TO REPRESENT YOU

Lawyers are governed by a Code of Professional Conduct that states that they cannot represent clients who make unreasonable demands or are uncooperative. Unreasonable demands include, but are not limited to, requests for representation before USCIS or the U.S. Immigration Court when, in the judgment of the Participating Law Firm, to participate would be tantamount to a frivolous or legally improper action or defense. Cooperation includes, but is not limited to, providing the Participating Law Firm with documents required by law or court rules for your case. If you persist in making unreasonable demands or in being uncooperative, or do not provide necessary documentation, the Participating Law Firm may, at their discretion, withdraw from the case.

SECTION III – APPEALING DENIED BENEFITS

Requests for Benefits under the Plan must be submitted by you in writing to the Fund. In this section, “you” and “your” refers to: a Member, Spouse or Child, or their authorized representative, or a purported Member, Spouse or Child, or their authorized representative, as applicable.

In general, when you request benefits under the Plan, you will receive a determination regarding your eligibility for benefits within 90 days of the Fund’s receipt of your request.

Under special circumstances, the Fund may require an additional period of not more than 90 days to review your request. If this occurs, you will be notified in writing, prior to the termination of the initial 90-day period, as to the reason for the extension and the date by which a decision is expected to be made, as well as any other information needed in order to process your claim.

In certain cases, your claim or request will be denied, either in whole or in part. This is called an Adverse Benefit Determination. If this happens, you will receive a written denial notice. It will include the reasons for the denial, the Plan provision on which the denial is based, a list of additional material or information that may be required to perfect your claim and an explanation of why such material or information is necessary. The notice will also include a description of the Plan’s appeal procedures and the applicable time limits, including a statement of your right to bring a civil action under Section 502(a) of ERISA following an Adverse Benefit Determination on appeal.

If you are denied or you lose benefits, you may appeal within 60 days of receipt of the denial notice. (This is considered a first-level appeal.) In order to appeal the denial of benefits to which you believe you are entitled, you must file a written appeal with the Fund and include all information relevant to your claim. Relevant information may include comments, documents, records and other information. You will be provided, upon request and free of charge, reasonable access to and copies of all documents, records and other information relevant to your claim. When reviewing your appeal, all documents, records and other information you submitted will be taken into account, without regard to whether such information was submitted or considered in the initial decision.

If your appeal is denied, in whole or in part, you will be notified in writing within 60 days of the Fund’s receipt of your appeal of the reason(s) for the denial and the specific Plan provision(s) on which the decision was based. The notification will also include 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. If you disagree with the decision, you have the right to request an additional appeal by writing to the Board of Trustees

Appeals Committee (“Appeals Committee”) within 60 days of receipt of the appeal denial notice. (This is considered a second-level appeal.)

Appeals should be sent to:

1199SEIU Legal Assistance Fund
Attn: Appeals Department
498 Seventh Avenue, 9th Floor
New York, NY 10018

Second-level appeal determinations, made by the Appeals Committee, shall be final and binding on all parties, subject to your right to file a suit under ERISA only in a federal court in New York City. The decision shall be made at the Appeals Committee meeting following the Plan’s receipt of a request (not later than the next scheduled meeting after the month the request is received, unless special circumstances require an extension to the following meeting), and you will be notified in writing.

Determinations made through the appeals process outlined in this section are final, binding and conclusive on all parties, subject to your ERISA right to proceed in court. All claims against the Fund are subject to the appeal procedures outlined in this section. No lawsuits may be filed until you have completed all steps of these procedures and the benefits requested have been denied in whole or in part. All lawsuits must be filed in a federal court in New York City within two years of the date of the initial denial or loss of benefits.

SECTION IV – GENERAL INFORMATION

- A. Your ERISA Rights
- B. Anti-assignment of Rights and Benefits
- C. Not a Contract of Employment
- D. No Liability for Practice of Law
- E. Plan Amendment, Modification and Termination
- F. Overpayments
- G. Authority of the Plan Administrator
- H. Information on the Plan

SECTION IV. A

YOUR ERISA RIGHTS

As a participant in the Plan, you have certain rights and protections under the Employee Retirement Income Security Act of 1974 (“ERISA”), as amended.

GETTING INFORMATION

You have the right to do the following:

- Examine, without charge, at the Fund office and other specified locations, such as worksites and Union halls, all documents governing the Plan, including 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 Employee Benefits Security Administration’s Public Disclosure Room.
- Obtain, upon written request to the Plan Administrator, copies of documents governing the operation of the Plan, including copies of the latest annual report (Form 5500 Series) and the updated Summary Plan Description. The Plan Administrator may charge a reasonable fee for the copies.
- Receive a summary of the Plan’s annual financial report. The Plan Administrator is required by law to provide each participant with a copy.

FIDUCIARY RESPONSIBILITY

In addition to creating rights for Plan participants, ERISA imposes duties on the people responsible for operating the Plan, called Fiduciaries.

The Fiduciaries have a responsibility to operate the Plan prudently and in the interest of all participants and Eligible Dependents.

ENFORCING YOUR RIGHTS

No one, including your Employer and your Union, may fire you or discriminate against you in any way to prevent you from obtaining a benefit from this Fund or from otherwise exercising your rights under ERISA.

If your claim for benefits is denied or ignored, in whole or in part, you have a right to know why and receive related documents within certain time frames. Specifically:

- You must receive a written explanation of the reason for the denial and obtain copies of documents relating to the decision without charge; and

- You have the right to have the Fund review and reconsider your claim using the appeal procedure described in Section III.

Under ERISA, there are steps you can take to enforce your rights:

- If you request a copy of Plan documents or the latest annual report from the Plan (by writing to the Plan Administrator at PO Box 2661, New York, NY 10108-2661) and you do not receive them within 30 days, you may file suit under ERISA only in a federal court in New York City. If this happens, the court may require the Plan Administrator to provide the documents and, possibly, pay you up to \$110 a day until you receive the materials, unless the documents were not sent because of reasons beyond the Plan Administrator's control.
- If you have a claim for benefits that is denied or ignored, in whole or in part, you may file a suit under ERISA only in a federal court in New York City after you have completed the appeal procedures (see Section III).
- If the Plan's Fiduciaries misuse the Fund's money or if you are discriminated against for asserting your rights, you may file a suit under ERISA only in a federal court in New York City. As an alternative, you may get help from the U.S. Department of Labor.

The court will decide who should pay court costs and legal fees. If you are successful, the court may order the person (or entity) you sued to pay these costs and fees. If you lose (for example, if the court finds your claim is frivolous), the court may order you to pay these costs and fees.

For information regarding your federal civil rights, see Section IV.H.

You can only file a lawsuit disputing a denial on appeal:

- In a federal court in New York City;
- Within two years of the date of the initial denial or loss of benefits; and
- After the administrative claims and appeal process has been completed, in accordance with Section III.

QUESTIONS?

If you have questions about the Plan, call the Fund at (646) 473-6915.

If you have questions about this statement or your rights under ERISA, or if you need assistance in obtaining documents from the Plan Administrator, contact the nearest U.S. Department of Labor's Employee Benefits Security Administration office:

- Find the office online: www.DOL.gov/Agencies/EBSA/About-EBSA/About-Us/Regional-Offices
- Write to: Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, NW, Washington, DC 20210.

For help obtaining certain publications about your rights and responsibilities under ERISA, call the Employee Benefits Security Administration’s publication hotline at (866) 444-3272.

SECTION IV. B

ANTI-ASSIGNMENT OF RIGHTS AND BENEFITS

Your rights and benefits under the Plan are personal to you and may not be assigned, transferred, pledged, encumbered, alienated or otherwise disposed of, whether voluntarily or involuntarily, by operation of law or otherwise. Any attempted assignment, transfer, pledge, encumbrance, alienation or other disposition of your rights or benefits under the Plan shall be null, void and of no effect, and the Plan Administrator shall not be required to recognize or give effect to any such attempted assignment or transfer.

SECTION IV. C

NOT A CONTRACT OF EMPLOYMENT

This SPD does not guarantee employment or continued employment with your Contributing Employer or any Contributing Employer. It does not diminish in any way the right of Contributing Employers to terminate any employee.

SECTION IV. D

NO LIABILITY FOR PRACTICE OF LAW

The Plan, the Plan Administrator, the Contributing Employers, the Fund and the Trustees, and any of their designees, are not engaged in the practice of law. They do not have any control over any professional judgment, legal strategies or recommendations or work product provided or delivered to you by any Participating Law Firm or their lawyers. Neither the Plan, the Plan Administrator, the Contributing Employers, the Fund, the Trustees, nor any of their designees will have any liability whatsoever for any loss or injury caused to you by any Participating Law Firm or their lawyers by reason of negligence, malpractice, misconduct or otherwise.

SECTION IV. E

PLAN AMENDMENT, MODIFICATION AND TERMINATION

The Trustees reserve the right, within their sole and absolute discretion, to amend, modify or terminate, in whole or in part, any or all of the Plan at any time and for any reason by action of the Board of Trustees, including any of their duly authorized designees, in such manner as may be duly authorized by the Board.

Neither you, your Spouse, your Children, nor any other person has or will have a vested or non-forfeitable right to receive benefits under the Plan.

In the event that the Plan terminates, any remaining Plan assets will be applied in accordance with the Agreement and Declaration of Trust and applicable law.

SECTION IV. F

OVERPAYMENTS

If for any reason payment of benefits to an individual or a Participating Law Firm under the Plan exceeds the amount of benefits that should have been paid, or if benefits were paid in error, the Trustees are entitled to take any and all actions necessary and appropriate to recover the overpayment or payment made in error. This may include withholding of future payments or requiring the individual to repay the overpaid benefits or payment made in error.

SECTION IV. G

AUTHORITY OF THE PLAN ADMINISTRATOR

Notwithstanding any other provision in the Plan, and to the full extent permitted by ERISA and the Internal Revenue Code, the Plan Administrator shall have the exclusive right, power and authority, in its sole and absolute discretion, to:

- Administer, apply, construe and interpret the Plan and any related Plan documents;
- Decide all matters arising in connection with entitlement to benefits; the nature, type, form, amount and duration of benefits; and the operation or administration of the Plan; and
- Make all factual determinations required to administer, apply, construe and interpret the Plan and all related Plan documents.

Without limiting the generality of the statements in this section, the Plan Administrator shall have the ultimate discretionary authority to:

- i. Determine whether any individual is Eligible for Benefits under the Plan;
- ii. Determine the amount of Benefits, if any, an individual is entitled to under the Plan;
- iii. Interpret all the provisions of the Plan and all related Plan documents;
- iv. Interpret all the terms used in the Plan;
- v. Formulate, interpret and apply rules, regulations and policies necessary to administer the Plan in accordance with its terms;
- vi. Decide questions, including legal or factual questions, relating to the Eligibility for, or calculation and payment of, Benefits under the Plan;
- vii. Resolve and/or clarify any ambiguities, inconsistencies and omissions arising under the Plan or other related Plan documents;
- viii. Process and approve or deny benefit claims and appeals and rule on any benefit exclusions; and
- ix. Recover any benefits paid in error by offsetting future benefits to the extent permitted by law.

All determinations made by the Plan Administrator (including any duly authorized designee thereof) and/or the Board of Trustees Appeals Committee with respect to any matter arising under the Plan and any other Plan documents shall be final

and binding on all parties. In addition, the Plan Administrator may bring a court action to enforce the terms of the Plan or to recover benefit overpayments.

SECTION IV. H

INFORMATION ON THE PLAN

NAME OF THE PLAN

1199SEIU Legal Assistance Plan

TYPE OF PLAN

Taft–Hartley (Union–Employer) Jointly Trusteed Employee Welfare Benefit Fund (providing pre-paid group legal services)

PLAN SPONSOR NAME AND ADDRESS

1199SEIU Legal Assistance Fund Board of Trustees
c/o Executive Director
498 Seventh Avenue
New York, NY 10018

SOURCE OF INCOME

Contributions are made to the Fund by Contributing Employers, according to the collective bargaining agreements with 1199SEIU United Healthcare Workers East.

You may receive a complete list of Contributing Employers and unions sponsoring the Plan upon written request to the Plan Administrator, or you may examine such list at the Fund’s office. Upon written request, you may also receive from the Plan Administrator information as to whether a particular employer or union is a Plan sponsor, and if they are, the sponsor’s address.

ACCUMULATION OF ASSETS

The Fund’s assets are held in trust to pay benefits and expenses. Assets may also be invested by investment managers appointed by the Trustees to whom the Trustees have delegated this Fiduciary duty.

PLAN YEAR

The Plan’s and the Fund’s fiscal year is January 1 to December 31. Plan and Fund records are maintained on a Plan year basis.

PLAN ADMINISTRATOR

The Fund is self-administered and self-insured. The Plan Administrator consists of the Board of Trustees and its duly authorized designees and subordinates, including, but not limited to, the Executive Director, the Board of Trustees Appeals Committee and other senior employees. If you have any questions, please call the Fund's Member Services Department at (646) 473-9200.

The Trustees may be contacted at:

1199SEIU Legal Assistance Fund
c/o Executive Director
498 Seventh Avenue, 10th Floor
New York, NY 10018
(646) 473-9200

FOR SERVICE OF LEGAL PROCESS

Legal process may be served on the Board of Trustees, the Plan Administrator or the Fund's counsel.

The Trustees may be contacted at:

1199SEIU Legal Assistance Fund
c/o Executive Director
498 Seventh Avenue, 10th Floor
New York, NY 10018
(646) 473-9200

The Fund's counsel may be contacted at:

1199SEIU Legal Assistance Fund
General Counsel's Office
498 Seventh Avenue, 10th Floor
New York, NY 10018
(646) 473-9200

IDENTIFICATION NUMBER

Employer Identification Number: 43-2171539

ERISA Plan Number: 501

BOARD OF TRUSTEES

The Board of Trustees is made up of Union and Employer Trustees. Employer Trustees are elected by the Employers. Union Trustees are chosen by the Union. The Trustees of the Fund are:

UNION TRUSTEES	
Yvonne Armstrong President 1199SEIU United Healthcare Workers East 498 Seventh Avenue New York, NY 10018	Brian Morse Executive Vice President 1199SEIU United Healthcare Workers East 498 Seventh Avenue New York, NY 10018
Maurice Mintz Vice President 1199SEIU United Healthcare Workers East 498 Seventh Avenue New York, NY 10018	Nadine Williamson Senior Executive Vice President 1199SEIU United Healthcare Workers East 498 Seventh Avenue New York, NY 10018

NOTE: This list is current as of the date of this SPD and does not include Alternate Trustees.

EMPLOYER TRUSTEES	
Marc Z. Kramer President League of Voluntary Hospitals and Homes of New York 555 West 57th Street, Suite 1530 New York, NY 10019	Robert Oliver Consultant League of Voluntary Hospitals and Homes of New York 555 West 57th Street, Suite 1530 New York, NY 10019
Sean Moore Assistant Vice President League of Voluntary Hospitals and Homes of New York 555 West 57th Street, Suite 1530 New York, NY 10019	Neal Schelberg Consultant League of Voluntary Hospitals and Homes of New York 555 West 57th Street, Suite 1530 New York, NY 10019

NOTE: This list is current as of the date of this SPD and does not include Alternate Trustees.

SECTION V – DEFINITIONS

DEFINITIONS

Adverse Benefit Determination

A denial or partial denial of a claim for Benefits.

Benefits

The immigration-related legal representation, consultation, application preparation, filing assistance, fee reimbursement and related benefits provided under the Plan.

Children

Your Children who are under age 26 and meet at least one of the following conditions:

- They are your biological children
- They are your legally adopted children (coverage for legally adopted children starts from placement)
- You are their legal parent identified on their birth certificate

The Plan Administrator reserves the right, in its sole and absolute discretion, to determine all questions regarding your children's eligibility.

Collective Bargaining Agreement

Any collective bargaining agreement between 1199SEIU United Healthcare Workers East and a Contributing Employer, or a written agreement between the Fund and a Contributing Employer, that provides for

contributions to the Fund on terms acceptable to the Board.

Contributing Employer

Any member of the League and any other company, institution, agency or entity that is party to a Collective Bargaining Agreement or has a collective bargaining agreement with 1199SEIU United Healthcare Workers East or the Fund and for which a Collective Bargaining Agreement provides for contributions to be made to the Fund on its behalf under terms acceptable to the Board.

Covered Employment

Employment with a Contributing Employer for which the Fund receives contributions on your behalf pursuant to a Collective Bargaining Agreement or other agreement accepted by the Board of Trustees.

Dependent

Your Spouse or your Children who are eligible to receive benefits from the Fund, as described in Section I.A.

Eligible

The state of having met the criteria adopted by the Fund Trustees to determine your enrollment, plan of benefits and Wage or Eligibility Class.

Employer

See “Contributing Employer.”

Eligible Individual

Eligible Members, Spouses and Children.

ERISA

The Employee Retirement Income Security Act of 1974, as amended from time to time.

Executive Director

The person who has been duly authorized under the Agreement and Declaration of Trust to administer, apply and interpret the Plan on a day-to-day basis.

Fiduciary or Fiduciaries

A person or people responsible for exercising discretion with respect to the management or administration of the Plan and Plan assets.

Fund or Trust Fund

The 1199SEIU Legal Assistance Fund, whose principal office is at 498 Seventh Avenue in New York City, through which benefits are provided.

Member

An Eligible employee or former employee as described in Section I.A

Participating Law Firm

An attorney, law firm, legal services organization or other entity designated by the Fund to provide Benefits.

Plan

The 1199SEIU Legal Assistance Plan.

Plan Administrator

The Board of Trustees and any individuals, such as the Executive Director, duly designated by the Trustees to carry out administrative functions.

Spouse

The person to whom a Member is legally married. If you and your spouse are divorced or legally separated, your spouse cannot enroll in the Fund. Likewise, Fund coverage of a spouse ends upon legal separation or divorce. The Plan Administrator reserves the right, in its sole and absolute discretion, to determine all questions relating to the eligibility of a spouse.

Trustees

The Fund’s Board of Trustees acting pursuant to the Agreement and Declaration of Trust establishing the Fund, and any successor Trustees, duly designated in the manner set forth in the Agreement and Declaration of Trust.

Wage Class or Eligibility Class

One of the three wage-earning levels used by the NBF and GNY to determine Eligibility for benefits under those plans.

You or Your

Refers to an Eligible Member, as an individual, and/or to the their Dependents, individually or together, depending on the context in which it is used.

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1199SEIU LEGAL ASSISTANCE FUND

(646) 473-9200

Outside New York City: (800) 575-7771

www.1199SEIUBenefits.org

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OCTOBER 2026 • 1023

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