IAM NATIONAL PENSION FUND

MODEL LANGUAGE FOR ADOPTING REHABILITATION PLAN PREFERRED SCHEDULE

SUPPLEMENTAL AGREEMENT BETWEEN
[ ]
AND
[ ]

This Supplemental Agreement between _____ ("Union") and _____ ("Employer") supplements the parties' collective bargaining agreement (the "CBA") dated from _____ through _____.

Effective _____, 20__ **[Date the Preferred Schedule is adopted by the bargaining parties] ("Adoption Date")**, Employer will contribute to the Fund under the schedule of additional contribution rates required under the Preferred Schedule of the Rehabilitation Plan adopted by the Board of Trustees of the Fund on April 17, 2019 (the "2019 Rehabilitation Plan"), which is incorporated by reference into this Supplemental Agreement.

The Employer's current contribution obligations under the CBA are:

YEAR	**CONTRACTUAL CONTRIBUTION RATE**
Year Supplemental Agreement is adopted: Year 1: _____	$____ per _____
Year 2: _____	$____ per _____
Year 3: _____	$____ per _____
Year 4: _____	$____ per _____
Year 5: _____	$____ per _____

- Effective on the Adoption Date, and on each Adoption Date anniversary, the Employer's contribution rate otherwise obligated under the CBA will increase by a compounding 2.5% while the Rehabilitation Plan remains in effect.
- Additional Employer contributions will be rounded to the nearest cent as follows: When rounding, one ½ cent and greater will be rounded up, less than one ½ cent will be rounded down.

All remaining provisions of the CBA remain in effect to the extent they are consistent with the 2019 Rehabilitation Plan.

AGREED TO this _____ day of _____, 20__, by and between:

_____ _____

Union Employer