

**THE OPEN MEP NATIVE AMERICAN COMMUNITY CLINIC
PLAN HIGHLIGHTS**

IMPORTANT: *This is a summary of the plan features. For full details, please refer to the Summary Plan Description.*

Eligibility	
Excluded Employees:	<p>You are excluded from the Plan if you are a member of any of the following classes of employees:</p> <ul style="list-style-type: none"> • Employees covered by a collective bargaining agreement, for purposes of Elective Deferral Contributions, Employer Matching Contributions and Non-Elective Contributions. • Any leased employee, for purposes of Elective Deferral Contributions, Employer Matching Contributions and Non-Elective Contributions. • Non-resident aliens, for purposes of Elective Deferral Contributions, Employer Matching Contributions and Non-Elective Contributions.
Elective Deferral Contributions, Employer Matching Contributions and Non-Elective Contributions:	<p>You must meet the following criteria to become eligible to participate in the Plan:</p> <ul style="list-style-type: none"> • Attain age 21 • Complete 1 month(s) of service.
Elective Deferral Contributions, Employer Matching Contributions and Non-Elective Contributions:	<p>You will enter the Plan on the first day of the calendar month coincident with or next following the time you meet the eligibility criteria specified above.</p>
Special Enrollment Date:	<p>If you were employed as an Eligible Employee with the Employer on 01/01/2018, effective 01/10/2018 you will be immediately eligible to participate in the Plan.</p>
Contributions	
Elective Deferral:	<p>You may elect to defer up to 100% of your Plan Compensation on a pre-tax basis. You may also elect to make Roth contributions to the Plan on an after-tax basis. You may elect to change your elections to contribute to the Plan as of each pay period. Federal law also limits the amount you may elect to defer under the Plan (\$20,500 in 2022). However, if you are age 50 or over, you may defer an additional amount up to \$6,500 (in 2022). These dollar limits are indexed; therefore, they may increase each year for cost-of-living adjustments.</p>
Employer Matching Contributions:	<p>The Employer may, in its sole discretion, make an Employer Matching Contribution on your behalf in an amount determined by the Employer. You must complete at least 1,000 hours of service during the Applicable Period or be employed by the Employer on the last day of the Applicable Period in order to receive an Employer Matching Contribution. For purposes of this section, the Applicable Period for determining satisfaction of service requirements for an allocation of Employer Matching Contributions will be each Plan Year.</p>
Non-Elective Contributions:	<p>The Employer may, in its sole discretion, make a Non-Elective Contribution on your behalf in an amount determined by the Employer. Such contribution, if made, will be allocated to the Non-Elective Contribution Account of each Participant eligible in pro rata shares. For purposes of this section, the Applicable Period for determining satisfaction of service requirements for an allocation of Non-Elective Contributions will be each Plan Year. You must complete at least 1,000 hours of service during the Plan Year or be employed by the Company on the last day of the Plan Year in order to receive a Non-Elective Contribution.</p>

Rollovers:	The Plan may accept a Rollover Contribution made on behalf of any Employee not excluded from the Plan, regardless of whether such Employee has met the age and service requirements of the Plan.
Vesting	
Fully Vested Accounts:	You will have a fully vested and nonforfeitable interest in your Elective Deferral Account, Rollover Contribution Account and Qualified Non-Elective Contribution Account.
Employer Matching Contribution Account and Non-Elective Contribution Account:	Your interest in your Employer Matching Contribution Account and Non-Elective Contribution Account will vest based on your Years of Vesting Service according to a 2-6 year graded vesting schedule (20% per year starting with two years of vesting service).
Investing Plan Contributions	
Investments:	You may direct the investment of all of your Accounts in one or more of the available Investment Funds. Your elections will be subject to such rules and limitations as the Plan Administrator may prescribe. The Plan Administrator may restrict investment transfers to the extent required to comply with applicable law. The Plan is intended to constitute a plan described in section 404(c) of ERISA. This means that Plan fiduciaries may be relieved of liability for any of your losses that are the result of your investment elections.
Distributions and Loans	
Distributions from the plan:	You may receive a distribution from your account under the following circumstances: <ul style="list-style-type: none"> • Immediately after your employment terminates • Normal Retirement Age (even if you are still working) • Hardship • After age 59-1/2 • From the Rollover Contribution Account at any time • Death
Loans:	The minimum loan amount is \$1,000 and the maximum number of loans outstanding is 1. Please see your Loan Procedures for additional details on taking a loan from the Plan.
Contact Information	
Plan Administrator: Native American Community Clinic Plan Sponsor Contact Information: Address: 1213 E Franklin Ave, Minneapolis, MN 55404 Phone number: 612-872-8086 Employer Identification Number: 03-0445789 Plan Administrator Contact Information: Address: Fiduciary Wise LLC 2487 S. Gilbert Road Suite 106-455 , Gilbert, AZ 85295 Phone number: 480-855-4017	
<i>Note: These plan highlights are intended to be a very concise overview of plan features. For a detailed description of plan features, please review the Summary Plan Description or contact the Plan Administrator for more information. The plan features described in these plan highlights are subject to change and in the event of a discrepancy between the legal plan document and these highlights (or any other summary of plan features), the plan document shall control.</i>	