

## TAX INFORMATION

TO: PARTICIPANTS OF THE MID-AMERICA CARPENTERS REGIONAL COUNCIL HEALTH FUND ("Fund")

FROM: MID-AMERICA CARPENTERS REGIONAL COUNCIL BENEFIT FUNDS

DATE: JANUARY 2026

RE: **IMPORTANT HEALTH COVERAGE TAX DOCUMENTS**

---

Since 2015, the Fund issued you an annual IRS Form 1095-B. You previously needed this form for personal income tax returns because it summarizes the months of health plan coverage you and your eligible dependents had under the Fund for the previous calendar year. Beginning with the 2019 tax year, federal law reduced the individual shared responsibility payment ("tax penalty") to \$0 even if there were months in which you failed to maintain health plan coverage. Because you no longer need Form 1095-B to complete and file your personal income tax return, you will no longer automatically receive a Form 1095-B from the Fund.

For 2025, you will receive two (2) 1095-B statements: one statement for January – March 2025 for coverage under the St. Louis-Kansas City Carpenters Regional Health Fund, and one statement for April – December 2025 for coverage under the Mid-America Carpenters Regional Council Health Fund.

Your electronic 1095-B statements may be found under "Documents" in your member portal. To access your member portal account, visit [laborfunds.org/member-portal](http://laborfunds.org/member-portal) and the site prompts to either log in or set up your account if accessing for the first time.

In addition, the Fund will still send you a paper copy of your Form 1095-B upon request. You may request a Form 1095-B by the following means:

1. Request Via Telephone: You may call 877.232.3863, option 1, to make your request. Please be prepared to confirm your name, mailing address, date of birth, or other personal details to confirm your identity.
2. Request Via Email: You may email a request to [health@macbenefits.org](mailto:health@macbenefits.org). Please include your name, mailing address, and date of birth to confirm your identity. Please state whether you want your Form 1095-B mailed or emailed and provide clear instructions for sending.
3. Request Via Mail: You may mail a request to the Fund Office at the following address. Please include your name, mailing address, and date of birth to confirm your identity. Please state whether you want your Form 1095-B mailed or emailed and provide clear instructions for sending.

Mid-America Carpenters Benefits  
c/o Participant Services  
1419 Hampton Avenue  
St. Louis, MO 63139

If you have any questions, please call the Fund Office at 314.644.4802 or toll-free at 877.232.3863.