Los Angeles Hotel-Restaurant Employer-Union Retirement Fund

Administered By: Benefit Programs Administration

Telephone • (800) 252-9117 • (562) 463-5020 • Facsimile (562) 463-5894

www.lahotelretirementfund.org

December 2014

NOTICE TO INTERESTED PARTIES

1. <u>Notice To</u>: All present employees covered by a Collective Bargaining Agreement pursuant to which the Pension Plan is maintained, employees of UNITE HERE Union Local 11, and employees of the Los Angeles Hotel-Restaurant Employer-Union Hospitality Education and Training Fund.

An application is to be made to the Internal Revenue Service for an advance determination on the qualification of the following employee pension benefit plan:

- 2. Name of Plan: Los Angeles Hotel-Restaurant Employer-Union Retirement Fund
- 3. Plan Number: 001
- 4. Name and Address of Applicant:

Board of Trustees Los Angeles Hotel-Restaurant Employer-Union Retirement Fund 13191 Crossroads Pkwy North, Suite 205 City of Industry, CA 91746-3434

- 5. Applicant EIN: 95-6098404
- 6. Name and Address of Plan Administrator:

Board of Trustees Los Angeles Hotel-Restaurant Employer-Union Retirement Fund 13191 Crossroads Pkwy North, Suite 205 City of Industry, CA 91746-3434

7. The application will be filed on January 12, 2015 for an advance determination as to whether the plan meets the qualification requirements of § 401 or § 403(a) of the Internal Revenue Code of 1986, with respect to the Plan's amendment. The application will be filed with:

Internal Revenue Service EP Determinations P.O. Box 12192 Covington, KY 41012-0192

- 8. The employees eligible to participate under the plan are: All Employees working under a Collective Bargaining Agreement which expressly provides for participation in the Plan and employees of UNITE HERE Union Local 11.
- 9. The Internal Revenue Service has previously issued a determination letter with respect to the qualification of this plan.

RIGHTS OF INTERESTED PARTIES

10. You have the right to submit to EP Determinations, at the above address, either individually or jointly with other interested parties, your comments as to whether this plan meets the qualification requirements of the Internal Revenue Code. Your comments to EP Determinations may be submitted to:





Internal Revenue Service EP Determinations Attn: Customer Service Manager P.O. Box 2508 Cincinnati, OH 45202

You may instead, individually or jointly with other interested parties, request the Department of Labor to submit, on your behalf, comments to EP Determinations regarding qualification of the plan. If the Department declines to comment on all or some of the matters you raise, you may, individually, or jointly if your request was made to the Department jointly, submit your comments on these matters directly to EP Determinations at the Cincinnati address above.

REQUESTS FOR COMMENTS BY THE DEPARTMENT OF LABOR

- 11. The Department of Labor may not comment on behalf of interested parties unless requested to do so by the lesser of 10 employees or 10 percent of the employees who qualify as interested parties. The number of persons needed for the Department to comment with respect to this plan is 10. If you request the Department to comment, your request must be in writing and must specify the matters upon which comments are requested, and must also include:
 - (1) the information contained in items 2 through 5 of this Notice; and
 - (2) the number of persons needed for the Department to comment.

A request to the Department to comment should be addressed as follows:

Deputy Assistant Secretary
Employee Benefits Security Administration
U.S. Department of Labor,
200 Constitution Avenue, N.W.
Washington, D.C. 20210
Attention: 3001 Comment Request

COMMENTS TO THE INTERNAL REVENUE SERVICE

12. Comments submitted by you to EP Determinations must be in writing and received by it by February 26, 2015. However, if there are matters that you request the Department of Labor to comment upon on your behalf, and the Department declines, you may submit comments on these matters to EP Determinations to be received by it within 15 days from the time the Department notifies you that it will not comment on a particular matter, or by February 26, 2015, whichever is later, but not after March 13, 2015. A request to the Department to comment on your behalf must be received by it by January 27, 2015 if you wish to preserve your right to comment on a matter upon which the Department declines to comment, or by February 6, 2015 if you wish to waive that right.

ADDITIONAL INFORMATION

13. Detailed instructions regarding the requirements for notification of interested parties may be found in sections 17 and 18 of Rev. Proc. 2014–6. Additional information concerning this application (including, where applicable, an updated copy of the plan and related trust; the application for determination; any additional documents dealing with the application that have been submitted to the Service; and copies of section 17 of Rev. Proc. 2014–6 are available at:

Benefit Programs Administration 13191 Crossroads Pkwy North, Suite 205 City of Industry, CA 91746-3434 (800) 252-9117

during the hours of 8:30am to 4:30pm Monday thru Friday for inspection and copying. (There is a nominal charge for copying and/or mailing.)

