

MOTION PICTURE INDUSTRY PENSION AND HEALTH PLANS
RESOLUTION REGARDING

AWAY PLAN CONTRIBUTIONS

WHEREAS, the Directors desire to formally acknowledge the occasional practice by which Employers and Unions have historically entered into side agreements that provide for contributions that would normally be due the Motion Picture Industry Pension and Health Plans (the “MPI Plans”) to be remitted instead to the employee’s “away” pension and health plans (the “Away Plans”); and

WHEREAS, in the best interests of the MPI Plans and its Participants, the Directors desire to establish certain approval criteria with regard to such Away Plans;

NOW, THEREFORE, effective June 25, 2003, it is resolved as follows:

1. Side letters that provide that contributions that would normally be due the MPI Plans will instead be made to the employee’s Home Plans will be considered for approval by the Legal Committee pursuant to the following guidelines:
 - a. The Away Plans must be IATSE or Basic Crafts plans in which the employee participates or desires to participate.
 - b. The side letter will apply only to employee(s) in such circumstances and not to an entire crew, or significant portion thereof.
 - c. The side letter must specify the name of the production on which the employee(s) is employed and for which contributions will be remitted to the Away Plans.
 - d. The side letter must provide that aggregate contributions to the Away Plans will not be less than the aggregate contributions that would have been paid to the MPI Plans.
 - e. The side letter must establish that the provisions contained therein are limited to hourly and compensation-based contributions only and that all other terms and conditions of the governing collective bargaining agreement remain unchanged, including the Post ’60 and Supplemental Markets provisions.
 - f. The side letter must relate to all three MPI Plans.
 - g. The side letter, in a form attached hereto as Exhibit I, must be executed by the Plan-affiliated Local (the “MPI Local”), the “away” plan Local (the “Away Local”), the IATSE International (if applicable), the Away Plans, the Employer, the employee, and MPIPHP.
 - h. Side letters that are not materially different from those first presented to the Jt. Legal Committee on August 14, 2002 and which pre-date the effective date of this Resolution are not subject to this Resolution and are grandfathered absent unusual circumstances.
2. In addition to the foregoing, Employee(s) covered by such side letter must meet the following conditions:
 - a. The employee must be employed in a classification covered by the IATSE Basic Agreement or by a Basic Crafts Agreement, as applicable.

- b. At the time the properly executed side letter is received by the Plan, the employee must have less than 10 Qualified Years in the Retiree Health Fund.
 - c. At the time the properly-executed side letter is received by the Plan, the employee must not:
 - i. effective July 1, 2006, be currently eligible in the Active Health Plan, nor
 - ii. effective July 1, 2006, have been eligible for Active Health benefits in the preceding 24 months, nor
 - iii. have qualified for future eligibility in the Active Health Plan.
 - d. The employee must execute a written statement waiving his/her rights to benefits and participation in the MPI Plans with respect to the applicable employment.
3. The “star-request” waiver policy as defined in the April 17, 1995 AMPTP letter to Local 706 is not affected by this Resolution and remains as its own separate standard.

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EXHIBIT I

EMPLOYEE SIDE LETTER REGARDING AWAY PLAN PARTICIPATION AND CONTRIBUTION ELECTION FORM

The parties below acknowledge and agree that, in accordance with the terms and conditions of the Resolution Regarding Away Plan Contributions (the "Resolution"), attached and incorporated by reference herein, the undersigned Employee will participate in the Employee's Away Plans, and will not participate in the Motion Picture Industry Health Plan (both the Active Fund and the Retiree Fund), Motion Picture Industry Pension Plan, or Motion Picture Industry Individual Account Plan (collectively, MPIPHP) with respect to the undersigned Employer's employment of Employee ("Applicable Employment") on the production titled "_____."

Name of Production

Production City, State

The parties agree that the Employer will contribute to the Employee's Away Plans with respect to the Applicable Employment, and will not be required to make hourly or compensation-based contributions to MPIPHP. The parties represent that the aggregate contributions to the Away Plans shall be not less than the aggregate contributions that would have been made to the MPIPHP for Employee.

The parties acknowledge that the provisions of this Standard Side Letter are limited to hourly and compensation-based contributions only and that all other terms and conditions of the governing collective bargaining agreement remain unchanged, including the Post '60 and Supplemental Markets provisions, if any.

The parties understand that this document must be submitted to the MPIPHP for approval.

EMPLOYEE WAIVER: **EMPLOYEE MUST INITIAL HERE:** _____ Employee agrees he or she is voluntarily and irrevocably waiving his or her right to participate in the MPIPHP for all Applicable Employment. **Employee understands that Employee will earn no benefits, contributions, eligibility, credited hours or any other credits (including without limitation retiree health credits) under MPIPHP for the Applicable Employment.** Employee further acknowledges that Employee has had an opportunity to review the various summary plan descriptions of MPIPHP. Employee agrees that **Employee shall be liable for attorney's fees if Employee brings any action to claim benefits, contributions, eligibility, credited hours or any credits under MPIPHP with respect to Applicable Employment.**

PRODUCTION TITLE: _____

Employer Name: _____	Employee Name: _____ (please print)
By: (please print) _____	SSN: _____
Signature: _____	Signature: _____
Title: _____	Address: _____
Address: _____	_____
Email Address: _____	Email Address: _____
Phone: _____	Phone: _____
Date: _____	Date: _____

Away Plan:	_____	Away Plan Local:	_____
By: (please print)	_____	By: (please print)	_____
Title:	_____	Title:	_____
Signature:	_____	Signature:	_____
Address:	_____	Address:	_____
	_____		_____
Email Address:	_____	Email Address:	_____
Phone:	_____	Phone:	_____
Date:	_____	Date:	_____

MPI Plan:	Motion Picture Industry Pension and Health Plans	MPI Local:	_____
By: (please print)	Shanda Zuniga	By: (please print)	_____
Signature:	_____	Signature:	_____
Title:	Employer Contracts, Manager		_____
Address:	11365 Ventura Blvd.	Address:	_____
	Studio City CA 91604-3148		_____
Email Address:	szuniga@mpiphp.org	Email Address:	_____
Contact Phone:	Julio Cadet (818) 769-0007 x 278	Phone:	_____
Date:	_____	Date:	_____

IATSE: _____

By: (please print) _____

Signature: _____

Title: _____

Address: _____

Email Address: _____

Contact Phone: _____

Date: _____

Production Title: _____