Part I. Plan Information

Plan name	
Plan Actuary	Timothy L. Connor
Role of filer	Name of filer
150 Clove Rd, 10th Floor	timothy.connor@milliman.com
Street address of filer	Email address of filer
Little Falls, NJ, 07424	973-569-5609
City, State, ZIP Code of filer	Telephone number of filer
1 3 3 6 9 8 6 5 0 0 1 EIN PN]
DC 37 Local 389 Home Care Employees Pension Fund	
Plan sponsor name	
420 West 45th Street, 5th Floor	abrowne@l389hw.org
Street address of plan sponsor	Email address of plan sponsor
New York, NY, 10036-3501	212-925-6033
City, State, ZIP Code of plan sponsor	Telephone number of plan sponsor
Jahmila K. Edwards Plan sponsor's authorized representative's name (if any; if none, then leave these spaces blank)	
420 West 45th Street, 5th Floor	JEdwards@DC37.NET
Street address of authorized representative	Email address of authorized representative

Part II. Eligibility

The plan is eligible* for SFA because it meets the criteria for eligibility under (check all that apply):

X	§ 4262.3(a)(1) of PBGC's SFA regulation
	§ 4262.3(a)(2) of PBGC's SFA regulation
	§ 4262.3(a)(3) of PBGC's SFA regulation**
	§ 4262.3(a)(4) of PBGC's SFA regulation

^{*} PBGC will not verify a plan's assessment of its eligibility for SFA until it receives the plan's revised application. If PBGC determines that the plan was not eligible on the date when the lock-in application was filed, then the lock-in application will not establish the plan's base data.

Part III. Priority Group

This section is required only for a lock-in application filed on or before March 11, 2023. If filing after that date, then leave this section blank and skip to Part IV.

Priority Group 5. Is the plan projected to become insolvent before March 11, 2026?

Yes ____ No

If yes, then, except as provided below, the filer must provide a certification from the

If yes, then, except as provided below, the filer must provide a certification from the plan's enrolled actuary that the plan is eligible for Priority Group 5. This certification should specifically identify Priority Group 5 and contain sufficient information to demonstrate that the plan is eligible for Priority Group 5, including details of relevant plan projections and clear documentation of all assumptions, methods, and census data used in such projections.

Priority Group 6. Is the plan listed on www.pbgc.gov/arp-sfa as having a present value of financial assistance in excess of \$1 billion?

Yes No

If yes, skip to Part IV. Also, if yes and the plan is also in Priority Group 5, then the filer does not need to provide the supporting documentation described above.

If applicable, PBGC will post additional priority groups eligible to submit lock-in applications, the date PBGC will begin accepting applications for plans in additional priority groups, and any required information for a plan to demonstrate its priority group status on PBGC's website at www.pbgc.gov. Also, PBGC may require a plan sponsor to file additional information, including information to clarify or verify the plan's priority group status.

Part IV. Certification

This part must be signed and dated by an authorized trustee who is a current member of the board of trustees.

^{**}For information on how to determine eligibility under this provision, see Section D, Item (3)c of the general instructions.

LOCK-IN APPLICATION

Under penalty of perjury under the laws of the Uni	ted States of America, I declare that I am an			
authorized trustee who is a current member of the	board of trustees of the: (insert plan name)			
District Council 37 Local 389 Home Care and Profess	ional Employees Pension Fund			
and that I have examined this application, and, to t	he best of my knowledge and belief, the			
application contains all the relevant facts relating t				
contained in the application are true, correct, and n	ot misleading because of omission of any			
material fact faul	3/31/23			
Signed	Date			
MARK PARAVOA	Trustee			
Printed name of signatory	Title			
Part V. Statement of Intent				
The part must be signed and dated by: (1) a trustee who is a current member of the board of trustees and authorized to sign on behalf of the board of trustees, or (2) another authorized representative of the plan sponsor. Part IV and Part V may but need not be signed by the same individual.				
By submitting this lock-in application, I am submi	tting an initial application for SFA for: (insert			
plan name)District Council 37 Local 389 Home Care				
with the intent to lock in the plan's base data.				
Mal faul	3/31/23			
Signed	Date / /			
MARK PARAUDA	Trustee			
Printed name of signatory	Title			

PAPERWORK REDUCTION ACT NOTICE

This section provides information on the time and cost estimates for preparing and filing the lock-in application. If you have any comments concerning the accuracy of these estimates or suggestions for making it simpler to submit the information, please send your comments to the Pension Benefit Guaranty Corporation, Office of the General Counsel, 445 12th Street, SW, Washington, DC 20024-2101.

Information filed with PBGC in an application for special financial assistance (SFA) is confidential only to the extent provided under the Privacy Act. PBGC may, in its sole discretion, post an application for SFA and any documents and information filed for the application on its website at www.pbgc.gov, or otherwise publicly disclose the application, documents, and information, except information that is confidential under the Privacy Act.

PBGC will share with the U.S. Department of Labor and the Treasury Department (collectively, the Agencies) a plan's application, including any documents and information filed with PBGC, to enable the Agencies to fulfill their responsibilities under section 4262 of ERISA.

LOCK-IN APPLICATION

This information collection is necessary for PBGC to properly administer the SFA program. PBGC uses the information it receives in a plan's lock-in application to record the filing date for the plan's initial application for SFA.

PBGC estimates an average per plan hour burden of 1 hour of fund office time and an average cost burden of \$800 in contractor costs. These are estimates and the actual time and cost per plan will vary depending on the circumstances of a given filing and the size of the plan.

This collection of information has been approved by the Office of Management and Budget (OMB) under control number 1212-0074 (expires 07/31/2023). Under the Paperwork Reduction Act, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.