

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan
Application for Special Financial Assistance
EIN 23-1996365 /PN 001
Checklist Item #23.a – Section D, Item 1

December 3, 2024

Submitted electronically via PBGC's e-Filing Portal

Pension Benefit Guaranty Corporation
445 12th Street SW
Washington, DC 20024-2101

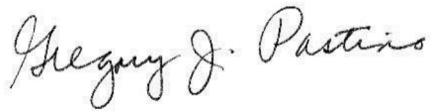
RE: Application for Financial Assistance

To Whom It May Concern:

On behalf of the Board of Trustees of the PA Local 47 Bricklayers and Allied Craftsmen Pension Plan, we respectfully submit this application for Special Financial Assistance in the amount of \$8,334,265. This has been determined under the basic method specified in 29 C.F.R. §4262.4(a)(1).

Please do not hesitate to contact us if you have any questions regarding this application.

Sincerely,



Gregory J. Pastino, ASA, EA, MAAA
239-600-6409
greg.pastino@foster-foster.com

Enclosure

CC: Ginger B. LaChapelle, Esquire

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan
Application for Special Financial Assistance
EIN 23-1996365 /PN 001

Trustee Signature Page

The Board of Trustees of the PA local 47 13ricklayers and Allied Craftsmen Pension Plan submits to the Pension Benefit Guaranty Corporation this application and the accompanying exhibits for special financial assistance pursuant to Section 4262 of the Employee Retirement Income Security Act ("ERISA") and the Interim Final Rule at 29 C.F.R. Part 4262.

Laine Gores
Name
Laine Gores
Signature
10/28/2024
Date

George D. Hardy
Name
[Signature]
Signature
10/28/2024
Date

Plan Sponsor and Authorized Representatives

The following Identifies the plan sponsor and authorized representatives, as well as their contact information. The Plan's Administrator, legal counsel, and actuary named below are authorized representatives for the Plan.

Plan Sponsor	International Union of Bricklayers Local 47 Pension Fund P.O Box 1769 Salem, VA 24153 Phone: 540-345-7735
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Administrative Manager	Karen Musgrove Lawrence C. Musgrove Associates, Inc. P.O Box 1769 Salem, VA 24153 Phone: 540-345-7735 Email: kmusgrove@musgroveassoc.com
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Legal Counsel	Ginger B. LaChapelle, Esquire O'Donoghue & O'Donoghue 5301 Wisconsin Avenue, N.W. Washington, DC 20015 Phone: 202-362-0041 Email: glachapelle@odonoghuelaw.com
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Actuary	Gregory J. Pastino, ASA, EA, MAAA Foster & Foster Roma Corporate Center 1605 North Cedar Crest Blvd, Suite 510 Allentown, PA 18104 Phone: 239-600-6409 Email: greg.pastino@foster-foster.com
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Section D, Item (3) – Eligibility

The Plan is eligible for SFA under 29 CFR § 4262.3(a)(1) as it was certified to be in Critical and Declining status as of May 1, 2020.

Section D, Item (5)-Narrative Description of Future Contributions and Withdrawal Liability Collections

In accordance with 29 CFR § 4262.8(a)(9), following is a detailed narrative of the factors specific to the Plan's current circumstances as well as a description of the development of the assumed future contributions and assumed future withdrawal liability payments used to calculate the SFA amount.

Assumed Future Contributions

The projection of future employer contributions is based on the Assumed Future CBUs multiplied by Contribution Rates.

The hourly contribution rate of \$7.85 used for the baseline projection is effective May 1, 2021 based on the Collective Bargaining Agreement effective May 1, 2017. For the baseline projection, CBUs are assumed to remain level as per the assumption in the May 1, 2020 zone certification, i.e., 1,300 hours per active employee multiplied by the active participant count of 110 as of the SFA measurement date of December 31, 2022, or 143,000.

For the final determination, CBUs are assumed to be 134,009 for the plan year ending April 30, 2023, (prorated by 1/3 for the short plan year 1/1/2023-4/30/2023), declining 3% per year through April 30, 2029 and declining 1% per year thereafter. This represents actual CBUs for the 2018-2019 plan year of 151,373, reduced by 3% per year. We used the actual employer contributions and actual CBUs to develop the weighted average contribution rate as discussed in a pre-submission conference call with the PBGC on 11/18/2024. The calculated weighted average contribution rate is \$8.70 for the plan year ending 4/30/2022, which is the rate used to project contributions in the final determination. The contribution rate of \$8.70 is higher than the negotiated rate of \$7.85 effective 5/1/2021 since actual contributions and actual CBUs are adjusted for reciprocity, and some contribution rates outside the jurisdiction of the local are higher than the \$7.85 rate. Following the pre-submission conference call and subsequent email to PBGC, the PBGC found this approach in the development of the initial CBU level and hourly contribution rate to be reasonable in an email dated 11/20/2024. Additional detail is provided in Section D, Item (6)(b) – Description of Assumption Changes and the document attached to the end of this Section D Narrative titled "Narrative in Support of Treatment of Reciprocal Contributions, CBU Decline and Future Contributions".

Assumed Future Withdrawal Liability Payments

The Plan has never assessed a withdrawal liability and we assume no future withdrawal liability payments.

Section D, Item (6)(b) – Description of Assumption Changes

Administrative Expenses

Baseline Assumption: For projection purposes, prior year’s administrative expenses are assumed to increase 2% annually.

Reason the Baseline Assumption is not reasonable: The administrative expense increase assumption from the 2020 zone certification of 2% did not accurately reflect PBGC premium increases and other adjustments to expenses.

Updated SFA Assumption: \$33,404 for the balance 2022-2023 plan year (equal to ½ of the administrative expenses paid for the first 8 months of the plan year of \$105,627, less the PBGC premium for 2022-2023 of \$9,632 that was paid prior to 12/31/2022 and investment expenses of \$29,186). The annualized non-PBGC related administrative expense is increased by a rounded percentage of 3% per year throughout the projection period ending 4/30/2051. The PBGC flat-rate premium rate will increase to \$35 for the 2023-2024 plan year and 3% per year thereafter, with the total PBGC premium determined reflecting the change in the number of plan participants each year. The amount of PBGC premium for the plan year beginning May 1, 2031 is adjusted to reflect the increase in the PBGC flat-rate premium to \$52, with 3% annual increases reflected thereafter. Overall administrative expenses are capped at 15% of benefit payments in any given year except for the plan years ended 4/30/2023 through 4/30/2025, during which the additional expenses for preparing the SFA application were recognized and not expected to continue beyond 4/30/2025.

The baseline assumption will reflect the known PBGC premium rate increases to \$35 effective May 1, 2023 and \$52 effective July 1, 2031 without additional increases.

Additional one-time expenses reflected in the baseline and updated assumptions for the cost of preparing the SFA application are summarized below. Invoices supporting expenses incurred prior to the date of this application are attached to the end of this document. An estimated expense of \$25,000 is included for the plan year ended 4/30/2025 based on past experience with revising and refiling SFA applications and responding to clarifying questions.

Plan Year Ended 4/30	SFA Application Expense	Actual/Estimated
2023	6,900	Actual (Rounded)
2024	39,600	Actual (Rounded)
2025	78,600	Actual Through 9/2024 (Rounded), Estimated Thereafter

Reasonableness of Changed Assumption: The updated assumption reflects the 10-year geometric average of the increases in administrative expenses other than PBGC premiums from 2012 through 2021 as shown below. Also, we recognize the additional expense involved in the preparation of this application and known increases to PBGC premium rates.

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan
Application for Special Financial Assistance
EIN 23-1996365 /PN 001

Plan Year Beginning 5/1	Total Administrative Expenses	PBGC Premium	Net Expenses	Percent Change
2011	75,514	2,214	73,300	
2012	103,406	2,223	101,183	38.04%
2013	81,193	3,084	78,109	-22.80%
2014	81,164	3,036	78,128	0.02%
2015	76,775	7,176	69,599	-10.92%
2016	86,215	7,506	78,709	13.09%
2017	107,249	7,997	99,252	26.10%
2018	135,232	7,952	127,280	28.24%
2019	102,399	8,497	93,902	-26.22%
2020	125,487	8,610	116,877	24.47%
2021	108,740	9,238	99,502	-14.87%
Average				3.00%

For the assumed increases in PBGC premium rates, we looked at the 10-year geometric average of the increases in the National Average Wage Index that is used to determine PBGC premium rate increases. The final result is rounded down to 3%.

Year	National Average Wage	Change
2011	42,979.61	
2012	44,321.67	1.0312
2013	44,888.16	1.0128
2014	46,481.52	1.0355
2015	48,098.63	1.0348
2016	48,642.15	1.0113
2017	50,321.89	1.0345
2018	52,145.80	1.0362
2019	54,099.99	1.0375
2020	55,628.60	1.0283
2021	60,575.07	1.0889
Average Change (rounded down to 3%)		3.00%

According to the intermediate assumptions presented in *The 2023 Annual Report of the Board of Trustees of the Federal Old-Age and Survivors Insurance and Federal Disability Insurance Trust Funds* for estimated increases in the Cost of Living and National Average Wage (NAW) indices for the years 2022 through 2032, the annual increase in the NAW Index ranges from 3.7% to 4.8%, and is at least 4.0% in 9 of the 11 years presented. The NAW Index is used to determine the increase in the PBGC's flat rate premium each year. Our 10-year geometric average of past NAW indices was 3.49%, which we rounded down to 3% to be conservative. The projected increases in the NAW Index in this annual report exceed our 3% annual assumption. The report and supporting information may be found at <https://www.ssa.gov/oact/TR/TRassum.html>.

Change in Contribution Base Units (CBU)

Baseline Assumption: 1,300 CBUs (hours) per active employee. This is assumed to include all net reciprocal contributions.

Reason the Baseline Assumption is not reasonable: An analysis of the CBU decline showed a much greater annual rate of decline than previously assumed. Also, the CBU assumption from the 2020 PPA zone certification did not extend beyond the projected year of insolvency, and such assumption must be extended through the end of the SFA projection period, or April 30, 2051.

Updated SFA Assumption: 134,009 CBUs for the plan year ending April 30, 2023, declining 3% per year through April 30, 2029 and declining 1% per year thereafter. 134,009 represents the 2018-2019 CBUs of 151,373 reduced by 3% per year. These CBUs include all net reciprocal hours. Per our pre-submission conference call and email, the PBGC found this approach in the development of the initial CBU level and hourly contribution rate to be reasonable in an email dated 11/20/2024. Additional detail is provided in the "Narrative in Support of Treatment of Reciprocal Contributions, CBU Decline and Future Contributions" at the end of this document to support the CBU assumption for the plan year ended April 30, 2023.

Reasonableness of Changed Assumption: The updated assumption extends through the end of the SFA projection period, April 30, 2051, conforms to the PBGC's Generally Acceptable Assumption Change guidelines for CBU assumptions, is supported with the plan's historical data, and is therefore reasonable to use in the SFA determination.

Mortality Assumption

Baseline Assumption: SOA RP-2014 Blue Collar Mortality adjusted to 2006 and projected generationally with Scale MP-2019.

Updated SFA Assumption: SOA RP-2014 Blue Collar Mortality adjusted to 2006 and projected generationally with Scale MP-2021.

Reasonableness of Changed Assumption: The proposed change conforms to the PBGC's Acceptable Assumption Change guidelines and is therefore reasonable to use in the SFA determination.

New Entrant Profile

Baseline Assumption: The new entrant profile reflects experience from the preceding plan year. It is assumed that each participant exiting the Plan is replaced by a new entrant.

Reason the Baseline Assumption is Not Reasonable: The new entrant assumption used in the projections for the 2020 zone certification was not considered to be material as it did not affect the projected year of insolvency or the zone in which the Plan was certified.

Updated SFA Assumption: For purposes of determining the amount of SFA, the new entrant profile assumption was updated to reflect new entrants to the Plan during the period from May 1, 2017 through April 30, 2022. This period represents the most recent five years preceding the census date for the participant data used in the determination of the SFA amount, or May 1, 2022. The data used is summarized at the end of this New Entrant Profile section. The updated profile of a new entrant that replaces a participant leaving the Plan is shown below.

Age Band	Count	Pension Service	Weighted Percentage
15-24	14	0.5	29%
25-34	13	0.8	28%
35-44	11	0.7	23%
45-54	5	0.6	10%
55-64	5	0.7	10%

New entrants are assumed to be 100% male.

Reasonableness of Changed Assumption: The assumption for determining the amount of SFA was updated to reflect the most current census data and the latest available five-year experience period through April 30, 2022. The updated assumption better reflects the expected new entrant demographics of the Plan, conforms to the PBGC's Acceptable Assumption Change guidelines and is therefore reasonable to use in the SFA determination.

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan
Application for Special Financial Assistance
EIN 23-1996365 /PN 001

The data used for the New Entrant Profile Analysis is shown below:

PYE 4/30	Hire Age	Pension Service	Sex	PYE 4/30	Hire Age	Pension Service	Sex
2018	42	0.3	M	2022	29	1	M
2018	43	1	M	2022	41	1.7	M
2018	36	1	M	2022	20	0.5	M
2018	40	1	M	2022	31	0.7	M
2018	41	0.4	M	2022	57	0.3	M
2018	52	0.6	M	2022	38	0.3	M
2018	59	1	M	2022	61	0.7	M
2018	35	0.6	M	2022	27	0.4	M
2018	27	1	M	2022	33	1	M
2018	43	0.3	M	2022	23	0.4	M
2018	49	1	M				
2019	48	0.4	M				
2019	47	0.3	M				
2019	55	1	M				
2019	28	0.9	M				
2019	59	0.9	M				
2020	28	1.6	M				
2020	30	0.5	M				
2020	22	0.3	M				
2020	21	0.5	M				
2020	21	0.4	M				
2020	22	0.6	M				
2020	23	0.4	M				
2020	32	1	M				
2020	21	0.3	M				
2020	30	0.6	M				
2020	19	0.3	M				
2020	24	0.4	M				
2020	34	0.8	M				
2021	36	1.2	M				
2021	23	1	M				
2021	20	0.6	M				
2021	23	1	M				
2021	32	0.7	M				
2021	41	0.3	M				
2021	34	0.6	M				
2021	22	0.8	M				
2021	52	0.8	M				

Narrative in Support of Treatment of Reciprocal Contributions, CBU Decline and Future Contributions

Introduction

This narrative is presented in support of the assumptions regarding reciprocity, CBU decline, and future contributions as applied in the application for Special Funding Assistance with the PBGC.

As part of the SFA_APP_Local47 document that was submitted with the initial SFA application, we documented the difficulties in obtaining accurate historical information with respect to reciprocal contributions. Once the issue was addressed and remedied by the new plan administrator, we had a limited number of years to develop an average reciprocity percentage. During a conference call with the PBGC on 10/16/2024, the PBGC agreed that instead of developing a load for reciprocity, as was done in the initial application, we should develop a CBU assumption based on hours derived from all contributions including reciprocity.

Template 3 summarizes the contribution activity from May 1, 2010 through April 30, 2022. The values in column D represent total actual contributions taken from the Plan's audited financial statements. The values in column E represent the actual total CBUs. Column F is the developed weighted average contribution rate of \$8.70 (column D divided by column E) to be used throughout the application. This approach was discussed in a pre-submission call and email with the PBGC on 11/18/2024 and the approach was found to be reasonable by the PBGC in an email dated 11/20/2024.

Hours Reported by Plan Administrator to Plan Actuary

The following chart summarizes the hours reported in the data provided to the actuary for valuation purposes. According to the plan administrator, these hours are adjusted to reflect reciprocal activity. Since these hours are reported on a consistent basis, they provide the best available data to determine the rate of future CBU decline.

PYE 4/30	CBU	Change
2010	214,295.25	
2011	185,913.25	0.8676
2012	170,715.75	0.9183
2013	139,254.00	0.8157
2014	140,795.16	1.0111
2015	167,059.80	1.1865
2016	138,895.29	0.8314
2017	161,587.59	1.1634
2018	167,900.38	1.0391
2019	151,372.59	0.9016
2020	COVID Period Exclusion	
2021	COVID Period Exclusion	
2022	COVID Period Exclusion	
Average Change		-3.79%

The average CBU decline for the pre-COVID period 5/1/2010 through 4/30/2019 is 3.79%. When the decline in active participation is considered, as described below, we believe that a 3% annual CBU decline through 4/30/2029 followed by a 1% decline thereafter is supported. As discussed in a pre-submission call with the PBGC on 11/18/2024, our proposed CBU assumption is that the CBU starting point is 134,009 for the plan year ending 4/30/2023 (the initial year is prorated by 1/3 for 1/1/2023-4/30/2023). This represents the 4/30/2019 CBUs of 151,373 reduced by 3% per year. This approach was found to be reasonable by the PBGC in the email dated 11/20/2024.

Decline in Active Population

Due to economic conditions in Central Pennsylvania, specifically around Harrisburg PA, there has been a steady decline in the number of active participants in the Plan. No employers have ever withdrawn from the plan. The active participant counts for the 2022 through 2024 plan years are added for further emphasis. Although not the basis for determining the rate of future CBU decline, the active participant count declined by an average of 5.40% for the 10-year pre-COVID period 2009-2019 and by 5.04% for the period 2009-2024. This historical decline would appear to support a reasonable expected future decline in CBU activity.

PYB 5/1	Active Participants	Change	
2009	202		
2010	166	0.8218	
2011	154	0.9277	
2012	136	0.8831	
2013	114	0.8382	
2014	115	1.0088	
2015	123	1.0696	
2016	112	0.9106	
2017	118	1.0536	
2018	122	1.0339	
2019	116	0.9508	
2020	114	0.9828	
2021	107	0.9386	
2022	112	1.0467	
2023	99	0.8839	
2024	93	0.9394	
Average Change			-5.40% (2009-2019)
			-5.04% (2009-2024)

Additional Note on Expected Benefit Payments

The expected benefit payments for Terminated Vested Participants during the period from the measurement date of 12/31/2022 through 4/30/2023 includes an adjustment of \$213,814 that represents a retroactive payment of monthly benefits to those Participants who are beyond the Normal Retirement Age. This payment is assumed payable on 1/1/2023 and includes a 2% annual interest adjustment in accordance with Section 4.04(A) of the Plan document.

Local 47
Summary of SFA Related Expenses

Invoice Date	Invoice Amount	Service
2/3/2023	2,475.00	Legal
3/6/2023	2,275.00	Legal
4/5/2023	2,193.75	Legal
6/5/2023	18,350.00	Actuarial
11/3/2023	15,562.50	Legal
12/5/2023	3,831.25	Legal
3/5/2024	1,212.50	Legal
4/4/2024	731.25	Legal
5/16/2024	18,962.50	Actuarial
6/5/2024	162.50	Legal
7/3/2024	650.00	Legal
8/5/2024	1,706.25	Legal
9/5/2024	32,200.00	Actuarial
4/30/2025	25,000.00	Actuarial and Legal
	125,312.50	(Projected based on past experience with assembly of filing and responding to Clarifying Questions)

By Plan Year	Rounded	
2022-2023	6,943.75	6,900
2023-2024	39,687.50	39,600
2024-2025	78,681.25	78,600



5301 Wisconsin Avenue, NW
Suite 800
Washington, DC 20015
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www.odonoghuelaw.com

LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date February 3, 2023
Invoice No.: 59861
Client ID: [REDACTED]

Matter ID: 0000

BILLING SUMMARY THROUGH JANUARY 31, 2023

Fees For Professional Services	2,475.00
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Current Billing	2,475.00
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Previous Balance:	568.75
Payments/Adjustments	568.75
Outstanding Balance:	0.00

Total Amount Due:	2,475.00
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LOCAL 47 BRICKLAYERS AND ALLIED
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P.O. BOX 1769
SALEM, VA 24153

Invoice No. 59861
Invoice Date February 3, 2023

RE: (0000) GENERAL

FOR PROFESSIONAL SERVICES RENDERED THROUGH JANUARY 31, 2023

Date	Narrative	Professional	Hours	Amount
01/06/23	Emails to L. Prego re: SFA application.	JRH	0.50	162.50
01/09/23	Review document request for SFA application.	JRH	1.00	325.00
01/10/23	Conference with L. Prego and G. Pastino re: SFA application; review lists.	JRH	1.50	487.50
01/20/23	Compile and review Plan materials needed for SFA application.	AZ	0.75	206.25
01/20/23	Telephone conference with PBGC re: SFA and merged plans; Email to G.Hardy.	JRH	1.00	325.00
01/23/23	Compile and review Plan materials needed for SFA application.	AZ	1.50	412.50
01/24/23	Compile and review Plan materials needed for SFA application.	AZ	0.25	68.75
01/24/23	SFA research; conference with K. Musgrove, G. Padino and L Prego.	JRH	1.50	487.50

Sub-Total Fees: 2,475.00

TOTAL CURRENT BILLING: \$ 2,475.00



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P.O. BOX 1769
SALEM, VA 24153

Invoice Date February 3, 2023
Invoice No.: 59861
Client ID: [REDACTED]

Matter ID: 0000

BILLING SUMMARY THROUGH JANUARY 31, 2023

Fees For Professional Services 2,475.00

Current Billing 2,475.00

Previous Balance:	568.75
Payments/Adjustments	568.75
Outstanding Balance:	0.00

Total Amount Due: 2,475.00

REMITTANCE COPY

Please return this page with your payment



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P.O. BOX 1769
SALEM, VA 24153

Invoice Date March 6, 2023
Invoice No.: 60083
Client ID: [REDACTED]

Matter ID: 0000

BILLING SUMMARY THROUGH FEBRUARY 28, 2023

Fees For Professional Services	2,518.75
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Current Billing	2,518.75
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Previous Balance:	2,475.00
Payments/Adjustments	2,475.00
Outstanding Balance:	0.00

Total Amount Due:	2,518.75
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**LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153**

Invoice No. 60083
Invoice Date March 6, 2023

RE: (0000) GENERAL

FOR PROFESSIONAL SERVICES RENDERED THROUGH FEBRUARY 28, 2023

Date	Narrative	Professional	Hours	Amount	
02/08/23	Emails to G. Hardy re: SFA questionnaires.	JRH	0.75	243.75	
02/10/23	Email [REDACTED] and audit letter.	JRH	0.75	243.75	not SFA
02/13/23	Review G. Hardy responses to SFA questionnaire; telephone conference and email with G. Hardy.	JRH	0.75	243.75	
02/17/23	Draft Withdrawal Liability Policy.	JRH	1.00	325.00	
02/21/23	Draft withdrawal liability policy.	JRH	1.00	325.00	
02/22/23	Email to [REDACTED] and L. Gehres re: SFA Amendment for PBGC.	JRH	1.00	325.00	
02/24/23	Draft Withdrawal Liability Policy and emails to G. Pastino, L. Prego and K. Musgrove.	JRH	1.50	487.50	
02/27/23	Prepare and meet with Trustees re: SFA filing.	JRH	1.00	325.00	

Sub-Total Fees: 2,518.75

TOTAL CURRENT BILLING: \$ 2,518.75
-243.75
SFA 2,275.00



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C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date March 6, 2023
Invoice No.: 60083
Client ID: [REDACTED]

Matter ID: 0000

BILLING SUMMARY THROUGH FEBRUARY 28, 2023

Fees For Professional Services 2,518.75

Current Billing 2,518.75

Previous Balance:	2,475.00
Payments/Adjustments	2,475.00
Outstanding Balance:	0.00

Total Amount Due: 2,518.75

REMITTANCE COPY

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P.O. BOX 1769
SALEM, VA 24153

Invoice Date April 5, 2023
Invoice No.: 60284
Client ID: [REDACTED]

Matter ID: 0000

BILLING SUMMARY THROUGH MARCH 31, 2023

Fees For Professional Services	2,925.00
Current Billing	2,925.00
Previous Balance:	2,518.75
Payments/Adjustments	2,518.75
Outstanding Balance:	0.00
Total Amount Due:	2,925.00



LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

RE: (0000) GENERAL

Invoice No. 60284
Invoice Date April 5, 2023

FOR PROFESSIONAL SERVICES RENDERED THROUGH MARCH 31, 2023

Date	Narrative	Professional	Hours	Amount	
03/04/23	Research and draft memo re requirements of SECURE 2.0 Act for defined benefit pension plans.	AF	1.50	487.50	not SFA
03/06/23	Review Kessler Topaz Securities Monitoring agreement.	JRH	0.75	243.75	not SFA
03/08/23	Emails to Trustees and L. Prego, [REDACTED] and K. Musgrove re: PBGC guidance on non-priority SFA applications; telephone conference with [REDACTED].	JRH	1.25	406.25	
03/09/23	Attend PBGC website; conference with G. Pastino, L. Prego and K. Musgrove; email to Trustees re: SFA application issues.	JRH	2.00	650.00	
03/10/23	Review minutes; Secure 2.0 Act memorandum; emails to L. Prego, G Pastino re: SFA application and lock in application and procedure.	JRH	1.50	487.50	
03/13/23	Prepare for and attend Trustees Meeting; review ERISA 104(d) (1) Notice and email to K. Musgrove. Review Lock-in SFA application and email ERISA 4262 Amendment to K. Musgrove, [REDACTED] and L. Prego.	JRH	2.00	650.00	

Sub-Total Fees: 2,925.00

TOTAL CURRENT BILLING: \$ 2,925.00
-731.25
SFA 2,193.75



5301 Wisconsin Avenue, NW
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LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date April 5, 2023
Invoice No.: 60284
Client ID: XXXXXXXXXX

Matter ID: 0000

BILLING SUMMARY THROUGH MARCH 31, 2023

Fees For Professional Services	2,925.00
Current Billing	2,925.00
Previous Balance:	2,518.75
Payments/Adjustments	2,518.75
Outstanding Balance:	0.00
Total Amount Due:	2,925.00

REMITTANCE COPY

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Date	Invoice #
6/5/2023	27160

Michael Shockley
Lawrence C. Musgrove Associates, Inc.
P. O. Box 1769
Salem, VA 24153

Federal EIN: 59-1921114

Terms	Due Date
Net 30	7/5/2023

Description	Amount
SFA Application Work through March 31, 2023	18,350.00

Balance Due \$18,350.00



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LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date November 3, 2023
Invoice No.: 61814
Client ID: XXXXXXXXXX
Matter ID: 0000

BILLING SUMMARY THROUGH OCTOBER 31, 2023

Fees For Professional Services	15,562.50
Current Billing	15,562.50
Previous Balance:	2,693.75
Payments/Adjustments	2,693.75
Outstanding Balance:	0.00
Total Amount Due:	15,562.50



**LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153**

Invoice No. 61814
Invoice Date November 3, 2023

RE: (0000) GENERAL

FOR PROFESSIONAL SERVICES RENDERED THROUGH OCTOBER 31, 2023

Date	Narrative	Professional	Hours	Amount
10/02/23	Telephone conference with [REDACTED] re: Plan restatement.	JRH	0.50	162.50
10/02/23	Email and telephone conference with [REDACTED] re: plan restatement.	JRH	0.75	243.75
10/02/23	Teleconference with J. Harney regarding plan restatement.	MS	0.25	68.75
10/18/23	Review Amendments to Plan of Benefits.	MS	3.00	825.00
10/19/23	Review amendments; draft restatement of Plan of Benefits.	MS	8.75	2,406.25
10/20/23	Review amendments; draft restatement of Plan of Benefits.	MS	6.00	1,650.00
10/23/23	Email with L. Prego and [REDACTED] re: SFA application and restated Plan document.	JRH	0.75	243.75
10/23/23	Review amendments; draft restatement of Plan of Benefits; draft SFA and SECURE 2.0 amendments.	MS	9.00	2,475.00
10/24/23	Review amendments; draft restatement of Plan of Benefits; draft SFA and SECURE 2.0 amendments; teleconference with J. Harney regarding same.	MS	6.00	1,650.00
10/25/23	Conference with G. Pastino and L. Prego re: SFA application. Email determination letter to [REDACTED]; Conference with [REDACTED] re: SFA application document checklist.	JRH	1.25	406.25



BRICKLAYERS LOCAL 47 PENSION FUND

Invoice No:61814

Client ID: [REDACTED]

Matter ID: 0000

November 3, 2023

Page: 2

Date	Narrative	Professional	Hours	Amount
10/25/23	Prepare for and attend meeting with Plan actuary regarding SFA application; office teleconference regarding same.	MS	2.00	550.00
10/25/23	Review amendments; draft restatement of Plan of Benefits; draft SFA and SECURE 2.0 amendments; teleconference with J. Harney regarding same.	MS	6.75	1,856.25
10/26/23	Review and edit restated Plan of Benefits.	MS	4.00	1,100.00
10/27/23	Review and edit restated Plan of Benefits.	MS	6.00	1,650.00
10/30/23	Review and edit restated Plan of Benefits.	MS	1.00	275.00

Sub-Total Fees: 15,562.50

TOTAL CURRENT BILLING: \$ 15,562.50



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LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date November 3, 2023
Invoice No.: 61814
Client ID: XXXXXXXXXX
Matter ID: 0000

BILLING SUMMARY THROUGH OCTOBER 31, 2023

Fees For Professional Services	15,562.50
Current Billing	15,562.50
Previous Balance:	2,693.75
Payments/Adjustments	2,693.75
Outstanding Balance:	0.00
Total Amount Due:	15,562.50

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LOCAL 47 BRICKLAYERS AND ALLIED
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C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date December 5, 2023
Invoice No.: 62039
Client ID: XXXXXXXXXX
Matter ID: 0000

BILLING SUMMARY THROUGH NOVEMBER 30, 2023

Fees For Professional Services	3,831.25
Current Billing	3,831.25
Previous Balance:	15,562.50
Payments/Adjustments	15,562.50
Outstanding Balance:	0.00
Total Amount Due:	3,831.25



**LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153**

RE: (0000) GENERAL

Invoice No. 62039
Invoice Date December 5, 2023

FOR PROFESSIONAL SERVICES RENDERED THROUGH NOVEMBER 30, 2023

Date	Narrative	Professional	Hours	Amount
11/01/23	Telephone conference with L. Prego re: SFA issues. Email with [REDACTED] Review restated plan document.	JRH	1.00	325.00
11/02/23	Review and revise Restated Plan document.	JRH	1.00	325.00
11/03/23	Review and revise draft Plan document.	JRH	1.50	487.50
11/06/23	Telephone conference with L. Prego and draft withdrawal liability collection policy.	JRH	1.25	406.25
11/15/23	Email to PBGC re: plan amendments by plan sponsors for SFA application.	JRH	0.75	243.75
11/16/23	Email and telephone conference with [REDACTED] of PBGC re: SGA Compliance Amendment and settlor amendments.	JRH	1.25	406.25
11/21/23	Telephone conference with K, Musgrove. Email to K, Musgrove and L. Prego re: restated Plan of Benefits and Withdrawal Liability Collections Procedure. Email with [REDACTED] re: SFA PBGC Amendment.	JRH	1.25	406.25
11/22/23	Telephone conference and email to K. Musgrove re: SFA Amendment.	JRH	0.50	162.50
11/26/23	Review and edit restated Plan of Benefits.	MS	3.00	825.00
11/27/23	Telephone conference with G. LaChapelle and email to K, Musgrove re: Section 11 of Trust Agreement re: Plan Amendments.	JRH	0.75	243.75



BRICKLAYERS LOCAL 47 PENSION FUND

Invoice No: 62039

Client ID: [REDACTED]

Matter ID: 0000

December 5, 2023

Page: 2

Sub-Total Fees: 3,831.25

TOTAL CURRENT BILLING: \$ 3,831.25



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LOCAL 47 BRICKLAYERS AND ALLIED
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C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date December 5, 2023
Invoice No.: 62039
Client ID: XXXXXXXXXX
Matter ID: 0000

BILLING SUMMARY THROUGH NOVEMBER 30, 2023

Fees For Professional Services	3,831.25
Current Billing	3,831.25
Previous Balance:	15,562.50
Payments/Adjustments	15,562.50
Outstanding Balance:	0.00
Total Amount Due:	3,831.25

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LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date March 5, 2024
Invoice No.: 62687
Client ID: [REDACTED]

Matter ID: 0000

BILLING SUMMARY THROUGH FEBRUARY 29, 2024

Fees For Professional Services 1,212.50

Current Billing 1,212.50

Previous Balance:	1,187.50
Payments/Adjustments	1,187.50
Outstanding Balance:	0.00

Total Amount Due: 1,212.50



LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice No. 62687
Invoice Date March 5, 2024

RE: (0000) GENERAL

FOR PROFESSIONAL SERVICES RENDERED THROUGH FEBRUARY 29, 2024

Date	Narrative	Professional	Hours	Amount
02/09/24	Review draft minutes; Confer with K. Musgrove regarding same.	GBL	0.25	68.75
02/22/24	Attend meeting with G. Pastino, L. Prego, K. Musgrove and J. Harney regarding SFA filing and documents needed; Review documents and Prepare Penalty of Perjury Statement.	GBL	1.50	412.50
02/22/24	Meeting re: SFA Application. Telephone conference and email with A. Pennypacker re: Trustee Henger and Withdrawal Liability policy. Email to K. Musgrove re: Henger signatures; Email to G. LaChapelle re: Union Co-Chair and contact information Emails to K. Musgrove re: same.	JRH	2.00	650.00
02/23/24	Email G. Pastino re: SFA application.	JRH	0.25	81.25

Sub-Total Fees: 1,212.50

TOTAL CURRENT BILLING: \$ 1,212.50



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CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date March 5, 2024
Invoice No.: 62687
Client ID: XXXXXXXXXX
Matter ID: 0000

BILLING SUMMARY THROUGH FEBRUARY 29, 2024

Fees For Professional Services 1,212.50

Current Billing 1,212.50

Previous Balance: 1,187.50
Payments/Adjustments 1,187.50
Outstanding Balance: 0.00

Total Amount Due: 1,212.50

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LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date April 4, 2024
Invoice No.: 62881
Client ID: [REDACTED]

Matter ID: 0000

BILLING SUMMARY THROUGH MARCH 31, 2024

Fees For Professional Services	2,243.75
Expenses and Advances:	13.00
Current Billing	2,256.75
Previous Balance:	1,212.50
Payments/Adjustments	1,212.50
Outstanding Balance:	0.00
Total Amount Due:	2,256.75



**LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153**

Invoice No. 62881
Invoice Date April 4, 2024

RE: (0000) GENERAL

FOR PROFESSIONAL SERVICES RENDERED THROUGH MARCH 31, 2024

Date	Narrative	Professional	Hours	Amount	
03/04/24	Review meeting materials.	GBL	0.50	162.50	
03/05/24	Review and revise ERISA 104(d) notice; Confer with [REDACTED] regarding same.	GBL	0.50	162.50	not SFA
03/06/24	Review Proxy Vote Plus Report and Executive Summary.	GBL	1.00	325.00	not SFA
03/07/24	Review updated meeting materials.	GBL	0.25	81.25	
03/11/24	Attend Board of Trustees meeting; Review and circulate Withdrawal Liability Policy in connection with SFA application.	GBL	1.25	406.25	
03/12/24	Search public records for updated addresses for terminated vesteds.	MS	2.00	550.00	not SFA
03/12/24	Confer with K. Musgrove, [REDACTED] [REDACTED] regarding locating missing participants; Reviewed research regarding same.	GBL	0.50	162.50	not SFA
03/15/24	Retrieve public records to confirm death of participant [REDACTED]	MS	0.25	68.75	not SFA
03/19/24	Review [REDACTED] QDRO and prepare status memorandum and letter regarding same.	GBL	0.75	243.75	not SFA
03/26/24	Review documents and correspondence regarding SFA application assumption support.	GBL	0.25	81.25	

Sub-Total Fees: 2,243.75
-1,512.50
SFA 731.25

BRICKLAYERS LOCAL 47 PENSION FUND

Invoice No: 62881

Client ID: [REDACTED]

Matter ID: 0000

April 4, 2024

Page: 2

DISBURSEMENTS

03/20/2024	Miscellaneous Expense	13.00
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Sub-Total Disbursements: 13.00

TOTAL CURRENT BILLING: \$ 2,256.75



LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date April 4, 2024
Invoice No.: 62881
Client ID: [REDACTED]

Matter ID: 0000

BILLING SUMMARY THROUGH MARCH 31, 2024

Fees For Professional Services	2,243.75
Expenses and Advances:	13.00

Current Billing	2,256.75
------------------------	-----------------

Previous Balance:	1,212.50
Payments/Adjustments	1,212.50
Outstanding Balance:	0.00

Total Amount Due:	2,256.75
--------------------------	-----------------

REMITTANCE COPY

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FOSTER & FOSTER
ACTUARIES AND CONSULTANTS

Invoice

Date	Invoice #
5/16/2024	31175

Bill To

Michael Shockley
Lawrence C. Musgrove Associates, Inc.
P. O. Box 1769
Salem, VA 24153

Phone: (239) 433-5500
Fax: (239) 481-0634
Email: AR@foster-foster.com
Website: www.foster-foster.com
Federal EIN: 59-1921114

Local 47 Bricklayers and Allied Craftsmen Pension Plan

Terms	Due Date
Net 30	6/15/2024

Description	Amount
Benefit Calculations: [REDACTED]	300.00
SFA Application Work for period 4/1/2023 thru 3/31/2024	18,962.50

Thank you for your business!

Most preferred method of payment is an ACH deposit.

Please reference Plan name & Invoice # above:

- Account Title: Foster & Foster, Inc.
- Account Number: [REDACTED]
- Routing Number: 063114661
- Bank Name: Cogent Bank

For payment via a mailed check, please remit to:

Foster & Foster, Inc.

13420 Parker Commons Blvd, Ste104. Fort Myers, FL 33912

Balance Due \$19,262.50



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LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date: June 5, 2024
Invoice No.: 63329
Client ID: XXXXXXXXXX
Matter ID: 0000

BILLING SUMMARY THROUGH MAY 31, 2024

Fees For Professional Services	162.50
--------------------------------	--------

Current Billing	162.50
------------------------	---------------

Previous Balance:	296.83
Payments/Adjustments	296.83
Outstanding Balance:	0.00

Total Amount Due:	162.50
--------------------------	---------------



LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice No. 63329
Invoice Date June 5, 2024

RE: (0000) GENERAL

FOR PROFESSIONAL SERVICES RENDERED THROUGH MAY 31, 2024

Date	Narrative	Professional	Hours	Amount
05/21/24	Review correspondence and documents from Fund Actuary regarding SFA application.	GBL	0.25	81.25
05/30/24	Review correspondence regarding SFA application.	GBL	0.25	81.25

Sub-Total Fees: 162.50

TOTAL CURRENT BILLING: \$ 162.50



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LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date June 5, 2024
Invoice No.: 63329
Client ID: [REDACTED]

Matter ID: 0000

BILLING SUMMARY THROUGH MAY 31, 2024

Fees For Professional Services	162.50
--------------------------------	--------

Current Billing	162.50
------------------------	---------------

Previous Balance:	296.83
Payments/Adjustments	296.83
Outstanding Balance:	0.00

Total Amount Due:	162.50
--------------------------	---------------

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LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date July 3, 2024
Invoice No.: 63544
Client ID: XXXXXXXXXX
Matter ID: 0000

BILLING SUMMARY THROUGH JUNE 30, 2024

Fees For Professional Services	3,268.75
Expenses and Advances:	180.00

Current Billing	3,448.75
------------------------	-----------------

Previous Balance:	162.50
Payments/Adjustments	162.50
Outstanding Balance:	0.00

Total Amount Due:	3,448.75
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**LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153**

Invoice No. 63544
Invoice Date July 3, 2024

RE: (0000) GENERAL

FOR PROFESSIONAL SERVICES RENDERED THROUGH JUNE 30, 2024

Date	Narrative	Professional	Hours	Amount	
06/04/24	Review meeting materials and confer with K. Musgrove regarding same.	GBL	0.75	243.75	SFA
06/10/24	Attend Board of Trustees meeting.	GBL	0.75	243.75	SFA
06/12/24	Review payroll audit policy and confer with [REDACTED] regarding same.	GBL	0.25	81.25	
06/12/24	Research regarding contributing employer payroll audits.	PM	1.25	343.75	
06/13/24	Research regarding contributing employer payroll audits.	PM	0.25	68.75	
06/14/24	Confer with [REDACTED] regarding payroll audit frequency research.	GBL	0.25	81.25	
06/14/24	Research regarding contributing employer payroll audits; related correspondence.	PM	2.50	687.50	
06/17/24	Review Payroll Audit policy and prepare email correspondence to Trustees regarding reduction in annual number of audits.	GBL	0.50	162.50	
06/18/24	Participate in meeting with PBGC regarding SFA assumptions.	GBL	0.50	162.50	SFA
06/18/24	Review and amend random audit policy.	PM	1.75	481.25	
06/20/24	Draft amendment to the Random Audit Policy; related research and correspondence.	PM	1.00	275.00	
06/24/24	Review Restated Audit Policy and confer with [REDACTED] regarding same.	GBL	0.25	81.25	



BRICKLAYERS LOCAL 47 PENSION FUND

Invoice No: 63544

Client ID: [REDACTED]

Matter ID: 0000

July 3, 2024

Page: 2

Date	Narrative	Professional	Hours	Amount
06/24/24	Review and amend random audit policy.	PM	1.00	275.00
06/27/24	Finalize payroll audit policy and prepare email correspondence to Trustees regarding same.	GBL	0.25	81.25

Sub-Total Fees: 3,268.75
SFA total 650.00

DISBURSEMENTS

06/28/2024	Bloomberg Research Reports	180.00
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Sub-Total Disbursements: 180.00

TOTAL CURRENT BILLING: \$ 3,448.75



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P.O. BOX 1769
SALEM, VA 24153

Invoice Date July 3, 2024
Invoice No.: 63544
Client ID: XXXXXXXXXX
Matter ID: 0000

BILLING SUMMARY THROUGH JUNE 30, 2024

Fees For Professional Services	3,268.75
Expenses and Advances:	180.00
Current Billing	3,448.75
Previous Balance:	162.50
Payments/Adjustments	162.50
Outstanding Balance:	0.00
Total Amount Due:	3,448.75

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LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153

Invoice Date August 5, 2024
Invoice No.: 63751
Client ID: XXXXXXXXXX
Matter ID: 0000

BILLING SUMMARY THROUGH JULY 31, 2024

Fees For Professional Services	1,706.25
Current Billing	1,706.25
Previous Balance:	3,448.75
Payments/Adjustments	3,448.75
Outstanding Balance:	0.00
Total Amount Due:	1,706.25



**LOCAL 47 BRICKLAYERS AND ALLIED
CRAFTSMEN PENSION PLAN
C/O LAWRENCE C. MUSGROVE ASSOCIATES, INC.
P.O. BOX 1769
SALEM, VA 24153**

RE: (0000) GENERAL

Invoice No. 63751
Invoice Date August 5, 2024

FOR PROFESSIONAL SERVICES RENDERED THROUGH JULY 31, 2024

Date	Narrative	Professional	Hours	Amount
07/11/24	Review and revise Minutes.	GBL	0.50	162.50
07/23/24	Review request from PBGC in connection with SFA application; Review Plan documents and confer with G. Pastino and K. Musgrove regarding same; Confer with PBGC regarding same; Update amendment and transmit to Trustees.	GBL	2.00	650.00
07/24/24	Review Trust Agreement and Plan document provisions regarding amendments and confer with PBGC Attorney regarding same.	GBL	1.50	487.50
07/29/24	Review correspondence and documents in connection with SFA application.	GBL	0.25	81.25
07/31/24	Confer with PBGC regarding Compliance Amendment; Prepare Trustee Roster document and confer with PBGC and Trustees regarding same.	GBL	1.00	325.00

Sub-Total Fees: 1,706.25

TOTAL CURRENT BILLING: \$ 1,706.25



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LOCAL 47 BRICKLAYERS AND ALLIED
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P.O. BOX 1769
SALEM, VA 24153

Invoice Date August 5, 2024
Invoice No.: 63751
Client ID: XXXXXXXXXX

Matter ID: 0000

BILLING SUMMARY THROUGH JULY 31, 2024

Fees For Professional Services	1,706.25
Current Billing	1,706.25
Previous Balance:	3,448.75
Payments/Adjustments	3,448.75
Outstanding Balance:	0.00
Total Amount Due:	1,706.25

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Date	Invoice #
9/5/2024	32783

Michael Shockley
Lawrence C. Musgrove Associates, Inc.
P. O. Box 1769
Salem, VA 24153

Federal EIN: 59-1921114

Terms	Due Date
Net 30	10/5/2024

Description	Amount
Benefit Calculations: [REDACTED]	
9 Working Retiree Participants	1,000.00
SFA Application Work for period 4/1/2024 thru 8/31/2024	32,200.00

Balance Due \$33,200.00

Certification by Plan Actuary: Amount of Special Financial Assistance

This is a certification that the requested amount of special financial assistance ("SFA") of \$8,334,265 is the amount to which the PA Local 47 Bricklayers and Allied Craftsmen Pension Plan ("Plan") is entitled under section 4262(j)(1) of ERISA and section 4262.4 of the Pension Benefit Guaranty Corporation's ("PBGC") SFA regulation. The amount of SFA for the Fund was calculated as of the SFA measurement date of December 31, 2022 in accordance with generally accepted actuarial principles and practices and the provisions under section 4262.4(e) of Pension Benefit Guaranty Corporation's ("PBGC") SFA regulation.

Foster & Foster has determined the amount of SFA at the request of the Board of Trustees of the Plan as part of the Plan's application for SFA. The calculation of the amount of SFA shown in the Plan's application for SFA is not applicable for other purposes.

The calculation of the amount of SFA is based on the assumptions and methods used in the 2020 certification of actuarial plan status, dated July 29, 2020, modified as described in Section D, Item 6b of the "General Instructions for Multiemployer Plans Applying for Special Financial Assistance." In addition, it is based on the participant census data as of April 30, 2022 used for the 2022 actuarial valuation of the Plan, the fair market value of assets as of the SFA measurement date certified by the plan sponsor, and other relevant information provided by the Plan Administrator. Foster & Foster does not audit the data provided. The accuracy and comprehensiveness of the data is the responsibility of those supplying the data. To the extent we can, however, Foster & Foster does review the data for reasonableness and consistency. Based on our review of the data, we have no reason to doubt the substantial accuracy of the information on which we have based the calculation of the SFA amount and we have no reason to believe there are facts or circumstances that would affect the validity of these results.

I am a member of the American Academy of Actuaries and I meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion herein. To the best of my knowledge, the information supplied herein is complete and accurate. Each prescribed assumption for the determination of the SFA amount was applied in accordance with applicable law and regulations. In my opinion, all other assumptions are reasonable taking into account the experience of the plan and reasonable expectations.

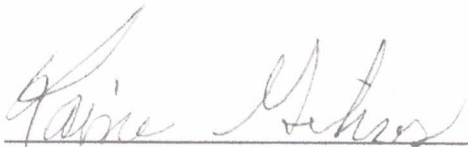


Gregory J. Pastino, ASA, MAAA, EA
Senior Consulting Actuary
Enrolled Actuary No. 23-03916

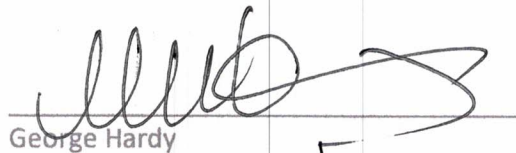
Date: December 3, 2024

PENALTY OF PERJURY STATEMENT PURSANT TO PBGC REGULATION § 4262.6(b)
PA LOCAL 47 BRICKLAYERS AND ALLIED CRAFTSMEN PENSION PLAN
APPLICATION FOR SPECIAL FINANCIAL ASSISTANCE

Under penalty of perjury under the laws of the United States of America, I declare that I am an authorized trustee who is a current member of the board of trustees of the PA Local 47 Bricklayers and Allied Craftsmen Pension Plan and that I have examined this application, including accompanying documents, and, to the best of my knowledge and belief, the application contains all the relevant facts relating to the application; all statements of fact contained in the application are true, correct, and not misleading because of omission of any material fact; and all accompanying documents are what they purport to be.



Laine Gehres
Chairman of the Board of Trustees



George Hardy
Co-Chairman of the Board of Trustees

Date: 10/28/2024

Date: 10/28/2024

Application Checklist

v20230727

Instructions for Section E, Item 1 of the Instructions for Filing Requirements for Multiemployer Plans Applying for Special Financial Assistance (SFA):


The Application to PBGC for Approval of Special Financial Assistance Checklist ("Application Checklist" or "Checklist") identifies all information required to be filed with an initial or revised application. For a supplemented application, instead use "Application Checklist - Supplemented." The Application Checklist is not required for a lock-in application.

For a plan required to submit additional information described in Addendum A of the SFA Filing Instructions, also complete Checklist Items #40.a. to #49.b., and if there is a merger as described in Addendum A, also complete Checklist Items #50 through #63.

Applications (including this Application Checklist), with the exception of lock-in applications, must be submitted to PBGC electronically through PBGC's e-Filing Portal, (<https://efilingportal.pbgc.gov/site/>). After logging into the e-Filing Portal, go to the Multiemployer Events section and click "Create New ME Filing." Under "Select a filing type," select "Application for Financial Assistance – Special." Note: revised and supplemented applications must be submitted by selecting "Create New ME Filing."

Note: If you go to the e-Filing Portal and do not see "Application for Financial Assistance – Special" under the "Select a Filing Type," then the e-Filing Portal is temporarily closed and PBGC is not accepting applications (other than lock-in applications) at the time, unless the plan is eligible to make an emergency filing under § 4262.10(f). PBGC's website, www.pbgc.gov, will be updated when the e-Filing Portal reopens for applications. PBGC maintains information on its website at www.pbgc.gov to inform prospective applicants about the current status of the e-Filing portal, as well as to provide advance notice of when PBGC expects to open or temporarily close the e-Filing Portal.

General instructions for completing the Application Checklist:

Complete all items that are shaded: 

If required information was already filed: (1) through PBGC's e-Filing Portal; or (2) through any means for an insolvent plan, a plan that has received a partition, or a plan that submitted an emergency filing, the filer may either upload the information with the application or include a statement in the Plan Comments section of the Application Checklist indicating the date on which and the submission with which the information was previously filed. For any such items previously provided, enter N/A as the **Plan Response**.

For a revised application, the filer may, but is not required to, submit an entire application. For all Application Checklist Items that were previously filed that are not being changed, the filer may include a statement in the Plan Comments section of the Application Checklist to indicate that the other information was previously provided as part of the initial application. For each, enter N/A as the **Plan Response**.

Instructions for specific columns:

Plan Response: Provide a response to each item on the Application Checklist, using only the **Response Options** shown for each Checklist Item.

Name(s) of Files Uploaded: Identify the full name of the file or files uploaded that are responsive to the Checklist Item. The column **Upload as Document Type** provides guidance on the "document type" to select when submitting documents on PBGC's e-Filing Portal.

Page Number Reference(s): For Checklist Items #22 to #29c, submit all information in a single document and identify here the relevant page numbers for each such Checklist Item.

Plan Comments: Use this column to provide explanations for any **Plan Response** that is N/A, to respond as may be specifically identified for Checklist Items, and to provide any optional explanatory comments.

Additional guidance is provided in the following columns:

Upload as Document Type: When uploading documents in PBGC's e-Filing Portal, select the appropriate Document Type for each document that is uploaded. This column provides guidance on the Document Type to select for each Checklist Item. You may upload more than one document using the same Document Type, and there may be Document Types on the e-Filing Portal for which you have no documents to upload.

Required Filenaming (if applicable): For certain Checklist Items, a specified format for naming the file is required.

SFA Instructions Reference: Identifies the applicable section and item number in PBGC's Instructions for Filing Requirements for Multiemployer Plans Applying for Special Financial Assistance.

You must select N/A if a Checklist Item # is not applicable to your application. **Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #39 on the Application Checklist. If there has been an event as described in § 4262.4(f), complete Checklist Items #40.a. through #49.b., and if there has been a merger described in Addendum A, also complete Checklist Items #50 through #63. Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #40.a. through #49.b. if you are required to complete Checklist Items # 40.a. through #49.b. Your application will also be considered incomplete if No is entered as a Plan Response for any of Checklist Items #50 through #63 if you are required to complete Checklist Items #50 through #63.**

If a Checklist Item # asks multiple questions or requests multiple items, the Plan Response should only be Yes if the plan is providing all information requested for that Checklist Item.

Note, a Yes or No response is also required for Checklist Items #a through #f.

Note, in the case of a plan applying for priority consideration, the plan's application must also be submitted to the Treasury Department. If that requirement applies to an application, PBGC will transmit the application to the Treasury Department on behalf of the plan. See IRS Notice [NOTICE] for further information.

All information and documentation, unless covered by the Privacy Act, that is included in an SFA application may be posted on PBGC's website at www.pbgc.gov or otherwise publicly disclosed, without additional notification. Except to the extent required by the Privacy Act, PBGC provides no assurance of confidentiality in any information included in an SFA application.

Version Updates (newest version at top)

Version	Date updated
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v07272023p	07/27/2023	Updated checklist to include new Template 10 requirement and reflect changes to eligibility and death audit instructions
v20221129p	11/29/2022	Updated checklist item 11. for new death audit requirements
v20220802p	08/02/2022	Fixed some of the shading in the checklist
v20220706p	07/06/2022	

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

Plan name:

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)

EIN:

23-1996365

PN:

001

SFA Amount Requested:

\$8,334,265.00

Do NOT use this Application Checklist for a supplemented application. Instead use Application Checklist - Supplemented.

-----Filers provide responses here for each Checklist Item:-----

Unless otherwise specified:
YYYY = plan year
Plan Name = abbreviated plan name

Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #39. In addition, if required to provide information due to a "certain event" (see Addendum A of the SFA Filing Instructions), your application will be considered incomplete if No is entered as a Plan Response for any Checklist Items #40.a. through #49.b. If there is a merger event described in Addendum A, your application will also be considered incomplete if No is entered as a Plan Response for any Checklist Items #50 through #63.

Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
Plan Information, Checklist, and Certifications									
a.		Is this application a revised application submitted after the denial of a previously filed application for SFA?	Yes No	No	N/A	N/A		N/A	N/A
b.		Is this application a revised application submitted after a plan has withdrawn its application for SFA, that was initially submitted under the interim final rule?	Yes No	No	N/A	N/A		N/A	N/A
c.		Is this application a revised application submitted after a plan has withdrawn its application for SFA, that was submitted under the final rule?	Yes No	No	N/A	N/A		N/A	N/A
d.		Did the plan previously file a lock-in application?	Yes No	Yes	N/A	N/A	A "lock-in" application was filed on March 13, 2023.	N/A	N/A
e.		Has this plan been terminated?	Yes No	No	N/A	N/A	If terminated, provide date of plan termination.	N/A	N/A
f.		Is this plan a MPRA plan as defined under § 4262.4(a)(3) of PBGC's SFA regulation?	Yes No	No	N/A	N/A		N/A	N/A
1.	Section B, Item (1)a.	Does the application include the most recent plan document or restatement of the plan document and all amendments adopted since the last restatement (if any)?	Yes No	Yes		N/A	This information was provided previously as part of the initial application.	Pension plan documents, all versions available, and all amendments signed and dated	N/A
2.	Section B, Item (1)b.	Does the application include the most recent trust agreement or restatement of the trust agreement, and all amendments adopted since the last restatement (if any)?	Yes No	Yes		N/A	This information was provided previously as part of the initial application.	Pension plan documents, all versions available, and all amendments signed and dated	N/A
3.	Section B, Item (1)c.	Does the application include the most recent IRS determination letter? Enter N/A if the plan does not have a determination letter.	Yes No N/A	Yes		N/A	This information was provided previously as part of the initial application.	Pension plan documents, all versions available, and all amendments signed and dated	N/A
4.	Section B, Item (2)	Does the application include the actuarial valuation report for the 2018 plan year and each subsequent actuarial valuation report completed before the filing date of the initial application? Enter N/A if no actuarial valuation report was prepared because it was not required for any requested year. Is each report provided as a separate document using the required filename convention?	Yes No N/A	Yes		N/A	This information was provided previously as part of the initial application.	Most recent actuarial valuation for the plan	YYYYAVR Plan Name
5.a.		Does the application include the most recent rehabilitation plan (or funding improvement plan, if applicable), including all subsequent amendments and updates, and the percentage of total contributions received under each schedule of the rehabilitation plan or funding improvement plan for the most recent plan year available?	Yes No	Yes		N/A	This information was provided previously as part of the initial application.	Rehabilitation plan (or funding improvement plan, if applicable)	N/A

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

Plan name:

23-1996365

EIN:

001

PN:

SFA Amount Requested:

\$8,334,265.00

Do NOT use this Application Checklist for a supplemented application. Instead use Application Checklist - Supplemented.

-----Filers provide responses here for each Checklist Item:-----

Unless otherwise specified:
YYYY = plan year
Plan Name = abbreviated plan name

Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #39. In addition, if required to provide information due to a "certain event" (see Addendum A of the SFA Filing Instructions), your application will be considered incomplete if No is entered as a Plan Response for any Checklist Items #40.a. through #49.b. If there is a merger event described in Addendum A, your application will also be considered incomplete if No is entered as a Plan Response for any Checklist Items #50 through #63.

Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
5.b.	Section B, Item (3)	If the most recent rehabilitation plan does not include historical documentation of rehabilitation plan changes (if any) that occurred in calendar year 2020 and later, does the application include an additional document with these details? Enter N/A if the historical document is contained in the rehabilitation plans.	Yes No N/A	Yes		N/A	This information was provided previously as part of the initial application.	Rehabilitation plan (or funding improvement plan, if applicable)	N/A
6.	Section B, Item (4)	Does the application include the plan's most recently filed (as of the filing date of the initial application) Form 5500 (Annual Return/Report of Employee Benefit Plan) and all schedules and attachments (including the audited financial statement)? Is the 5500 filing provided as a single document using the required filename convention?	Yes No	Yes		N/A	This information was provided previously as part of the initial application.	Latest annual return/report of employee benefit plan (Form 5500)	YYYYForm5500 Plan Name
7.a.	Section B, Item (5)	Does the application include the plan actuary's certification of plan status ("zone certification") for the 2018 plan year and each subsequent annual certification completed before the filing date of the initial application? Enter N/A if the plan does not have to provide certifications for any requested plan year. Is each zone certification (including the additional information identified in Checklist Items #7.b. and #7.c. below, if applicable) provided as a single document, separately for each plan year, using the required filename convention?	Yes No N/A	Yes	2024Zone20240729_Local47.pdf	N/A	Certifications for 2018-2023 were provided previously as part of the initial application. The 2024 certification is included with this application.	Zone certification	YYYYZoneYYYYMMDD Plan Name, where the first "YYYYY" is the applicable plan year, and "YYYYYMMDD" is the date the certification was prepared.
7.b.		Does the application include documentation for all zone certifications that clearly identifies all assumptions used including the interest rate used for funding standard account purposes? If such information is provided in an addendum, addendums are only required for the most recent actuarial certification of plan status completed before January 1, 2021 and each subsequent annual certification. Is this information included in the single document in Checklist Item #7.a. for the applicable plan year?	Yes No N/A	Yes	N/A - include as part of documents in Checklist Item #7.a.	N/A		N/A - include as part of documents in Checklist Item #7.a.	N/A - included in a single document for each plan year - See Checklist Item #7.a.
7.c.		For a certification of critical and declining status, does the application include the required plan-year-by-plan-year projection (showing the items identified in Section B, Item (5)a. through (5)f. of the SFA Instructions) demonstrating the plan year that the plan is projected to become insolvent? If required, is this information included in the single document in Checklist Item #7.a. for the applicable plan year? Enter N/A if the plan entered N/A for Checklist Item #7.a. or if the application does not include a certification of critical and declining status.	Yes No N/A	Yes	N/A - include as part of documents in Checklist Item #7.a.	N/A		N/A - include as part of documents in Checklist Item #7.a.	N/A - included in a single document for each plan year - See Checklist Item #7.a.

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

Plan name:

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)

EIN:

23-1996365

PN:

001

SFA Amount Requested:

\$8,334,265.00

Do NOT use this Application Checklist for a supplemented application. Instead use Application Checklist - Supplemented.

-----Filers provide responses here for each Checklist Item:-----

Unless otherwise specified:
YYYY = plan year
Plan Name = abbreviated plan name

Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #39. In addition, if required to provide information due to a "certain event" (see Addendum A of the SFA Filing Instructions), your application will be considered incomplete if No is entered as a Plan Response for any Checklist Items #40.a. through #49.b. If there is a merger event described in Addendum A, your application will also be considered incomplete if No is entered as a Plan Response for any Checklist Items #50 through #63.

Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
8.	Section B, Item (6)	Does the application include the most recent account statements for each of the plan's cash and investment accounts? Insolvent plans may enter N/A, and identify in the Plan Comments that this information was previously submitted to PBGC and the date submitted.	Yes No N/A	Yes		N/A	This information was provided previously as part of the initial application.	Bank/Asset statements for all cash and investment accounts	N/A
9.	Section B, Item (7)	Does the application include the most recent plan financial statement (audited, or unaudited if audited is not available)? Insolvent plans may enter N/A, and identify in the Plan Comments that this information was previously submitted to PBGC and the date submitted.	Yes No N/A	Yes	20230430Audit_Report_Local47; BAC 47 BS 4.2024; BAC 47 Cash Report 4.2024	N/A	Audit for PYE 2022 was provided previously as part of the initial application. Included here are the PYE 2023 audit and the unaudited income statement and balance sheet for PYE 2024	Plan's most recent financial statement (audited, or unaudited if audited not available)	N/A
10.	Section B, Item (8)	Does the application include all of the plan's written policies and procedures governing the plan's determination, assessment, collection, settlement, and payment of withdrawal liability? Are all such items included as a single document using the required filenaming convention?	Yes No N/A	Yes		N/A	This information was provided previously as part of the initial application.	Pension plan documents, all versions available, and all amendments signed and dated	WDL Plan Name
11.a.	Section B, Item (9)a.	Does the application include documentation of a death audit to identify deceased participants that was completed on the census data used for SFA purposes, including identification of the service provider conducting the audit, date performed, the participant counts (provided separately for current retirees and beneficiaries, current terminated vested participants not yet in pay status, and current active participants) run through the death audit, and a copy of the results of the audit provided to the plan administrator by the service provider? If applicable, has personally identifiable information in this report been redacted prior to submission to PBGC? Is this information included as a single document using the required filenaming convention?	Yes No	Yes		N/A	This information was provided previously as part of the initial application.	Pension plan documents, all versions available, and all amendments signed and dated	Death Audit Plan Name
11.b.		If any known deaths occurred before the date of the census data used for SFA purposes, is a statement certifying these deaths were reflected for SFA calculation purposes provided?	Yes No N/A	Yes	N/A - include as part of documents in Checklist Item #11.a.	N/A		N/A	N/A - include as part of documents in Checklist Item #11.a.
11.c.	Section B, Item (9)b.	Does the application include full census data (Social Security Number and name) of all terminated vested participants that were included in the SFA projections? Is this information provided in Excel, or in an Excel-compatible format?	Yes No N/A	N/A		N/A	This information was provided previously as part of the initial application.	Submit the data file and the date of the census data through PBGC's secure file transfer system, Leapfile. Go to http://pbgc.leapfile.com, click on "Secure Upload" and then enter sfa@pbgc.gov as the recipient email address and upload the file(s) for secure transmission	Include as the subject "Submission of Terminated Vested Census Data for (Plan Name)," and as the memo "(Plan Name) terminated vested census data dated (date of census data) through Leapfile for independent audit by PBGC."

Application to PBGC for Approval of Special Financial Assistance (SFA)

APPLICATION CHECKLIST

Plan name:	PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)
EIN:	23-1996365
PN:	001
SFA Amount Requested:	\$8,334,265.00

Do NOT use this Application Checklist for a supplemented application. Instead use Application Checklist - Supplemented.

v20230727

Unless otherwise specified:
YYYY = plan year
Plan Name = abbreviated plan name

-----Filers provide responses here for each Checklist Item:-----

Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #39. In addition, if required to provide information due to a "certain event" (see Addendum A of the SFA Filing Instructions), your application will be considered incomplete if No is entered as a Plan Response for any Checklist Items #40.a. through #49.b. If there is a merger event described in Addendum A, your application will also be considered incomplete if No is entered as a Plan Response for any Checklist Items #50 through #63.

Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
12.	Section B, Item (10)	Does the application include information required to enable the plan to receive electronic transfer of funds if the SFA application is approved, including (if applicable) a notarized payment form? See SFA Instructions, Section B, Item (10).	Yes No	Yes		N/A	This information was provided previously as part of the initial application.	Other	N/A
13.	Section C, Item (1)	Does the application include the plan's projection of expected benefit payments that should have been attached to the Form 5500 Schedule MB in response to line 8b(1) on the Form 5500 Schedule MB for plan years 2018 through the last year the Form 5500 was filed by the filing date of the initial application? Enter N/A if the plan is not required to respond Yes to line 8b(1) on the Form 5500 Schedule MB. See Template 1. Does the uploaded file use the required filenaming convention?	Yes No N/A	N/A		N/A		Financial assistance spreadsheet (template)	Template 1 Plan Name
14.	Section C, Item (2)	If the plan was required to enter 10,000 or more participants on line 6f of the most recently filed Form 5500 (by the filing date of the initial application), does the application include a current listing of the 15 largest contributing employers (the employers with the largest contribution amounts) and the amount of contributions paid by each employer during the most recently completed plan year before the filing date of the initial application (without regard to whether a contribution was made on account of a year other than the most recently completed plan year)? If this information is required, it is required for the 15 largest contributing employers even if the employer's contribution is less than 5% of total contributions. Enter N/A if the plan is not required to provide this information. See Template 2. Does the uploaded file use the required filenaming convention?	Yes No N/A	N/A		N/A		Contributing employers	Template 2 Plan Name
15.	Section C, Item (3)	Does the application include historical plan information for the 2010 plan year through the plan year immediately preceding the date the plan's initial application was filed that separately identifies: total contributions, total contribution base units (including identification of the unit used), average contribution rates, and number of active participants at the beginning of each plan year? For the same period, does the application show all other sources of non-investment income such as withdrawal liability payments collected, reciprocity contributions (if applicable), additional contributions from the rehabilitation plan (if applicable), and other identifiable sources of contributions? See Template 3. Does the uploaded file use the required filenaming convention?	Yes No	Yes	Template_3_Local47_2ndApp	N/A		Historical Plan Financial Information (CBUs, contribution rates, contribution amounts, withdrawal liability payments)	Template 3 Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

Plan name:	PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)
EIN:	23-1996365
PN:	001
SFA Amount Requested:	\$8,334,265.00

Do NOT use this Application Checklist for a supplemented application. Instead use Application Checklist - Supplemented.

-----Filers provide responses here for each Checklist Item:-----

Unless otherwise specified:
YYYY = plan year
Plan Name = abbreviated plan name

Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #39. In addition, if required to provide information due to a "certain event" (see Addendum A of the SFA Filing Instructions), your application will be considered incomplete if No is entered as a Plan Response for any Checklist Items #40.a. through #49.b. If there is a merger event described in Addendum A, your application will also be considered incomplete if No is entered as a Plan Response for any Checklist Items #50 through #63.

Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
16.a.	Section C, Items (4)a., (4)e., and (4)f.	Does the application include the information used to determine the amount of SFA for the plan using the <u>basic method</u> described in § 4262.4(a)(1) based on a deterministic projection and using the actuarial assumptions as described in § 4262.4(e)? See Template 4A, <i>4A-4 SFA Details .4(a)(1)</i> sheet and Section C, Item (4) of the SFA Filing Instructions for more details on these requirements. Does the uploaded file use the required filenaming convention?	Yes No	Yes	Template_4A_Local47_2ndApp	N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 4A Plan Name
16.b.i.	Addendum D Section C, Item (4)a. - MPRA plan information A. Addendum D Section C, Item (4)e. - MPRA plan information A.	If the plan is a MPRA plan, does the application also include the information used to determine the amount of SFA for the plan using the <u>increasing assets method</u> described in § 4262.4(a)(2)(i) based on a deterministic projection and using the actuarial assumptions as described in § 4262.4(e)? See Template 4A, <i>4A-5 SFA Details .4(a)(2)(i)</i> sheet and Addendum D for more details on these requirements. Enter N/A if the plan is not a MPRA Plan.	Yes No N/A	N/A	N/A - included as part of Template 4A Plan Name	N/A		N/A	N/A - included in Template 4A Plan Name
16.b.ii.	Addendum D Section C, Item (4)f. - MPRA plan information A.	If the plan is a MPRA plan for which the requested amount of SFA is determined using the <u>increasing assets method</u> described in § 4262.4(a)(2)(i), does the application also explicitly identify the projected SFA exhaustion year based on the <u>increasing assets method</u> ? See Template 4A, <i>4A-5 SFA Details .4(a)(2)(i)</i> sheet and Addendum D. Enter N/A if the plan is not a MPRA Plan or if the requested amount of SFA is determined based on the present value method.	Yes No N/A	N/A	N/A - included as part of Template 4A Plan Name	N/A		N/A	N/A - included in Template 4A Plan Name
16.b.iii.	Addendum D Section C, Item (4)a. - MPRA plan information B Addendum D Section C, Item (4)e. (4)f., and (4)g. - MPRA plan information B.	If the plan is a MPRA plan for which the requested amount of SFA is determined using the <u>present value method</u> described in § 4262.4(a)(2)(ii), does the application also include the information for such plans as shown in Template 4B, including <i>4B-1 SFA Ben Pmts</i> sheet, <i>4B-2 SFA Details 4(a)(2)(ii)</i> sheet, and <i>4B-3 SFA Exhaustion</i> sheet? See Addendum D and Template 4B. Enter N/A if the plan is not a MPRA Plan or if the requested amount of SFA is determined based on the increasing assets method.	Yes No N/A	N/A		N/A		N/A	Template 4B Plan Name
16.c.	Section C, Items (4)b. and (4)c.	Does the application include identification of the non-SFA interest rate and the SFA interest rate, including details on how each was determined? See Template 4A, <i>4A-1 Interest Rates</i> sheet.	Yes No	Yes	N/A - included as part of Template 4A Plan Name	N/A		N/A	N/A - included in Template 4A Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

Plan name:

23-1996365

EIN:

001

PN:

SFA Amount Requested:

\$8,334,265.00

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
16.d.	Section C, Item (4).e.ii.	For each year in the SFA coverage period, does the application include the projected benefit payments (excluding make-up payments, if applicable), separately for current retirees and beneficiaries, current terminated vested participants not yet in pay status, current active participants, and new entrants? See Template 4A, 4A-2 SFA Ben Pmts sheet.	Yes No	Yes	N/A - included as part of Template 4A Plan Name	N/A		N/A	N/A - included in Template 4A Plan Name
16.e.	Section C, Item (4)e.iv. and (4)e.v.	For each year in the SFA coverage period, does the application include a breakdown of the administrative expenses between PBGC premiums and all other administrative expenses? Does the application include the projected total number of participants at the beginning of each plan year in the SFA coverage period? See Template 4A, 4A-3 SFA Pcount and Admin Exp sheet.	Yes No	Yes	N/A - included as part of Template 4A Plan Name	N/A		N/A	N/A - included in Template 4A Plan Name
17.a.	Section C, Item (5)	For a plan that is not a MPRA plan, does the application include a separate deterministic projection ("Baseline") in the same format as Checklist Items #16.a., #16.d., and #16.e. that shows the amount of SFA that would be determined using the basic method if the assumptions/methods used are the same as those used in the most recent actuarial certification of plan status completed before January 1, 2021 ("pre-2021 certification of plan status") excluding the plan's non-SFA interest rate and SFA interest rate, which should be the same as in Checklist Item #16.a.? See Section C, Item (5) of the SFA Filing Instructions for other potential exclusions from this requirement. If (a) the plan is a MPRA plan, or if (b) this item is not required for a plan that is not a MPRA plan, enter N/A. If entering N/A due to (b), add information in the Plan Comments to explain why this item is not required. Does the uploaded file use the required filenaming convention?	Yes No N/A	Yes	Template_5_Local47_2ndApp	N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 5A Plan Name
17.b.	Addendum D Section C, Item (5)	For a MPRA plan for which the requested amount of SFA is determined using the increasing assets method, does the application include a separate deterministic projection ("Baseline") in the same format as Checklist Items #16.b.i., #16.d., and #16.e. that shows the amount of SFA that would be determined using the increasing assets method if the assumptions/methods used are the same as those used in the most recent actuarial certification of plan status completed before January 1, 2021 ("pre-2021 certification of plan status") excluding the plan's non-SFA interest rate and SFA interest rate, which should be the same as used in Checklist Item #16.b.i.? See Section C, Item (5) of the SFA Filing Instructions for other potential exclusions from this requirement. Also see Addendum D. If the plan is (a) not a MPRA plan, (b) a MPRA plan using the present value method, or (c) is otherwise not required to provide this item, enter N/A. If entering N/A due to (c), add information in the Plan Comments to explain why this item is not required. Does the uploaded file use the required filenaming convention?	Yes No N/A	N/A		N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 5A Plan Name

APPLICATION CHECKLIST

Plan name:

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)

EIN:

23-1996365

PN:

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SFA Amount Requested:

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
17.c.	Addendum D Section C, Item (5)	For a MPRA plan for which the requested amount of SFA is determined using the <u>present value method</u> , does the application include a separate deterministic projection ("Baseline") in the same format as Checklist Item #16.b.iii. that shows the amount of SFA that would be determined using the <u>present value method</u> if the assumptions used/methods are the same as those used in the most recent actuarial certification of plan status completed before January 1, 2021 ("pre-2021 certification of plan status") excluding the plan's SFA interest rate which should be the same as used in Checklist Item #16.b.iii. See Section C, Item (5) of the SFA Filing Instructions for other potential exclusions from this requirement. Also see Addendum D. If the plan is (a) not a MPRA plan, (b) a MPRA plan using the increasing assets method, or (c) is otherwise not required to provide this item, enter N/A. If entering N/A due to (c), add information in the Plan Comments to explain why this item is not required. Has this document been uploaded using the required filenaming convention?	Yes No N/A	N/A		N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 5B Plan Name
18.a.	Section C, Item (6)	For a plan that is not a MPRA plan, does the application include a reconciliation of the change in the total amount of requested SFA due to each change in assumption/method from the Baseline to the requested SFA amount? Does the application include a deterministic projection and other information for each assumption/method change, in the same format as Checklist Item #16.a? Enter N/A if the plan is not required to provide Baseline information in Checklist Item #17.a. Enter N/A if the requested SFA amount in Checklist Item #16.a. is the same as the amount shown in the Baseline details of Checklist Item #17.a. See Section C, Item (6) of the SFA Filing Instructions for other potential exclusions from this requirement. If the plan is a MPRA plan, enter N/A. If the plan is otherwise not required to provide this item, enter N/A and provide an explanation in the Plan Comments. Does the uploaded file use the required filenaming convention?	Yes No N/A	Yes	Template_6A_Local47_2ndApp	N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 6A Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

APPLICATION CHECKLIST

Plan name:

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EIN:

23-1996365

PN:

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SFA Amount Requested:

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Plan Name = abbreviated plan name

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
18.b.	Addendum D Section C, Item (6)	For a MPRA plan for which the requested amount of SFA is based on the <u>increasing assets method</u> , does the application include a reconciliation of the change in the total amount of requested SFA using the <u>increasing assets method</u> due to each change in assumption/method from the Baseline to the requested SFA amount? Does the application include a deterministic projection and other information for each assumption/method change, in the same format as Checklist Item #16.b.i.? Enter N/A if the plan is not required to provide Baseline information in Checklist Item #17.b. Enter N/A if the requested SFA amount in Checklist Item #16.b.i. is the same as the amount shown in the Baseline details of Checklist Item #17.b. See Addendum D. See Section C, Item (6) of the SFA Filing Instructions for other potential exclusions from this requirement, and enter N/A if this item is not otherwise required. If the plan is (a) not a MPRA plan, (b) a MPRA plan using the present value method, or (c) is otherwise not required to provide this item, enter N/A. If entering N/A due to (c), add information in the Plan Comments to explain why this item is not required. Does the uploaded file use the required filenaming convention?	Yes No N/A	N/A		N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 6A Plan Name
18.c.	Addendum D Section C, Item (6)	For a MPRA plan for which the requested amount of SFA is based on the <u>present value method</u> , does the application include a reconciliation of the change in the total amount of requested SFA using the <u>present value method</u> due to each change in assumption/method from Baseline to the requested SFA amount? Does the application include a deterministic projection and other information for each assumption/method change, in the same format as Checklist Item #16.b.iii.? See Section C, Item (6) of the SFA Filing Instructions for other potential exclusions from this requirement. Also see Addendum D. If the plan is (a) not a MPRA plan, (b) a MPRA plan using the increasing assets method, or (c) is otherwise not required to provide this item, enter N/A. If entering N/A due to (c), add information in the Plan Comments to explain why this item is not required. Has this document been uploaded using the required filenaming convention?	Yes No N/A	N/A		N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 6B Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

APPLICATION CHECKLIST

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EIN:

23-1996365

PN:

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SFA Amount Requested:

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
19.a.	Section C, Item (7)a.	For plans eligible for SFA under § 4262.3(a)(1) or § 4262.3(a)(3), does the application include a table identifying which assumptions/methods used in determining the plan's eligibility for SFA differ from those used in the pre-2021 certification of plan status, and does that table include brief explanations as to why using those assumptions/methods is no longer reasonable and why the changed assumptions/methods are reasonable (an abbreviated version of information provided in Checklist Item #28.a.)? Enter N/A if the plan is eligible for SFA under § 4262.3(a)(2) or § 4262.3(a)(4) or if the plan is eligible based on a certification of plan status completed before 1/1/2021. Also enter N/A if the plan is eligible based on a certification of plan status completed after 12/31/2020 but that reflects the same assumptions as those in the pre-2021 certification of plan status. See Template 7, 7a Assump Changes for Elig sheet. Does the uploaded file include both Checklist Items #19.a. and #19.b., and does it use the required filenaming convention?	Yes No N/A	N/A		N/A		Financial assistance spreadsheet (template)	Template 7 Plan Name.
19.b.	Section C, Item (7)b.	Does the application include a table identifying which assumptions/methods used to determine the requested SFA differ from those used in the pre-2021 certification of plan status (except the interest rates used to determine SFA)? Does this item include brief explanations as to why using those original assumptions/methods is no longer reasonable and why the changed assumptions/methods are reasonable? If a changed assumption is an extension of the CBU assumption or the administrative expenses assumption as described in Paragraph A “Adoption of assumptions not previously factored into pre-2021 certification of plan status” of Section III, Acceptable Assumption Changes of PBGC’s SFA assumptions guidance, does the application state so? This should be an abbreviated version of information provided in Checklist Item #28.b. See Template 7, 7b Assump Changes for Amount sheet. Does the uploaded file include both Checklist Items #19.a. and #19.b., and does it use the required filenaming convention?	Yes No	Yes	Template_7_Local47_2ndApp	N/A		Financial assistance spreadsheet (template)	Template 7 Plan Name
20.a.	Section C, Item (8)	Does the application include details of the projected contributions and withdrawal liability payments used to calculate the requested SFA amount, including total contributions, contribution base units (including identification of base unit used), average contribution rate(s), reciprocity contributions (if applicable), additional contributions from the rehabilitation plan (if applicable), and any other identifiable contribution streams? See Template 8.	Yes No	Yes	Template_8_Local47_2ndApp	N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 8 Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

Plan name:

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)

EIN:

23-1996365

PN:

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SFA Amount Requested:

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
20.b.	Section C, Item (9)	Does the application separately show the amounts of projected withdrawal liability payments for employers that are currently withdrawn as of the date the initial application is filed, and assumed future withdrawals? Does the application also provide the projected number of active participants at the beginning of each plan year? See Template 8.	Yes No	Yes	N/A - include as part of Checklist Item #20.a.	N/A		N/A	N/A - included in <i>Template 8 Plan Name</i>
21.	Section C, Item (10)	Does the application provide a table identifying and describing all assumptions and methods used in i) the pre-2021 certification of plan status, ii) the “Baseline” projection in Section C Item (5), and iii) the determination of the amount of SFA in Section C Item (4)? Does the table state if each changed assumption falls under Section III, Acceptable Assumption Changes, or Section IV, Generally Accepted Assumption Changes, in PBGC’s SFA assumptions guidance, or if it should be considered an “Other Change”? Does the uploaded file use the required filenaming convention?	Yes No	Yes	Template_10_Local47_2ndApp	N/A		Financial assistance spreadsheet (template)	Template 10 Plan Name
22.	Section D	Was the application signed and dated by an authorized trustee who is a current member of the board of trustees or another authorized representative of the plan sponsor and include the printed name and title of the signer?	Yes No	Yes	SFA_App_Local47_2ndApp.pdf	Page 2		Financial Assistance Application	SFA App Plan Name
23.a.	Section D, Item (1)	For a plan that is not a MPRA plan, does the application include an optional cover letter? Enter N/A if the plan is a MPRA plan, or if the plan is not a MPRA plan and did not include an optional cover letter.	Yes N/A	Yes	N/A - included as part of SFA App Plan Name	Page 1		N/A	N/A - included as part of SFA App Plan Name
23.b.		For a plan that is a MPRA plan, does the application include a cover letter? Does the cover letter identify the calculation method (basic method, increasing assets method, or present value method) that provides the greatest amount of SFA? For a MPRA plan with a partition, does the cover letter include a statement that the plan has been partitioned under section 4233 of ERISA? Enter N/A if the plan is not a MPRA plan.	Yes No N/A	N/A	N/A - included as part of SFA App Plan Name			N/A	N/A - included as part of SFA App Plan Name
24.	Section D, Item (2)	Does the application include the name, address, email, and telephone number of the plan sponsor, plan sponsor's authorized representative, and any other authorized representatives?	Yes No	Yes	N/A - included as part of SFA App Plan Name	Page 3		N/A	N/A - included as part of SFA App Plan Name
25.	Section D, Item (3)	Does the application identify the eligibility criteria in § 4262.3 that qualifies the plan as eligible to receive SFA, and include the requested information for each item that is applicable, as described in Section D, Item (3) of the SFA Filing Instructions?	Yes No	Yes	N/A - included as part of SFA App Plan Name	Page 4	The Plan is eligible for SFA under 29 CFR § 4262.3(a)(1) as it was certified to be in Critical and Declining status as of May 1, 2020.	N/A	N/A - included as part of SFA App Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

APPLICATION CHECKLIST

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Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
26.a.	Section D, Item (4)	If the plan's application is submitted on or before March 11, 2023, does the application identify the plan's priority group (see § 4262.10(d)(2))? Enter N/A if the plan's application is submitted after March 11, 2023.	Yes No N/A	N/A	N/A - included as part of SFA App Plan Name		Briefly identify here the priority group, if applicable.	N/A	N/A - included as part of SFA App Plan Name
26.b.		If the plan is submitting an emergency application under § 4262.10(f), is the application identified as an emergency application with the applicable emergency criteria identified? Enter N/A if the plan is not submitting an emergency application.	Yes No N/A	N/A	N/A - included as part of SFA App Plan Name		Briefly identify the emergency criteria, if applicable.	N/A	N/A - included as part of SFA App Plan Name
27.	Section D, Item (5)	Does the application include a detailed narrative description of the development of the assumed future contributions and assumed future withdrawal liability payments used in the basic method (and in the increasing assets method for a MPRA plan)?	Yes No	Yes	N/A - included as part of SFA App Plan Name	Page 5		N/A	N/A - included as part of SFA App Plan Name
28.a.	Section D, Item (6)a.	For plans eligible for SFA under § 4262.3(a)(1) or § 4262.3(a)(3), does the application identify which assumptions/methods (if any) used in showing the plan's eligibility for SFA differ from those used in the most recent certification of plan status completed before 1/1/2021? If there are any assumption/method changes, does the application include detailed explanations and supporting rationale and information as to why using the identified assumptions/methods is no longer reasonable and why the changed assumptions/methods are reasonable? Enter N/A if the plan is not eligible under § 4262.3(a)(1) or § 4262.3(a)(3). Enter N/A if there are no such assumption changes.	Yes No N/A	Yes	N/A - included as part of SFA App Plan Name	Pages 6-12		N/A	N/A - included as part of SFA App Plan Name
28.b.	Section D, Item (6)b.	Does the application identify which assumptions/methods (if any) used to determine the requested SFA amount differ from those used in the most recent certification of plan status completed before 1/1/2021 (excluding the plan's non-SFA and SFA interest rates, which must be the same as the interest rates required by § 4262.4(e)(1) and (2)))? If there are any assumption/method changes, does the application include detailed explanations and supporting rationale and information as to why using the identified original assumptions/methods is no longer reasonable and why the changed assumptions/methods are reasonable? Does the application state if the changed assumption is an extension of the CBU assumption or the administrative expenses assumption as described in Paragraph A “Adoption of assumptions not previously factored into pre-2021 certification of plan status” of Section III, Acceptable Assumption Changes of PBGC’s SFA Assumptions?	Yes No	Yes	N/A - included as part of SFA App Plan Name	Pages 6-12		N/A	N/A - included as part of SFA App Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

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APPLICATION CHECKLIST

Plan name:	PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)
EIN:	23-1996365
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SFA Amount Requested:	\$8,334,265.00

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
28.c.	Section D, Item (6)	If the mortality assumption uses a plan-specific mortality table or a plan-specific adjustment to a standard mortality table (regardless of if the mortality assumption is changed or unchanged from that used in the most recent certification of plan status completed before 1/1/2021), is supporting information provided that documents the methodology used and the rationale for selection of the methodology used to develop the plan-specific rates, as well as detailed information showing the determination of plan credibility and plan experience? Enter N/A if the mortality assumption does not use a plan-specific mortality table or a plan-specific adjustment to a standard mortality table for eligibility or for determining the SFA amount.	Yes No N/A	N/A	N/A - included as part of SFA App Plan Name			N/A	N/A - included as part of SFA App Plan Name
29.a.	Section D, Item (7)	Does the application include, for an eligible plan that implemented a suspension of benefits under section 305(e)(9) or section 4245(a) of ERISA, a narrative description of how the plan will reinstate the benefits that were previously suspended and a proposed schedule of payments (equal to the amount of benefits previously suspended) to participants and beneficiaries? Enter N/A for a plan that has not implemented a suspension of benefits.	Yes No N/A	N/A	N/A - included as part of SFA App Plan Name			N/A	N/A - included as part of SFA App Plan Name
29.b.	Section D, Item (7)	If Yes was entered for Checklist Item #29.a., does the proposed schedule show the yearly aggregate amount and timing of such payments, and is it prepared assuming the effective date for reinstatement is the day after the SFA measurement date? Enter N/A for a plan that entered N/A for Checklist Item #29.a.	Yes No N/A	N/A	N/A - included as part of SFA App Plan Name			N/A	N/A - included as part of SFA App Plan Name
29.c.	Section D, Item (7)	If the plan restored benefits under 26 CFR 1.432(e)(9)-1(e)(3) before the SFA measurement date, does the proposed schedule reflect the amount and timing of payments of restored benefits and the effect of the restoration on the benefits remaining to be reinstated? Enter N/A for a plan that did not restore benefits under 26 CFR 1.432(e)(9)-1(e)(3) before the SFA measurement date. Also enter N/A for a plan that entered N/A for Checklist Items #29.a. and #29.b.	Yes No N/A	N/A	N/A - included as part of SFA App Plan Name			N/A	N/A - included as part of SFA App Plan Name
30.a.	Section E, Item (1)	Does the application include a fully completed Application Checklist, including the required information at the top of the Application Checklist (plan name, employer identification number (EIN), 3-digit plan number (PN), and SFA amount requested)?	Yes No	Yes	App_Checklist_Local47_2ndApp	N/A		Special Financial Assistance Checklist	App Checklist Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

Plan name:	PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)
EIN:	23-1996365
PN:	001
SFA Amount Requested:	\$8,334,265.00

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
30.b.	Section E, Item (1) - Addendum A	If the plan is required to provide information required by Addendum A of the SFA Filing Instructions (for "certain events"), are the additional Checklist Items #40.a. through #49.b. completed? Enter N/A if the plan is not required to submit the additional information described in Addendum A.	Yes No N/A	N/A	N/A	N/A		Special Financial Assistance Checklist	N/A
31.	Section E, Item (2)	If the plan claims SFA eligibility under § 4262.3(a)(1) of PBGC's SFA regulation based on a certification by the plan's enrolled actuary of plan status for SFA eligibility purposes completed on or after January 1, 2021, does the application include: (i) plan actuary's certification of plan status for SFA eligibility purposes for the specified year (and, if applicable, for each plan year after the plan year for which the pre-2021 zone certification was prepared and for the plan year immediately prior to the specified year)? (ii) for each certification in (i) above, does the application include all details and additional information described in Section B, Item (5) of the SFA Filing Instructions, including clear documentation of all assumptions, methods and census data used? (iii) for each certification in (i) above, does the application identify all assumptions and methods that are different from those used in the pre-2021 zone certification? Does the certification by the plan's enrolled actuary include clear indication of all assumptions and methods used including source of and date of participant data, measurement date, and a statement that the actuary is qualified to render the actuarial opinion? If the plan does not claim SFA eligibility under § 4262.3(a)(1) or claims SFA eligibility under § 4262.3(a)(1) using a zone certification completed before January 1, 2021, enter N/A. Is the information for this Checklist Item #31 contained in a single document and uploaded using the required filenaming convention?	Yes No N/A	N/A		N/A		Financial Assistance Application	SFA Elig Cert CD Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

Plan name:

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)

EIN:

23-1996365

PN:

001

SFA Amount Requested:

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
32.a.	Section E, Item (3)	If the plan claims SFA eligibility under § 4262.3(a)(3) of PBGC's SFA regulation based on a certification by the plan's enrolled actuary of plan status for SFA eligibility purposes completed on or after January 1, 2021, does the application include: (i) plan actuary's certification of plan status for SFA eligibility purposes for the specified year (and, if applicable, for each plan year after the plan year for which the pre-2021 zone certification was prepared and for the plan year immediately prior to the specified year)? (ii) for each certification in (i) above, does the application include all details and additional information described in Section B, Item (5) of the SFA Filing Instructions, including clear documentation of all assumptions, methods and census data used? (iii) for each certification in (i) above, does the application identify all assumptions and methods that are different from those used in the pre-2021 zone certification? Does the certification by the plan's enrolled actuary include clear indication of all assumptions and methods used including source of and date of participant data, measurement date, and a statement that the actuary is qualified to render the actuarial opinion? If the plan does not claim SFA eligibility under § 4262.3(a)(3) or claims SFA eligibility under § 4262.3(a)(3) using a zone certification completed before January 1, 2021, enter N/A. Is the information for Checklist Items #32.a. and #32.b. contained in a single document and uploaded using the required filenaming convention?		N/A		N/A		Financial Assistance Application	SFA Elig Cert C Plan Name
32.b.	Section E, Item (3)	If the plan claims SFA eligibility under § 4262.3(a)(3) of PBGC's SFA regulation, does the application include a certification from the plan's enrolled actuary that the plan qualifies for SFA based on the applicable certification of plan status for SFA eligibility purposes for the specified year, and by meeting the other requirements of § 4262.3(c) of PBGC's SFA regulation. Does the provided certification include: (i) identification of the specified year for each component of eligibility (certification of plan status for SFA eligibility purposes, modified funding percentage, and participant ratio) (ii) derivation of the modified funded percentage (iii) derivation of the participant ratio Does the certification identify what test(s) under section 305(b)(2) of ERISA is met for the specified year listed above? Does the certification identify all assumptions and methods (including supporting rationale, and where applicable, reliance on the plan sponsor) used to develop the withdrawal liability receivable that is utilized in the calculation of the modified funded percentage? Enter N/A if the plan does not claim SFA eligibility under §4262.3(a)(3).	Yes No N/A	N/A	N/A - included with SFA Elig Cert C Plan Name	N/A		Financial Assistance Application	N/A - included in SFA Elig Cert C Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

APPLICATION CHECKLIST

Plan name:

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)

EIN:

23-1996365

PN:

001

SFA Amount Requested:

\$8,334,265.00

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v20230727

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
33.	Section E, Item (4)	If the plan's application is submitted on or prior to March 11, 2023, does the application include a certification from the plan's enrolled actuary that the plan is eligible for priority status, with specific identification of the applicable priority group? This item is not required (enter N/A) if the plan is insolvent, has implemented a MPRA suspension as of 3/11/2021, is in critical and declining status and had 350,000+ participants, or is listed on PBGC's website at www.pbgc.gov as being in priority group 6. See § 4262.10(d). Does the certification by the plan's enrolled actuary include clear indication of all assumptions and methods used including source of and date of participant data, measurement date, and a statement that the actuary is qualified to render the actuarial opinion? Is the filename uploaded using the required filenaming convention?	Yes No N/A	N/A		N/A		Financial Assistance Application	PG Cert Plan Name
34.a.		Does the application include the certification by the plan's enrolled actuary that the requested amount of SFA is the amount to which the plan is entitled under section 4262(j)(1) of ERISA and § 4262.4 of PBGC's SFA regulation? Does this certification include: (i) plan actuary's certification that identifies the requested amount of SFA and certifies that this is the amount to which the plan is entitled? (ii) clear indication of all assumptions and methods used including source of and date of participant data, measurement date, and a statement that the actuary is qualified to render the actuarial opinion? Is the information in Checklist #34.a. combined with #34.b. (if applicable) as a single document, and uploaded using the required filenaming convention?	Yes No	Yes	SFA_Amount_Cert_Local47_2ndApp.pdf	N/A		Financial Assistance Application	SFA Amount Cert Plan Name
34.b.	Section E, Item (5)	If the plan is a MPRA plan, does the certification by the plan's enrolled actuary identify the amount of SFA determined under the basic method described in § 4262.4(a)(1) and the amount determined under the increasing assets method in § 4262.4(a)(2)(i)? If the amount of SFA determined under the “present value method” described in § 4262.4(a)(2)(ii) is not the greatest amount of SFA under § 4262.4(a)(2), does the certification state as such? If the amount of SFA determined under the “present value method” described in § 4262.4(a)(2)(ii) is the greatest amount of SFA under § 4262.4(a)(2), does the certification identify that amount? Enter N/A if the plan is not a MPRA plan.	Yes No N/A	N/A	N/A - included with SFA Amount Cert Plan Name	N/A		N/A - included in SFA Amount Cert Plan Name	N/A - included in SFA Amount Cert Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

Plan name:	PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)
EIN:	23-1996365
PN:	001
SFA Amount Requested:	\$8,334,265.00

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
35.	Section E, Item (6)	Does the application include the plan sponsor's identification of the amount of fair market value of assets at the SFA measurement date and certification that this amount is accurate? Does the application also include: (i) information that substantiates the asset value and how it was developed (e.g., trust or account statements, specific details of any adjustments)? (ii) a reconciliation of the fair market value of assets from the date of the most recent audited plan financial statements to the SFA measurement date (showing beginning and ending fair market value of assets for this period as well as the following items for the period: contributions, withdrawal liability payments, benefits paid, administrative expenses, and investment income)? With the exception of account statements and financial statements already provided as Checklist Items #8 and #9, is all information contained in a single document that is uploaded using the required filenaming convention?	Yes No	Yes		N/A	This information was provided previously as part of the initial application.	Financial Assistance Application	FMV Cert Plan Name
36.	Section E, Item (7)	Does the application include a copy of the executed plan amendment required by § 4262.6(e)(1) of PBGC's SFA regulation which (i) is signed by authorized trustee(s) of the plan and (ii) includes the plan compliance language in Section E, Item (7) of the SFA Filing Instructions?	Yes No	Yes		N/A	This information was provided previously as part of the initial application.	Pension plan documents, all versions available, and all amendments signed and dated	Compliance Amend Plan Name
37.	Section E, Item (8)	In the case of a plan that suspended benefits under section 305(e)(9) or section 4245 of ERISA, does the application include: (i) a copy of the proposed plan amendment(s) required by § 4262.6(e)(2) to reinstate suspended benefits and pay make-up payments? (ii) a certification by the plan sponsor that the proposed plan amendment(s) will be timely adopted? Is the certification signed by either all members of the plan's board of trustees or by one or more trustees duly authorized to sign the certification on behalf of the entire board (including, if applicable, documentation that substantiates the authorization of the signing trustees)? Enter N/A if the plan has not suspended benefits. Is all information included in a single document that is uploaded using the required filenaming convention?	Yes No N/A	N/A		N/A		Pension plan documents, all versions available, and all amendments signed and dated	Reinstatement Amend Plan Name
38.	Section E, Item (9)	In the case of a plan that was partitioned under section 4233 of ERISA, does the application include a copy of the executed plan amendment required by § 4262.9(c)(2)? Enter N/A if the plan was not partitioned. Is the document uploaded using the required filenaming convention?	Yes No N/A	N/A		N/A		Pension plan documents, all versions available, and all amendments signed and dated	Partition Amend Plan Name

APPLICATION CHECKLIST

Plan name:

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)

EIN:

23-1996365

PN:

001

SFA Amount Requested:

\$8,334,265.00

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
39.	Section E, Item (10)	Does the application include one or more copies of the penalties of perjury statement (see Section E, Item (10) of the SFA Filing Instructions) that (a) are signed by an authorized trustee who is a current member of the board of trustees, and (b) includes the trustee's printed name and title. Is all such information included in a single document and uploaded using the required filenaming convention?	Yes No	Yes	Penalty_Local47_2ndApp.pdf	N/A		Financial Assistance Application	Penalty Plan Name
Additional Information for Certain Events under § 4262.4(f) - Applicable to Any Events in § 4262.4(f)(2) through (f)(4) and Any Mergers in § 4262.4(f)(1)(ii) NOTE: If the plan is not required to provided information described in Addendum A of the SFA Filing Instructions, the Plan Response should be left blank for the remaining Checklist Items.									
40.a.	Addendum A for Certain Events Section C, Item (4)	Does the application include an additional version of Checklist Item #16.a. (also including Checklist Items #16.c., #16.d., and #16.e.), that shows the determination of the SFA amount using the basic method described in § 4262.4(a)(1) as if any events had not occurred? See Template 4A.	Yes No			N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	For additional submission due to any event: <i>Template 4A Plan Name CE</i> . For an additional submission due to a merger, <i>Template 4A Plan Name Merged</i> , where "Plan Name Merged" is an abbreviated version of the plan name for the separate plan involved in the merger.
40.b.i.	Addendum A for Certain Events Section C, Item (4)	If the plan is a MPRA plan for which the requested amount of SFA is based on the <u>increasing assets method</u> described in § 4262.4(a)(2)(i), does the application also include an additional version of Checklist Item #16.b.i. that shows the determination of the SFA amount using the <u>increasing assets method</u> as if any events had not occurred? See Template 4A, sheet <i>4A-5 SFA Details .5(a)(2)(i)</i> . Enter N/A if the plan is not a MPRA Plan or if the plan is a MPRA plan for which the requested amount of SFA is based on the present value method.	Yes No N/A		N/A - included as part of file in Checklist Item #40.a.	N/A		N/A	N/A - included as part of file in Checklist Item #40.a.
40.b.ii.	Addendum A for Certain Events Section C, Item (4)	If the plan is a MPRA plan for which the requested amount of SFA is based on the <u>increasing assets method</u> described in § 4262.4(a)(2)(i), does the application also include an additional version of Checklist Item #16.b.ii. that explicitly identifies the projected SFA exhaustion year based on the <u>increasing assets method</u> ? See Template 4A, <i>4A-5 SFA Details .4(a)(2)(i)</i> sheet and Addendum D. Enter N/A if the plan is not a MPRA Plan or if the plan is a MPRA plan for which the requested amount of SFA is based on the present value method.	Yes No N/A			N/A		N/A	N/A - included as part of file in Checklist Item #40.a.

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

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EIN:	23-1996365
PN:	001
SFA Amount Requested:	\$8,334,265.00

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
40.b.iii.	Addendum A for Certain Events Section C, Item (4)	If the plan is a MPRA plan for which the requested amount of SFA is based on the <u>present value method</u> described in § 4262.4(a)(2)(ii), does the application also include an additional version of Checklist Item #16.b.iii. that shows the determination of the SFA amount using the <u>present value method</u> as if any events had not occurred? See Template 4B, sheet <i>4B-1 SFA Ben Pmts</i> , sheet <i>4B-2 SFA Details .A(a)(2)(ii)</i> , and sheet <i>4B-3 SFA Exhaustion</i> . Enter N/A if the plan is not a MPRA Plan or if the plan is a MPRA plan for which the requested amount of SFA is based on the increasing assets method.	Yes No N/A			N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	For additional submission due to any event: <i>Template 4B Plan Name CE</i> . For an additional submission due to a merger, <i>Template 4B Plan Name Merged</i> , where "Plan Name Merged" is an abbreviated version of the plan name for the separate plan involved in the merger.
41.	Addendum A for Certain Events Section C, Item (4)	For any merger, does the application show the SFA determination for this plan <u>and for each plan merged into this plan</u> (each of these determined as if they were still separate plans)? See Template 4A for a non-MPRA plan using the basic method, and for a MPRA plan using the increasing assets method. See Template 4B for a MPRA Plan using the present value method. Enter N/A if the plan has not experienced a merger.	Yes No N/A			N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	For an additional submission due to a merger, <i>Template 4A (or Template 4B) Plan Name Merged</i> , where "Plan Name Merged" is an abbreviated version of the plan name for the separate plan involved in the merger.
42.a.	Addendum A for Certain Events Section D	Does the application include a narrative description of any event and any merger, including relevant supporting documents which may include plan amendments, collective bargaining agreements, actuarial certifications related to a transfer or merger, or other relevant materials?	Yes No		N/A - included as part of SFA App Plan Name		For each Checklist Item #42.a. through #45.b., identify the relevant page number(s) within the single document.	Financial Assistance Application	<i>SFA App Plan Name</i>
42.b.	Addendum A for Certain Events Section D	For a transfer or merger event, does the application include identifying information for all plans involved including plan name, EIN and plan number, and the date of the transfer or merger?	Yes No		N/A - included as part of SFA App Plan Name			Financial Assistance Application	N/A - included as part of SFA App Plan Name
43.a.	Addendum A for Certain Events Section D	Does the narrative description in the application identify the amount of SFA reflecting any event, the amount of SFA determined as if the event had not occurred, and confirmation that the requested SFA is no greater than the amount that would have been determined if the event had not occurred, unless the event is a contribution rate reduction and such event lessens the risk of loss to plan participants and beneficiaries?	Yes No		N/A - included as part of SFA App Plan Name			Financial Assistance Application	N/A - included as part of SFA App Plan Name
43.b.	Addendum A for Certain Events Section D	For a merger, is the determination of SFA as if the event had not occurred equal to the sum of the amount that would be determined for this plan and each plan merged into this plan (each as if they were still separate plans)? Enter N/A if the event described in Checklist Item #42.a. was not a merger.	Yes No N/A		N/A - included as part of SFA App Plan Name			Financial Assistance Application	N/A - included as part of SFA App Plan Name

Application to PBGC for Approval of Special Financial Assistance (SFA)

APPLICATION CHECKLIST

Plan name:

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)

EIN:

23-1996365

PN:

001

SFA Amount Requested:

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Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
44.a.	Addendum A for Certain Events Section D	Does the application include an additional version of Checklist Item #25 that shows the determination of SFA eligibility as if any events had not occurred?	Yes No		N/A - included as part of SFA App Plan Name			Financial Assistance Application	N/A - included as part of SFA App Plan Name
44.b.	Addendum A for Certain Events Section D	For any merger, does this item include demonstrations of SFA eligibility for this plan and for each plan merged into this plan (each of these determined as if they were still separate plans)? Enter N/A if the event described in Checklist Item #42.a. was not a merger.	Yes No N/A		N/A - included as part of SFA App Plan Name			Financial Assistance Application	N/A - included as part of SFA App Plan Name
45.a.	Addendum A for Certain Events Section D	If the event is a contribution rate reduction and the amount of requested SFA is not limited to the amount of SFA determined as if the event had not occurred, does the application include a detailed demonstration that shows that the event lessens the risk of loss to plan participants and beneficiaries? Enter N/A if the event is not a contribution rate reduction, or if the event is a contribution rate reduction but the requested SFA is limited to the amount of SFA determined as if the event had not occurred.	Yes No N/A		N/A - included as part of SFA App Plan Name			Financial Assistance Application	N/A - included as part of SFA App Plan Name
45.b.	Addendum A for Certain Events Section D	Does the demonstration in Checklist Item #45.a. also identify all assumptions used, supporting rationale for the assumptions and other relevant information? Enter N/A if the plan entered N/A for Checklist Item #45.a.	Yes No N/A		N/A - included as part of SFA App Plan Name			Financial Assistance Application	N/A - included as part of SFA App Plan Name
46.a.	Addendum A for Certain Events Section E, Items (2) and (3)	Does the application include an additional certification from the plan's enrolled actuary with respect to the plan's SFA eligibility but with eligibility determined as if any events had not occurred? This should be in the format of Checklist Item #31 if the SFA eligibility is based on the plan status of critical and declining using a zone certification completed on or after January 1, 2021. This should be in the format of Checklist Items #32.a. and #32.b. if the SFA eligibility is based on the plan status of critical using a zone certification completed on or after January 1, 2021. If the above SFA eligibility is not based on § 4262.3(a)(1) or § 4262.3(a)(3) or is based on a zone certification completed prior to January 1, 2021, enter N/A. Is all relevant information contained in a single document and uploaded using the required filenaming convention?	Yes No N/A			N/A		Financial Assistance Application	SFA Elig Cert Plan Name CE

Application to PBGC for Approval of Special Financial Assistance (SFA)

APPLICATION CHECKLIST

Plan name:

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)

EIN:

23-1996365

PN:

001

SFA Amount Requested:

\$8,334,265.00

Do NOT use this Application Checklist for a supplemented application. Instead use Application Checklist - Supplemented.

v20230727

Unless otherwise specified:
YYYY = plan year
Plan Name = abbreviated plan name

-----Filers provide responses here for each Checklist Item:-----

Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #39. In addition, if required to provide information due to a "certain event" (see Addendum A of the SFA Filing Instructions), your application will be considered incomplete if No is entered as a Plan Response for any Checklist Items #40.a. through #49.b. If there is a merger event described in Addendum A, your application will also be considered incomplete if No is entered as a Plan Response for any Checklist Items #50 through #63.

Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
46.b.	Addendum A for Certain Events Section E, Items (2) and (3)	For any merger, does the application include additional certifications of the SFA eligibility for this plan and for each plan merged into this plan (each of these determined as if they were still separate plans)? If the above SFA eligibility is not based on § 4262.3(a)(1) or § 4262.3(a)(3) or is based on a zone certification completed prior to January 1, 2021, enter N/A. Enter N/A if the event described in Checklist Item #42.a. was not a merger.	Yes No N/A			N/A		Financial Assistance Application	SFA Elig Cert Plan Name Merged CE "Plan Name Merged" is an abbreviated version of the plan name for the separate plan involved in the merger.
47.a.	Addendum A for Certain Events Section E, Item (5)	Does the application include an additional certification from the plan's enrolled actuary with respect to the plan's SFA amount (in the format of Checklist Item #34.a.), but with the SFA amount determined as if any events had not occurred?	Yes No			N/A		Financial Assistance Application	SFA Amount Cert Plan Name CE
47.b.	Addendum A for Certain Events Section E, Item (5)	If the plan is a MPRA plan, does the certification in Checklist Item #46.a. identify the amount of SFA determined under the basic method described in § 4262.4(a)(1) and the amount determined under the increasing assets method in § 4262.4(a)(2)(i)? If the amount of SFA determined under the “present value method” described in § 4262.4(a)(2)(ii) is not the greatest amount of SFA under § 4262.4(a)(2), does the certification state as such? If the amount of SFA determined under the “present value method” described in § 4262.4(a)(2)(ii) is the greatest amount of SFA under § 4262.4(a)(2), does the certification identify that amount? Enter N/A if the plan is not a MPRA plan.	Yes No N/A		N/A - included in SFA Amount Cert Plan Name CE	N/A		N/A - included in SFA Amount Cert Plan Name	N/A - included in SFA Amount Cert Plan Name CE
47.c.	Addendum A for Certain Events Section E, Item (5)	Does the certification in Checklist Items #47.a. and #47.b. (if applicable) clearly identify all assumptions and methods used, sources of participant data and census data, and other relevant information?	Yes No		N/A - included in SFA Amount Cert Plan Name CE	N/A		N/A - included in SFA Amount Cert Plan Name	N/A - included in SFA Amount Cert Plan Name CE
48.a.	Addendum A for Certain Events Section E, Item (5)	For any merger, does the application include additional certifications of the SFA amount determined for this plan and for each plan merged into this plan (each of these determined as if they were still separate plans) ? Enter N/A if the event described in Checklist Item #42.a. was not a merger.	Yes No N/A			N/A		Financial Assistance Application	SFA Amount Cert Plan Name Merged CE "Plan Name Merged" is an abbreviated version of the plan name for the separate plan involved in the merger.

APPLICATION CHECKLIST

Plan name:

PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)

EIN:

23-1996365

PN:

001

SFA Amount Requested:

\$8,334,265.00

Do NOT use this Application Checklist for a supplemented application. Instead use Application Checklist - Supplemented.

-----Filers provide responses here for each Checklist Item:-----

Unless otherwise specified:
YYYY = plan year
Plan Name = abbreviated plan name

Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #39. In addition, if required to provide information due to a "certain event" (see Addendum A of the SFA Filing Instructions), your application will be considered incomplete if No is entered as a Plan Response for any Checklist Items #40.a. through #49.b. If there is a merger event described in Addendum A, your application will also be considered incomplete if No is entered as a Plan Response for any Checklist Items #50 through #63.

Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
48.b.	Addendum A for Certain Events Section E, Item (5)	For any merger, do the certifications clearly identify all assumptions and methods used, sources of participant data and census data, and other relevant information? Enter N/A if the event described in Checklist Item #42.a. was not a merger.	Yes No N/A		N/A - included in SFA Amount Cert Plan Name CE	N/A		N/A - included in SFA Amount Cert Plan Name CE	N/A - included in SFA Amount Cert Plan Name CE
49.a.	Addendum A for Certain Events Section E	If the event is a contribution rate reduction and the amount of requested SFA is not limited to the amount of SFA determined as if the event had not occurred, does the application include a certification from the plan's enrolled actuary (or, if appropriate, from the plan sponsor) with respect to the demonstration to support a finding that the event lessens the risk of loss to plan participants and beneficiaries? Enter N/A if the event is not a contribution rate reduction, or if the event is a contribution rate reduction but the requested SFA is limited to the amount of SFA determined as if the event had not occurred.	Yes No N/A			N/A		Financial Assistance Application	<i>Cont Rate Cert Plan Name CE</i>
49.b.	Addendum A for Certain Events Section E	Does the demonstration in Checklist Item #48.a. also identify all assumptions used, supporting rationale for the assumptions and other relevant information? Enter N/A if the event is not a contribution rate reduction, or if the event is a contribution rate reduction but the requested SFA is limited to the amount of SFA determined as if the event had not occurred.	Yes No N/A		N/A - included in Cont Rate Cert Plan Name CE	N/A		N/A - included in Cont Rate Cert Plan Name CE	N/A - included in Cont Rate Cert Plan Name CE

Additional Information for Certain Events under § 4262.4(f) - Applicable Only to Any Mergers in § 4262.4(f)(1)(ii)

Plans that have experienced mergers identified in § 4262.4(f)(1)(ii) must complete Checklist Items #50 through #63. If you are required to complete Checklist Items #50 through #63, your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #50 through #63. All other plans should not provide any responses for Checklist Items #50 through #63.

50.	Addendum A for Certain Events Section B, Item (1)a.	In addition to the information provided with Checklist Item #1, does the application also include similar plan documents and amendments for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)?	Yes No			N/A		Pension plan documents, all versions available, and all amendments signed and dated	N/A
51.	Addendum A for Certain Events Section B, Item (1)b.	In addition to the information provided with Checklist Item #2, does the application also include similar trust agreements and amendments for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)?	Yes No			N/A		Pension plan documents, all versions available, and all amendments signed and dated	N/A

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

Plan name:	PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)
EIN:	23-1996365
PN:	001
SFA Amount Requested:	\$8,334,265.00

Do NOT use this Application Checklist for a supplemented application. Instead use Application Checklist - Supplemented.

-----Filers provide responses here for each Checklist Item:-----

Unless otherwise specified:
YYYY = plan year
Plan Name = abbreviated plan name

Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #39. In addition, if required to provide information due to a "certain event" (see Addendum A of the SFA Filing Instructions), your application will be considered incomplete if No is entered as a Plan Response for any Checklist Items #40.a. through #49.b. If there is a merger event described in Addendum A, your application will also be considered incomplete if No is entered as a Plan Response for any Checklist Items #50 through #63.

Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
52.	Addendum A for Certain Events Section B, Item (1)c.	In addition to the information provided with Checklist Item #3, does the application also include the most recent IRS determination for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)? Enter N/A if the plan does not have a determination letter.	Yes No N/A			N/A		Pension plan documents, all versions available, and all amendments signed and dated	N/A
53.	Addendum A for Certain Events Section B, Item (2)	In addition to the information provided with Checklist Item #4, for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii), does the application include the actuarial valuation report for the 2018 plan year and each subsequent actuarial valuation report completed before the application filing date?	Yes No			N/A	Identify here how many reports are provided.	Most recent actuarial valuation for the plan	YYYYAVR Plan Name Merged, where "Plan Name Merged" is abbreviated version of the plan name for the plan merged into this plan.
54.	Addendum A for Certain Events Section B, Item (3)	In addition to the information provided with Checklist Items #5.a. and #5.b., does the application include similar rehabilitation plan information for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)?	Yes No			N/A		Rehabilitation plan (or funding improvement plan, if applicable)	N/A
55.	Addendum A for Certain Events Section B, Item (4)	In addition to the information provided with Checklist Item #6, does the application include similar Form 5500 information for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)?	Yes No			N/A		Latest annual return/report of employee benefit plan (Form 5500)	YYYYForm5500 Plan Name Merged, "Plan Name Merged" is abbreviated version of the plan name for the plan merged into this plan.
56.	Addendum A for Certain Events Section B, Item (5)	In addition to the information provided with Checklist Items #7.a., #7.b., and #7.c., does the application include similar certifications of plan status for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)?	Yes No			N/A	Identify how many zone certifications are provided.	Zone certification	YYYYZoneYYYYMMDD Plan Name Merged, where the first "YYYY" is the applicable plan year, and "YYYYMMDD" is the date the certification was prepared. "Plan Name Merged" is an abbreviated version of the plan name for the plan merged into this plan.
57.	Addendum A for Certain Events Section B, Item (6)	In addition to the information provided with Checklist Item #8, does the application include the most recent cash and investment account statements for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)?	Yes No			N/A		Bank/Asset statements for all cash and investment accounts	N/A
58.	Addendum A for Certain Events Section B, Item (7)	In addition to the information provided with Checklist Item #9, does the application include the most recent plan financial statement (audited, or unaudited if audited is not available) for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)?	Yes No			N/A		Plan's most recent financial statement (audited, or unaudited if audited not available)	N/A

Application to PBGC for Approval of Special Financial Assistance (SFA)

v20230727

APPLICATION CHECKLIST

Plan name:PA Local 47 Bricklayers and Allied Craftsmen Pension Plan (Local47)

EIN:23-1996365

PN:001

SFA Amount Requested:\$8,334,265.00

Do NOT use this Application Checklist for a supplemented application. Instead use Application Checklist - Supplemented.

-----Filers provide responses here for each Checklist Item:-----

Unless otherwise specified:
YYYY = plan year
Plan Name = abbreviated plan name

Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #39. In addition, if required to provide information due to a "certain event" (see Addendum A of the SFA Filing Instructions), your application will be considered incomplete if No is entered as a Plan Response for any Checklist Items #40.a. through #49.b. If there is a merger event described in Addendum A, your application will also be considered incomplete if No is entered as a Plan Response for any Checklist Items #50 through #63.

Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
59.	Addendum A for Certain Events Section B, Item (8)	In addition to the information provided with Checklist Item #10, does the application include all of the written policies and procedures governing the plan's determination, assessment, collection, settlement, and payment of withdrawal liability for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)? Are all such items included in a single document using the required filenaming convention?	Yes No			N/A		Pension plan documents, all versions available, and all amendments signed and dated	WDL Plan Name Merged , where "Plan Name Merged" is an abbreviated version of the plan name for the plan merged into this plan.
60.	Addendum A for Certain Events Section B, Item (9)	In addition to the information provided with Checklist Item #11, does the application include documentation of a death audit (with the information described in Checklist Item #11) for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)?	Yes No					Pension plan documents, all versions available, and all amendments signed and dated	Death Audit Plan Name Merged , where "Plan Name Merged" is an abbreviated version of the plan name for the plan merged into this plan.
61.	Addendum A for Certain Events Section C, Item (1)	In addition to the information provided with Checklist Item #13, does the application include the same information in the format of Template 1 for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)? Enter N/A if each plan that fully merged into this plan is not required to respond Yes to line 8b(1) on the most recently filed Form 5500 Schedule MB.	Yes No N/A					Financial assistance spreadsheet (template)	Template 1 Plan Name Merged , where "Plan Name Merged" is an abbreviated version of the plan name for the plan merged into this plan.
62.	Addendum A for Certain Events Section C, Item (2)	In addition to the information provided with Checklist Item #14, does the application include the same information in the format of Template 2 (if required based on the participant threshold) for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)? Enter N/A if each plan that merged into this plan has less than 10,000 participants on line 6f of the most recently filed Form 5500.	Yes No N/A					Contributing employers	Template 2 Plan Name Merged , where "Plan Name Merged" is an abbreviated version of the plan name fore the plan merged into this plan.
63.	Addendum A for Certain Events Section C, Item (3)	In addition to the information provided with Checklist Item #15, does the application include similar information in the format of Template 3 for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)?	Yes No					Historical Plan Financial Information (CBUs, contribution rates, contribution amounts, withdrawal liability payments)	Template 3 Plan Name Merged , where "Plan Name Merged" is an abbreviated version of the plan name for the plan merged into this plan.

Version Updates

Version	Date updated
V20220701p	07/01/2022

v20220701p

TEMPLATE 3
Historical Plan Information

File name: *Template 3 Plan Name* , where "Plan Name" is an abbreviated version of the plan name.
 For additional submission due to merger under § 4262.4(f)(1)(ii): *Template 3 Plan Name Merged* , where "Plan Name Merged" is an abbreviated version of the plan name for the separate plan involved in the merger.

v20220701p

Provide historical plan information for the 2010 plan year through the plan year immediately preceding the date the plan's initial application was filed that separately identifies: total contributions, total contribution base units (including identification of the base unit used (i.e., hourly, weekly)), average contribution rates, and number of active participants at the beginning of each plan year. Also show separately for each of the plan years in the same period all other sources of non-investment income, including, if applicable, withdrawal liability payments collected, reciprocity contributions (if applicable), additional contributions from the rehabilitation plan (if any), and other identifiable contribution streams.

If the sum of all contributions and withdrawal liabilities shown on this table does not equal the amount shown as contributions credited to the funding standard account on the plan year Schedule MB of Form 5500, include an explanation as a footnote to this table.

PLAN INFORMATION

Abbreviated Plan Name:	Local47
EIN:	23-1996365
PN:	001

Unit (e.g. hourly, weekly)	Hourly
----------------------------	--------

All Other Sources of Non-Investment Income

Plan Year (in order from oldest to most recent)											Number of Active Participants at Beginning of Plan Year
Plan Year Start Date	Plan Year End Date	Total Contributions*	Total Contribution Base Units	Average Contribution Rate	Reciprocity Contributions (if applicable)	Additional Rehab Plan Contributions (if applicable)	Other - Explain if Applicable	Withdrawal Liability Payments Collected			
2010	05/01/2010	04/30/2011	\$825,775	185,913	\$4.44	\$0	\$0	\$0	\$0	166	
2011	05/01/2011	04/30/2012	\$746,611	170,716	\$4.37	\$0	\$0	\$0	\$0	154	
2012	05/01/2012	04/30/2013	\$639,226	139,254	\$4.59	\$0	\$0	\$0	\$0	136	
2013	05/01/2013	04/30/2014	\$777,563	140,795	\$5.52	\$0	\$0	\$0	\$0	114	
2014	05/01/2014	04/30/2015	\$963,075	167,060	\$5.76	\$0	\$0	\$0	\$0	115	
2015	05/01/2015	04/30/2016	\$778,111	138,895	\$5.60	\$0	\$0	\$0	\$0	123	
2016	05/01/2016	04/30/2017	\$878,856	161,588	\$5.44	\$0	\$0	\$0	\$0	112	
2017	05/01/2017	04/30/2018	\$1,119,301	167,900	\$6.67	\$0	\$0	\$0	\$0	118	
2018	05/01/2018	04/30/2019	\$1,135,831	151,373	\$7.50	\$0	\$0	\$0	\$0	122	
2019	05/01/2019	04/30/2020	\$1,230,990	156,080	\$7.89	\$0	\$0	\$0	\$0	116	
2020	05/01/2020	04/30/2021	\$1,254,865	143,679	\$8.73	\$0	\$0	\$0	\$0	114	
2021	05/01/2021	04/30/2022	\$1,348,303	155,040	\$8.70	\$0	\$0	\$0	\$0	107	

* Total contributions shown here should be contributions based upon CBUs and should not include items separately shown in any columns under "All Other Sources of Non-Investment Income."

TEMPLATE 4A

v20221102p

SFA Determination - under the "basic method" for all plans, and under the "increasing assets method" for MPRA plans

File name: *Template 4A Plan Name*, where "Plan Name" is an abbreviated version of the plan name.

If submitting additional information due to a merger under § 4262.4(f)(1)(ii): *Template 4A Plan Name Merged*, where "Plan Name Merged" is an abbreviated version of the plan name for the separate plan involved in the merger.

If submitting additional information due to certain events with limitations under § 4262.4(f)(1)(i): *Template 4A Plan Name Add*, where "Plan Name" is an abbreviated version of the plan name.

If submitting a supplemented application under § 4262.4(g)(6): *Template 4A Supp Plan Name*, where "Plan Name" is an abbreviated version of the plan name.

Instructions for Section C, Item (4) of the Instructions for Filing Requirements for Multiemployer Plans Applying for Special Financial Assistance:

IFR filers submitting a supplemented application should see Addendum C for more information.

MPRA plans using the "increasing assets method" should see Addendum D for more information.

For all plans, provide information used to determine the amount of SFA under the "basic method" described in § 4262.4(a)(1).

For MPRA plans, also provide information used to determine the amount of SFA under the "increasing assets method" described in § 4262.4(a)(2)(i).

The information to be provided is:

NOTE: All items below are provided on Sheet '4A-4 SFA Details .4(a)(1)' unless otherwise indicated.

- a. The amount of SFA calculated using the "basic method", determined as a lump sum as of the SFA measurement date.
- b. Non-SFA interest rate required under § 4262.4(e)(1) of PBGC's SFA regulation, including supporting details on how it was determined.
[Sheet: 4A-1 Interest Rates]
- c. SFA interest rate required under § 4262.4(e)(2) of PBGC's SFA regulation, including supporting details on how it was determined.
[Sheet: 4A-1 Interest Rates]
- d. Fair market value of assets as of the SFA measurement date. This amount should include any assets at the SFA measurement date attributable to financial assistance received by the plan under section 4261 of ERISA, but should not reflect a payable for amounts owed to PBGC for all amounts of such financial assistance received by the plan.

e. For each plan year in the period beginning on the SFA measurement date and ending on the last day of the last plan year ending in 2051 (the "SFA coverage period"):

- i. Separately identify the projected amount of contributions, projected withdrawal liability payments reflecting a reasonable allowance for amounts considered uncollectible, and other payments expected to be made to the plan (excluding the amount of financial assistance under section 4261 of ERISA and SFA to be received by the plan).
- ii. Identify the benefit payments described in § 4262.4(b)(1) (including any benefits that were restored under 26 CFR 1.432(e)(9)-(1)(e)(3) and excluding the payments in e.iii. below), separately for current retirees and beneficiaries, current terminated vested participants not yet in pay status, current active participants, and new entrants.

[Sheet: 4A-2 SFA Ben Pmts]

Identify total benefit payments paid and expected to be paid from projected SFA assets separately from total benefit payments paid and expected to be paid from non-SFA assets after the projected SFA assets are fully exhausted.

- iii. Separately identify the make-up payments described in § 4262.4(b)(1) attributable to the reinstatement of benefits under § 4262.15 that were previously suspended through the SFA measurement date.

[Also see applicable examples in Section C, Item (4)e.iii. of the SFA instructions.]

- iv. Separately identify administrative expenses paid and expected to be paid (excluding the amount owed PBGC under section 4261 of ERISA) for premiums to PBGC and for all other administrative expenses.

[Sheet: 4A-3 SFA Pcount and Admin Exp]

Identify total administrative expenses paid and expected to be paid from projected SFA assets separately from total administrative expenses paid and expected to be paid from non-SFA assets after the projected SFA assets are fully exhausted.

- v. Provide the projected total participant count at the beginning of each year.

[Sheet: 4A-3 SFA Pcount and Admin Exp]

- vi. Provide the projected investment income earned by assets not attributable to SFA based on the non-SFA interest rate in b. above and the projected fair market value of non-SFA assets at the end of each plan year.

- vii. Provide the projected investment income earned by assets attributable to SFA based on the SFA interest rate in c. above (excluding investment returns for the plan year in which the sum of annual projected benefit payments and administrative expenses for the year exceeds the beginning-of-year projected SFA assets) and the projected fair market value of SFA assets at the end of each plan year.

f. The projected SFA exhaustion year. This is the first day of the plan year in which the sum of annual projected benefit payments and administrative expenses for the year exceeds the beginning-of-year projected SFA assets. Note this date is only required for the calculation method under which the requested amount of SFA is determined.

Additional instructions for each individual worksheet:

Sheet

4A-1 SFA Determination - non-SFA Interest Rate and SFA Interest Rate

See instructions on 4A-1 Interest Rates.

4A-2 SFA Determination - Benefit Payments for the "basic method" for all plans, and for the "increasing assets method" for MRPA plans

This sheet is not required for an IFR filer submitting a supplemented application under § 4262.4(g)(6) if the total projected benefit payments are the same as those used in the application approved under the interim final rule.

On this sheet, you will provide:

- Basic plan information (plan name, EIN/PN, SFA measurement date), and
- Year-by-year deterministic projection of benefit payments.

For each plan year in the period beginning on the SFA measurement date and ending on the last day of the last plan year ending in 2051 (the "SFA coverage period"), identify benefit payments described in § 4262.4(b)(1) for current retirees and beneficiaries, current terminated vested participants not yet in pay status, currently active participants, and new entrants. Projected benefit payments should be entered based on current participant status as of the SFA census date. On this Sheet 4A-2, show all benefit payments as positive amounts.

If the plan has suspended benefit payments under sections 305(e)(9) or 4245(a) of ERISA, the benefit payments in this Sheet 4A-2 projection should reflect prospective reinstatement of benefits assuming such reinstatements commence as of the SFA measurement date. If the plan restored or partially restored benefits under 26 CFR 1.432(e)(9)-1(e)(3) before the SFA measurement date, the benefit payments in this Sheet 4A-2 should reflect fully restored prospective benefits.

Make-up payments to be paid to restore previously suspended benefits should not be included in this Sheet 4A-2, and are separately shown in Sheet 4A-4.

Except for the first row in the projection exhibit, each row must include the full plan year of the indicated information up to the plan year ending in 2051. The first row in the projection period is for the period beginning on the SFA measurement date and ending on the last day of the plan year containing the SFA measurement date, so the first row may contain less than a full plan year of information. For all other periods, provide the full plan year of information up to the plan year ending in 2051.

4A-3 SFA Determination - Participant Count and Administrative Expenses for the "basic method" for all plans, and for the "increasing assets method" for MPRA plans

This sheet is not required for an IFR filer submitting a supplemented application under § 4262.4(g)(6).

On this sheet, you will provide:

- Basic plan information (plan name, EIN/PN, SFA measurement date), and
- Year-by-year deterministic projection of participant count and administrative expenses.

For each plan year in the period beginning on the SFA measurement date and ending on the last day of the last plan year ending in 2051 (the "SFA coverage period"), identify the projected total participant count at the beginning of each year, as well as administrative expenses, separately for premiums to PBGC and for all other administrative expenses. On this Sheet 4A-3, show all administrative expenses as positive amounts. Total expenses should match the amounts shown on 4A-4 and 4A-5.

Any amounts owed to PBGC for financial assistance under section 4261 of ERISA should not be included in this Sheet 4A-3.

Except for the first row in the projection exhibit, each row must include the full plan year of the indicated information up to the plan year ending in 2051. The first row in the projection period is for the period beginning on the SFA measurement date and ending on the last day of the plan year containing the SFA measurement date, so the first row may contain less than a full plan year of information. For all other periods, provide the full plan year of information up to the plan year ending in 2051.

4A-4 SFA Determination - Details for the "basic method" under § 4262.4(a)(1) for all plans

On this sheet, you will provide:

- Basic plan information (plan name, EIN/PN, SFA measurement date, non-SFA interest rate, SFA interest rate),
- MPRA plan status and, if applicable, certain MPRA information,
- Fair Market Value of Assets as of the SFA measurement date,
- SFA Amount as of the SFA measurement date calculated under the "basic method",
- Projected SFA exhaustion year (only if the requested amount of SFA is determined under the "basic method"), and
- Year-by-year deterministic projection.

For each plan year in the period beginning on the SFA measurement date and ending on the last day of the last plan year ending in 2051 (the "SFA coverage period"), provide each of the items requested in Columns (1) through (12). Show payments INTO the plan as positive amounts and payments OUT of the plan as negative amounts.

If the plan has suspended benefit payments under sections 305(e)(9) or 4245(a) of ERISA, Column (5) should show the make-up payments to be paid to restore the previously suspended benefits. These amounts should be determined as if such make-up payments are paid beginning as of the SFA measurement date. If the plan sponsor elects to pay these amounts as a lump sum, then the lump sum amount is assumed paid as of the SFA measurement date. If the plan sponsor elects to pay equal installments over 60 months, the first monthly payment is assumed paid on the first regular payment date on or after the SFA measurement date. See the examples in the SFA Instructions. If the make-up payments are paid over 60 months, each row in the projection should reflect the monthly payments for that period. The prospective reinstatement of suspended benefits is included in Column (4); Column (5) is only for make-up payments for past benefits that were suspended.

Except for the first row in the projection exhibit, each row must include the full plan year of the indicated information up to the plan year ending in 2051. The first row in the projection period is for the period beginning on the SFA measurement date and ending on the last day of the plan year containing the SFA measurement date, so the first row may contain less than a full plan year of information. For all other periods, provide the full plan year of information up to the plan year ending in 2051.

4A-5 SFA Determination - Details for the "increasing assets method" under § 4262.4(a)(2)(i) for MPRA plans

This sheet is to only be used by MPRA plans. For such plans, this sheet should be completed in addition to Sheet 4A-4.

On this sheet, you will provide:

- Basic plan information (plan name, EIN/PN, SFA measurement date, non-SFA interest rate, SFA interest rate),
- MPRA plan status, and if applicable, certain MPRA information,
- Fair Market Value of Assets as of the SFA measurement date,
- SFA Amount as of the SFA measurement date calculated under the "increasing assets method",
- Projected SFA exhaustion year (only if the requested amount of SFA is determined under the "increasing assets method"), and
- Year-by-year deterministic projection.

This sheet is identical to Sheet 4A-4, and the information in Columns (1) through (6) should be the same as that used in the "basic method" calculation in Sheet 4A-4. The SFA Amount as of the SFA Measurement Date will differ from that calculated in Sheet 4A-4, as it will be calculated in accordance with § 4262.4(a)(2)(i) as the lowest whole dollar amount (not less than \$0) for which, as of the last day of each plan year during the SFA coverage period, projected SFA assets and projected non-SFA assets are both greater than or equal to zero, and, as of the last day of the SFA coverage period, the sum of projected SFA assets and projected non-SFA assets is greater than the amount of such sum as of the last day of the immediately preceding plan year.

Version Updates (newest version at top)

Version	Date updated	
v20221102p	11/02/2022	Added clarifying instructions for 4A-2 and 4A-3
v20220802p	08/02/2022	Cosmetic changes to increase the size of some rows
v20220701p	07/01/2022	

TEMPLATE 4A - Sheet 4A-1

v20221102p

SFA Determination - non-SFA Interest Rate and SFA Interest Rate

Provide the non-SFA interest rate and SFA interest rate used, including supporting details on how they were determined.

PLAN INFORMATION

Abbreviated Plan Name:	Local47
EIN:	23-1996365
PN:	001
Initial Application Date:	07/01/2024
SFA Measurement Date:	12/31/2022
Last day of first plan year ending after the measurement date:	04/30/2023

For a plan other than a plan described in § 4262.4(g) (i.e., for a plan that has not filed an initial application under PBGC's interim final rule), the last day of the third calendar month immediately preceding the plan's initial application date.
For a plan described in § 4262.4(g) (i.e., for a plan that filed an initial application prior to publication of the final rule), the last day of the calendar quarter immediately preceding the plan's initial application date.

Non-SFA Interest Rate Used:	5.85%
SFA Interest Rate Used:	3.77%

Rate used in projection of non-SFA assets.

Rate used in projection of SFA assets.

Development of non-SFA interest rate and SFA interest rate:

Plan Interest Rate:	7.50%
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Interest rate used for the funding standard account projections in the plan's most recently completed certification of plan status before 1/1/2021.

Corresponding ERISA Section 303(h)(2)(C)(i), (ii), and (iii) rates
disregarding modifications made under clause (iv) of such section.

	Month Year	(i)	(ii)	(iii)
Month in which plan's initial application is filed, and corresponding segment rates (leave (i), (ii), and (iii) blank if the IRS Notice for this month has not yet been issued):	March 2023	2.50%	3.83%	4.06%
1 month preceding month in which plan's initial application is filed, and corresponding segment rates:	February 2023	2.31%	3.72%	4.00%
2 months preceding month in which plan's initial application is filed, and corresponding segment rates:	January 2023	2.13%	3.62%	3.93%
3 months preceding month in which plan's initial application is filed, and corresponding segment rates:	December 2022	1.95%	3.50%	3.85%

24-month average segment rates without regard to interest rate stabilization rules. These rates are issued by IRS each month. For example, the applicable segment rates for August 2021 are 1.13%, 2.70%, and 3.38%. Those rates were issued in [IRS Notice 21-50](#) on August 16, 2021 (see page 2 of notice under the heading "24-Month Average Segment Rates Without 25-Year Average Adjustment").

They are also available on IRS' [Funding Yield Curve Segment Rate Tables](#) web page (See Funding Table 3 under the heading "24-Month Average Segment Rates Not Adjusted").

Non-SFA Interest Rate Limit (lowest 3rd segment rate plus 200 basis points):	5.85%
--	-------

This amount is calculated based on the other information entered above.

Non-SFA Interest Rate Calculation (lesser of Plan Interest Rate and Non-SFA Interest Rate Limit):	5.85%
Non-SFA Interest Rate Match Check:	Match

This amount is calculated based on the other information entered above.

If the non-SFA Interest Rate Calculation is not equal to the non-SFA Interest Rate Used, provide explanation below.

SFA Interest Rate Limit (lowest average of the 3 segment rates plus 67 basis points):	3.77%
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This amount is calculated based on the other information entered.

SFA Interest Rate Calculation (lesser of Plan Interest Rate and SFA Interest Rate Limit):	3.77%
SFA Interest Rate Match Check:	Match

This amount is calculated based on the other information entered above.

If the SFA Interest Rate Calculation is not equal to the SFA Interest Rate Used, provide explanation below.

TEMPLATE 4A - Sheet 4A-2

v20221102p

SFA Determination - Benefit Payments for the "basic method" for all plans, and for the "increasing assets method" for MRPA plans

See Template 4A Instructions for Additional Instructions for Sheet 4A-2.

PLAN INFORMATION

Abbreviated Plan Name:	Local47
EIN:	23-1996365
PN:	001
SFA Measurement Date:	12/31/2022

On this Sheet, show all benefit payment amounts as positive amounts.

PROJECTED BENEFIT PAYMENTS for:

SFA Measurement Date / Plan Year Start Date	Plan Year End Date	Current Retirees and Beneficiaries in Pay Status	Current Terminated Vested Participants	Current Active Participants	New Entrants	Total
12/31/2022	04/30/2023	\$353,703	\$234,157	\$26,823	\$0	\$614,683
05/01/2023	04/30/2024	\$1,054,610	\$79,584	\$165,546	\$0	\$1,299,740
05/01/2024	04/30/2025	\$1,044,305	\$92,267	\$224,493	\$0	\$1,361,065
05/01/2025	04/30/2026	\$1,033,371	\$119,887	\$282,452	\$0	\$1,435,710
05/01/2026	04/30/2027	\$1,020,834	\$141,317	\$324,510	\$0	\$1,486,661
05/01/2027	04/30/2028	\$1,007,831	\$168,698	\$374,967	\$0	\$1,551,496
05/01/2028	04/30/2029	\$993,779	\$211,698	\$419,714	\$1,356	\$1,626,547
05/01/2029	04/30/2030	\$978,804	\$255,025	\$465,163	\$2,814	\$1,701,806
05/01/2030	04/30/2031	\$961,751	\$289,829	\$506,662	\$3,788	\$1,762,030
05/01/2031	04/30/2032	\$941,522	\$319,219	\$550,485	\$4,685	\$1,815,911
05/01/2032	04/30/2033	\$921,979	\$336,890	\$586,142	\$5,511	\$1,850,522
05/01/2033	04/30/2034	\$900,853	\$364,749	\$622,701	\$7,123	\$1,895,426
05/01/2034	04/30/2035	\$878,055	\$379,361	\$655,532	\$8,984	\$1,921,932
05/01/2035	04/30/2036	\$853,506	\$402,593	\$690,771	\$11,552	\$1,958,422
05/01/2036	04/30/2037	\$827,150	\$408,088	\$723,719	\$14,844	\$1,973,801
05/01/2037	04/30/2038	\$798,952	\$409,776	\$748,241	\$18,081	\$1,975,050
05/01/2038	04/30/2039	\$768,916	\$422,355	\$771,146	\$21,287	\$1,983,704
05/01/2039	04/30/2040	\$737,086	\$435,089	\$789,705	\$24,364	\$1,986,244
05/01/2040	04/30/2041	\$703,557	\$435,076	\$798,939	\$27,353	\$1,964,925
05/01/2041	04/30/2042	\$668,486	\$439,181	\$810,576	\$30,506	\$1,948,749
05/01/2042	04/30/2043	\$632,091	\$434,448	\$829,358	\$33,625	\$1,929,522
05/01/2043	04/30/2044	\$594,644	\$430,714	\$833,810	\$39,228	\$1,898,396
05/01/2044	04/30/2045	\$556,454	\$432,397	\$849,791	\$45,704	\$1,884,346
05/01/2045	04/30/2046	\$517,854	\$429,773	\$853,771	\$54,427	\$1,855,825
05/01/2046	04/30/2047	\$479,177	\$429,069	\$850,213	\$64,633	\$1,823,092
05/01/2047	04/30/2048	\$440,747	\$421,522	\$852,385	\$74,458	\$1,789,112
05/01/2048	04/30/2049	\$402,869	\$407,599	\$840,161	\$84,759	\$1,735,388
05/01/2049	04/30/2050	\$365,831	\$392,746	\$835,821	\$94,472	\$1,688,870
05/01/2050	04/30/2051	\$329,902	\$378,412	\$824,745	\$103,995	\$1,637,054

TEMPLATE 4A - Sheet 4A-3

v20221102p

SFA Determination - Participant Count and Administrative Expenses for the "basic method" for all plans, and for the "increasing assets method" for MPRA plans

See Template 4A Instructions for Additional Instructions for Sheet 4A-3.

PLAN INFORMATION

Abbreviated Plan Name:	Local47	
EIN:	23-1996365	
PN:	001	
SFA Measurement Date:	12/31/2022	

On this Sheet, show all administrative expense amounts as positive amounts.

PROJECTED ADMINISTRATIVE EXPENSES for:

SFA Measurement Date / Plan Year Start Date Plan Year End Date		Total Participant Count at Beginning of Plan Year	PBGC Premiums	Other	Total
12/31/2022	04/30/2023	300	\$0	\$40,304	\$40,304
05/01/2023	04/30/2024	305	\$10,675	\$142,818	\$153,493
05/01/2024	04/30/2025	309	\$11,139	\$184,915	\$196,054
05/01/2025	04/30/2026	312	\$11,585	\$109,504	\$121,089
05/01/2026	04/30/2027	314	\$12,007	\$112,789	\$124,796
05/01/2027	04/30/2028	316	\$12,447	\$116,173	\$128,620
05/01/2028	04/30/2029	320	\$12,982	\$119,658	\$132,640
05/01/2029	04/30/2030	322	\$13,456	\$123,248	\$136,704
05/01/2030	04/30/2031	325	\$13,988	\$126,945	\$140,933
05/01/2031	04/30/2032	328	\$17,056	\$130,753	\$147,809
05/01/2032	04/30/2033	329	\$17,621	\$134,676	\$152,297
05/01/2033	04/30/2034	331	\$18,261	\$138,716	\$156,977
05/01/2034	04/30/2035	332	\$18,868	\$142,877	\$161,745
05/01/2035	04/30/2036	333	\$19,490	\$147,163	\$166,653
05/01/2036	04/30/2037	334	\$20,137	\$151,578	\$171,715
05/01/2037	04/30/2038	335	\$20,804	\$156,125	\$176,929
05/01/2038	04/30/2039	335	\$21,427	\$160,809	\$182,236
05/01/2039	04/30/2040	335	\$22,070	\$165,633	\$187,703
05/01/2040	04/30/2041	333	\$22,597	\$170,602	\$193,199
05/01/2041	04/30/2042	331	\$23,137	\$175,720	\$198,857
05/01/2042	04/30/2043	328	\$23,616	\$180,992	\$204,608
05/01/2043	04/30/2044	327	\$24,250	\$186,422	\$210,672
05/01/2044	04/30/2045	325	\$24,824	\$192,015	\$216,839
05/01/2045	04/30/2046	322	\$25,332	\$197,775	\$223,107
05/01/2046	04/30/2047	320	\$25,930	\$203,708	\$229,638
05/01/2047	04/30/2048	317	\$26,457	\$209,819	\$236,276
05/01/2048	04/30/2049	314	\$26,991	\$216,114	\$243,105
05/01/2049	04/30/2050	310	\$27,447	\$222,597	\$250,044
05/01/2050	04/30/2051	307	\$27,998	\$229,275	\$245,558

TEMPLATE 4A - Sheet 4A-4

v20221102p

SFA Determination - Details for the "basic method" under § 4262.4(a)(1) for all plans

See Template 4A Instructions for Additional Instructions for Sheet 4A-4.
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PLAN INFORMATION

Abbreviated Plan Name:	Local47	
EIN:	23-1996365	Meets the definition of a MPRA plan described in § 4262.4(a)(3)?
PN:	001	
MPRA Plan?	No	
If a MPRA Plan, which method yields the greatest amount of SFA?		MPRA increasing assets method described in § 4262.4(a)(2)(i). MPRA present value method described in § 4262.4(a)(2)(ii).
SFA Measurement Date:	12/31/2022	Per § 4262.4(a)(1), the lowest whole dollar amount (not less than \$0) for which, as of the last day of each plan year during the SFA coverage period, projected SFA assets and projected non-SFA assets are both greater than or equal to zero.
Fair Market Value of Assets as of the SFA Measurement Date:	\$5,234,819	
SFA Amount as of the SFA Measurement Date under the method calculated in this Sheet:	\$8,334,265	
Projected SFA exhaustion year:	2028	
Non-SFA Interest Rate:	5.85%	Only required on this sheet if the requested amount of SFA is based on the "basic method". Plan Year Start Date of the plan year in which the sum of annual projected benefit payments and administrative expenses for the year exceeds the beginning-of-year projected SFA assets.
SFA Interest Rate:	3.77%	

8327918

\$8,334,265

\$6,347

\$0

		On this Sheet, show payments INTO the plan as positive amounts, and payments OUT of the plan as negative amounts.											
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
						Make-up Payments Attributable to Reinstatement of Benefits Suspended through the SFA Measurement Date	Administrative Expenses (excluding amount owed PBGC under 4261 of ERISA; should match total from Sheet 4A-3)	Benefit Payments (from (4) and (5)) and Administrative Expenses (from (6)) Paid from SFA Assets	SFA Investment Income Based on SFA Interest Rate	Projected SFA Assets at End of Plan Year (prior year assets + (7) + (8))	Benefit Payments (from (4) and (5)) and Administrative Expenses (from (6)) Paid from Non-SFA Assets	Non-SFA Investment Income Based on Non- SFA Interest Rate	Projected Non-SFA Assets at End of Plan Year (prior year assets + (1) + (2) + (3) + (10) + (11))
SFA Measurement Date / Plan Year Start Date	Plan Year End Date	Contributions	Withdrawal Liability Payments	Other Payments to Plan (excluding financial assistance and SFA)	Benefit Payments (should match total from Sheet 4A-2)								
12/31/2022	04/30/2023	\$388,626	\$0	\$0	-\$614,683	\$0	-\$40,304	-\$654,987	\$100,618	\$7,779,896	\$0	\$105,868	\$5,729,313
05/01/2023	04/30/2024	\$1,130,904	\$0	\$0	-\$1,299,740	\$0	-\$153,493	-\$1,453,233	\$265,909	\$6,592,572	\$0	\$368,244	\$7,228,461
05/01/2024	04/30/2025	\$1,096,974	\$0	\$0	-\$1,361,065	\$0	-\$196,054	-\$1,557,119	\$219,188	\$5,254,641	\$0	\$454,951	\$8,780,386
05/01/2025	04/30/2026	\$1,064,062	\$0	\$0	-\$1,435,710	\$0	-\$121,089	-\$1,556,799	\$168,754	\$3,866,596	\$0	\$544,776	\$10,389,224
05/01/2026	04/30/2027	\$1,032,142	\$0	\$0	-\$1,486,661	\$0	-\$124,796	-\$1,611,457	\$115,395	\$2,370,534	\$0	\$637,960	\$12,059,326
05/01/2027	04/30/2028	\$1,001,179	\$0	\$0	-\$1,551,496	\$0	-\$128,620	-\$1,680,116	\$57,699	\$748,116	\$0	\$734,755	\$13,795,260
05/01/2028	04/30/2029	\$971,146	\$0	\$0	-\$1,626,547	\$0	-\$132,640	-\$748,116	\$0	\$0	-\$1,011,071	\$827,737	\$14,583,072
05/01/2029	04/30/2030	\$961,437	\$0	\$0	-\$1,701,806	\$0	-\$136,704	\$0	\$0	\$0	-\$1,838,510	\$827,455	\$14,533,454
05/01/2030	04/30/2031	\$951,824	\$0	\$0	-\$1,762,030	\$0	-\$140,933	\$0	\$0	\$0	-\$1,902,963	\$822,386	\$14,404,701
05/01/2031	04/30/2032	\$942,306	\$0	\$0	-\$1,815,911	\$0	-\$147,809	\$0	\$0	\$0	-\$1,963,720	\$812,799	\$14,196,086
05/01/2032	04/30/2033	\$932,884	\$0	\$0	-\$1,850,522	\$0	-\$152,297	\$0	\$0	\$0	-\$2,002,819	\$799,175	\$13,925,325
05/01/2033	04/30/2034	\$923,557	\$0	\$0	-\$1,895,426	\$0	-\$156,977	\$0	\$0	\$0	-\$2,052,403	\$781,613	\$13,578,092
05/01/2034	04/30/2035	\$914,318	\$0	\$0	-\$1,921,932	\$0	-\$161,745	\$0	\$0	\$0	-\$2,083,677	\$760,115	\$13,168,849
05/01/2035	04/30/2036	\$905,174	\$0	\$0	-\$1,958,422	\$0	-\$166,653	\$0	\$0	\$0	-\$2,125,075	\$734,696	\$12,683,643
05/01/2036	04/30/2037	\$896,126	\$0	\$0	-\$1,973,801	\$0	-\$171,715	\$0	\$0	\$0	-\$2,145,516	\$705,448	\$12,139,701
05/01/2037	04/30/2038	\$887,165	\$0	\$0	-\$1,975,050	\$0	-\$176,929	\$0	\$0	\$0	-\$2,151,979	\$673,177	\$11,548,065
05/01/2038	04/30/2039	\$878,291	\$0	\$0	-\$1,983,704	\$0	-\$182,236	\$0	\$0	\$0	-\$2,165,940	\$637,898	\$10,898,314
05/01/2039	04/30/2040	\$869,504	\$0	\$0	-\$1,986,244	\$0	-\$187,703	\$0	\$0	\$0	-\$2,173,947	\$599,396	\$10,193,267
05/01/2040	04/30/2041	\$860,813	\$0	\$0	-\$1,964,925	\$0	-\$193,199	\$0	\$0	\$0	-\$2,158,124	\$558,360	\$9,454,316
05/01/2041	04/30/2042	\$852,209	\$0	\$0	-\$1,948,749	\$0	-\$198,857	\$0	\$0	\$0	-\$2,147,606	\$515,187	\$8,674,106
05/01/2042	04/30/2043	\$843,683	\$0	\$0	-\$1,929,522	\$0	-\$204,608	\$0	\$0	\$0	-\$2,134,130	\$469,690	\$7,853,349
05/01/2043	04/30/2044	\$835,244	\$0	\$0	-\$1,898,396	\$0	-\$210,672	\$0	\$0	\$0	-\$2,109,068	\$422,162	\$7,001,687
05/01/2044	04/30/2045	\$826,892	\$0	\$0	-\$1,884,346	\$0	-\$216,839	\$0	\$0	\$0	-\$2,101,185	\$372,326	\$6,099,720
05/01/2045	04/30/2046	\$818,627	\$0	\$0	-\$1,855,825	\$0	-\$223,107	\$0	\$0	\$0	-\$2,078,932	\$319,970	\$5,159,385
05/01/2046	04/30/2047	\$810,440	\$0	\$0	-\$1,823,092	\$0	-\$229,638	\$0	\$0	\$0	-\$2,052,730	\$265,487	\$4,182,583
05/01/2047	04/30/2048	\$802,331	\$0	\$0	-\$1,789,112	\$0	-\$236,276	\$0	\$0	\$0	-\$2,025,388	\$208,907	\$3,168,433
05/01/2048	04/30/2049	\$794,310	\$0	\$0	-\$1,735,388	\$0	-\$243,105	\$0	\$0	\$0	-\$1,978,493	\$150,716	\$2,134,966
05/01/2049	04/30/2050	\$786,367	\$0	\$0	-\$1,688,870	\$0	-\$250,044	\$0	\$0	\$0	-\$1,938,914	\$91,183	\$1,073,601
05/01/2050	04/30/2051	\$778,502	\$0	\$0	-\$1,637,054	\$0	-\$245,558	\$0	\$0	\$0	-\$1,882,612	\$30,510	\$0

TEMPLATE 5A

v20220802p

Baseline - for non-MPRA plans using the "basic method", or for MPRA plans for which the requested amount of SFA is determined under the "increasing assets method"

File name: *Template 5A Plan Name*, where "Plan Name" is an abbreviated version of the plan name.

Instructions for Section C, Item (5) of the Instructions for Filing Requirements for Multiemployer Plans Applying for Special Financial Assistance:

This Template 5A is not required if all assumptions and methods used to determine the requested SFA amount are identical to those used in the most recent actuarial certification of plan status completed before 1/1/2021 ("pre-2021 certification of plan status"), except the non-SFA and SFA interest rates, and except any assumptions that were changed in accordance with Section III, Acceptable Assumption Changes in PBGC's SFA assumptions guidance (other than the acceptable assumption change for "missing" terminated vested participants described in Section III.E. of PBGC's SFA assumptions guidance).

Provide a separate deterministic projection ("Baseline") using the same calculation methodology used to determine the requested SFA amount, in the same format as Template 4A (Sheets 4A-2, 4A-3, and either 4A-4 or 4A-5) that shows the amount of SFA that would be determined if all underlying assumptions and methods used in the projection were the same as those used in the pre-2021 certification of plan status, except the plan's non-SFA interest rate and SFA interest rate, which should be the same as used in Template 4A (Sheet 4A-1).

For purposes of this Template 5A, any assumption change made in accordance with Section III, Acceptable Assumption Changes, in PBGC's SFA assumptions guidance should be reflected in this Baseline calculation of the SFA amount and supporting projection information, except that an assumption change for "missing" terminated vested participants described in Section III.E of PBGC's SFA assumptions guidance should not be reflected in the Baseline projections. See examples in the SFA instructions for Section C, Item (5).

Additional instructions for each individual worksheet:

Sheet

5A-1 Baseline - Benefit Payments for the "basic method", or for MPRA plans for which the requested amount of SFA is determined under the "increasing assets method"

See Template 4A instructions for Sheet 4A-2, except provide the benefit payment projection used to determine the Baseline SFA amount.

5A-2 Baseline - Participant Count and Administrative Expenses for the "basic method", or for MPRA plans for which the requested amount of SFA is determined under the "increasing assets method"

See Template 4A instructions for Sheet 4A-3, except provide the projected total participant count and administrative expense projection used to determine the Baseline SFA amount.

5A-3 Baseline - Details for the "basic method" under § 4262.4(a)(1) for non-MPRA plans, or for the "increasing assets method" under § 4262.4(a)(2)(i) for MPRA plans for which the requested amount of SFA is determined under that method

For non-MPRA plans, see Template 4A instructions for Sheet 4A-4, except provide the projection used to determine the Baseline SFA amount under the "basic method" described in § 4262.4(a)(1). Unlike Sheet 4A-4, it is not necessary to explicitly identify the projected SFA exhaustion year in Sheet 5A-3.

For MPRA plans for which the requested amount of SFA is determined under the "increasing assets method", see Template 4A instructions for Sheet 4A-5, except provide the projection used to determine the Baseline SFA amount under the "increasing assets method" described in § 4262.4(a)(2)(i). Unlike Sheet 4A-5, it is not necessary to identify the projected SFA exhaustion year in Sheet 5A-3.

Version Updates (newest version at top)

Version	Date updated	
v20220802p	08/02/2022	Cosmetic changes to increase the size of some rows
v20220701p	07/01/2022	

TEMPLATE 5A - Sheet 5A-1

v20220802p

Baseline - Benefit Payments for the "basic method", or for MPRA plans for which the requested amount of SFA is determined under the "increasing assets method"

See Template 4A instructions for Sheet 4A-2, except provide the benefit payment projection used to determine the Baseline SFA amount.

PLAN INFORMATION

Abbreviated Plan Name:	Local47
EIN:	23-1996365
PN:	001
SFA Measurement Date:	12/31/2022

On this Sheet, show all benefit payment amounts as positive amounts.

PROJECTED BENEFIT PAYMENTS for:

SFA Measurement Date / Plan Year Start Date	Plan Year End Date	Current Retirees and Beneficiaries in Pay Status	Current Terminated Vested Participants	Current Active Participants	New Entrants	Total
12/31/2022	04/30/2023	\$353,703	\$234,157	\$26,823	\$0	\$614,683
05/01/2023	04/30/2024	\$1,054,610	\$79,584	\$165,546	\$0	\$1,299,740
05/01/2024	04/30/2025	\$1,044,305	\$92,267	\$224,493	\$0	\$1,361,065
05/01/2025	04/30/2026	\$1,033,371	\$119,887	\$282,452	\$0	\$1,435,710
05/01/2026	04/30/2027	\$1,020,834	\$141,317	\$324,510	\$0	\$1,486,661
05/01/2027	04/30/2028	\$1,007,831	\$168,698	\$374,967	\$0	\$1,551,496
05/01/2028	04/30/2029	\$993,779	\$211,698	\$419,714	\$2,191	\$1,627,382
05/01/2029	04/30/2030	\$978,804	\$255,025	\$465,163	\$4,496	\$1,703,488
05/01/2030	04/30/2031	\$961,751	\$289,829	\$506,662	\$6,326	\$1,764,568
05/01/2031	04/30/2032	\$941,522	\$319,219	\$550,485	\$8,083	\$1,819,309
05/01/2032	04/30/2033	\$921,979	\$336,890	\$586,142	\$9,770	\$1,854,781
05/01/2033	04/30/2034	\$900,853	\$364,749	\$622,701	\$12,634	\$1,900,937
05/01/2034	04/30/2035	\$878,055	\$379,361	\$655,532	\$15,958	\$1,928,906
05/01/2035	04/30/2036	\$853,506	\$402,593	\$690,771	\$20,598	\$1,967,468
05/01/2036	04/30/2037	\$827,150	\$408,088	\$723,719	\$25,854	\$1,984,811
05/01/2037	04/30/2038	\$798,952	\$409,776	\$748,241	\$31,228	\$1,988,197
05/01/2038	04/30/2039	\$768,916	\$422,355	\$771,146	\$36,747	\$1,999,164
05/01/2039	04/30/2040	\$737,086	\$435,089	\$789,705	\$42,190	\$2,004,070
05/01/2040	04/30/2041	\$703,557	\$435,076	\$798,939	\$47,558	\$1,985,130
05/01/2041	04/30/2042	\$668,486	\$439,181	\$810,576	\$52,957	\$1,971,200
05/01/2042	04/30/2043	\$632,091	\$434,448	\$829,358	\$58,233	\$1,954,130
05/01/2043	04/30/2044	\$594,644	\$430,714	\$833,810	\$67,186	\$1,926,354
05/01/2044	04/30/2045	\$556,454	\$432,397	\$849,791	\$77,302	\$1,915,944
05/01/2045	04/30/2046	\$517,854	\$429,773	\$853,771	\$91,580	\$1,892,978
05/01/2046	04/30/2047	\$479,177	\$429,069	\$850,213	\$108,326	\$1,866,785
05/01/2047	04/30/2048	\$440,747	\$421,522	\$852,385	\$125,241	\$1,839,895
05/01/2048	04/30/2049	\$402,869	\$407,599	\$840,161	\$143,197	\$1,793,826
05/01/2049	04/30/2050	\$365,831	\$392,746	\$835,821	\$160,727	\$1,755,125
05/01/2050	04/30/2051	\$329,902	\$378,412	\$824,745	\$178,094	\$1,711,153

TEMPLATE 5A - Sheet 5A-2

v20220802p

Baseline - Participant Count and Administrative Expenses for the "basic method", or for MPRA plans for which the requested amount of SFA is determined under the "increasing assets method"

See Template 4A instructions for Sheet 4A-3, except provide the projected total participant count and administrative expense projection used to determine the Baseline SFA amount.

PLAN INFORMATION

Abbreviated Plan Name:	Local47
EIN:	23-1996365
PN:	001
SFA Measurement Date:	12/31/2022

On this Sheet, show all administrative expense amounts as positive amounts.

PROJECTED ADMINISTRATIVE EXPENSES for:

SFA Measurement Date / Plan Year Start Date	Plan Year End Date	Total Participant Count at Beginning of Plan Year	PBGC Premiums	Other	Total
12/31/2022	04/30/2023	300	\$0	\$40,304	\$40,304
05/01/2023	04/30/2024	308	\$10,780	\$141,816	\$152,596
05/01/2024	04/30/2025	316	\$11,060	\$182,860	\$193,920
05/01/2025	04/30/2026	322	\$11,270	\$116,345	\$117,615
05/01/2026	04/30/2027	327	\$11,445	\$108,472	\$119,917
05/01/2027	04/30/2028	332	\$11,620	\$110,641	\$122,261
05/01/2028	04/30/2029	338	\$11,830	\$112,854	\$124,684
05/01/2029	04/30/2030	344	\$12,040	\$115,111	\$127,151
05/01/2030	04/30/2031	350	\$12,250	\$117,413	\$129,663
05/01/2031	04/30/2032	355	\$18,460	\$119,761	\$138,221
05/01/2032	04/30/2033	358	\$18,616	\$122,156	\$140,772
05/01/2033	04/30/2034	361	\$18,772	\$124,599	\$143,371
05/01/2034	04/30/2035	365	\$18,980	\$127,091	\$146,071
05/01/2035	04/30/2036	368	\$19,136	\$129,633	\$148,769
05/01/2036	04/30/2037	372	\$19,344	\$132,226	\$151,570
05/01/2037	04/30/2038	375	\$19,500	\$134,871	\$154,371
05/01/2038	04/30/2039	377	\$19,604	\$137,568	\$157,172
05/01/2039	04/30/2040	379	\$19,708	\$140,319	\$160,027
05/01/2040	04/30/2041	379	\$19,708	\$143,125	\$162,833
05/01/2041	04/30/2042	380	\$19,760	\$145,988	\$165,748
05/01/2042	04/30/2043	380	\$19,760	\$148,908	\$168,668
05/01/2043	04/30/2044	381	\$19,812	\$151,886	\$171,698
05/01/2044	04/30/2045	381	\$19,812	\$154,924	\$174,736
05/01/2045	04/30/2046	381	\$19,812	\$158,022	\$177,834
05/01/2046	04/30/2047	381	\$19,812	\$161,182	\$180,994
05/01/2047	04/30/2048	381	\$19,812	\$164,406	\$184,218
05/01/2048	04/30/2049	380	\$19,760	\$167,694	\$187,454
05/01/2049	04/30/2050	379	\$19,708	\$171,048	\$190,756
05/01/2050	04/30/2051	378	\$19,656	\$174,469	\$194,125

\$9,632 was PBGC premium paid in plan year ending 4/30/2023.

TEMPLATE 5A - Sheet 5A-3

v20220802p

Baseline - Details for the "basic method" under § 4262.4(a)(1) for non-MPRA plans, or for the "increasing assets method" under § 4262.4(a)(2)(i) for MPRA plans for which the requested amount of SFA is determined under that method

See Template 4A instructions for Sheet 4A-4 or Sheet 4A-5, except provide the projection used to determine the Baseline SFA amount.

PLAN INFORMATION

Abbreviated Plan Name:	Local47
EIN:	23-1996365
PN:	001
MPRA Plan?	No
If a MPRA Plan, which method yields the greatest amount of SFA?	
SFA Measurement Date:	12/31/2022
Fair Market Value of Assets as of the SFA Measurement Date:	\$5,234,819
SFA Amount as of the SFA Measurement Date under the method calculated in this Sheet:	\$5,612,602
Non-SFA Interest Rate:	5.85%
SFA Interest Rate:	3.77%

\$0

		On this Sheet, show payments INTO the plan as positive amounts, and payments OUT of the plan as negative amounts.											
SFA Measurement Date / Plan Year Start Date	Plan Year End Date	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
		Contributions	Withdrawal Liability Payments	Other Payments to Plan (excluding financial assistance and SFA)	Benefit Payments (should match total from Sheet 5A-1)	Make-up Payments Attributable to Reinstatement of Benefits Suspended through the SFA Measurement Date	Administrative Expenses (excluding amount owed PBGC under 4261 of ERISA; should match total from Sheet 5A-2)	Benefit Payments (from (4) and (5)) and Administrative Expenses (from (6)) Paid from SFA Assets	SFA Investment Income Based on SFA Interest Rate	Projected SFA Assets at End of Plan Year (prior year assets + (7) + (8))	Benefit Payments (from (4) and (5)) and Administrative Expenses (from (6)) Paid from Non-SFA Assets	Non-SFA Investment Income Based on Non-SFA Interest Rate	Projected Non-SFA Assets at End of Plan Year (prior year assets + (1) + (2) + (3) + (10) + (11))
12/31/2022	04/30/2023	\$374,183	\$0	\$0	-\$614,683	\$0	-\$40,304	-\$654,987	\$66,416	\$5,024,031	\$0	\$105,727	\$5,714,729
05/01/2023	04/30/2024	\$1,122,550	\$0	\$0	-\$1,299,740	\$0	-\$152,596	-\$1,452,336	\$162,029	\$3,733,724	\$0	\$367,146	\$7,204,425
05/01/2024	04/30/2025	\$1,122,550	\$0	\$0	-\$1,361,065	\$0	-\$193,920	-\$1,554,985	\$111,450	\$2,290,189	\$0	\$454,293	\$8,781,268
05/01/2025	04/30/2026	\$1,122,550	\$0	\$0	-\$1,435,710	\$0	-\$117,615	-\$1,553,325	\$57,060	\$793,924	\$0	\$546,539	\$10,450,357
05/01/2026	04/30/2027	\$1,122,550	\$0	\$0	-\$1,486,661	\$0	-\$119,917	-\$793,924	\$0	\$0	-\$812,654	\$643,633	\$11,403,886
05/01/2027	04/30/2028	\$1,122,550	\$0	\$0	-\$1,551,496	\$0	-\$122,261	\$0	\$0	\$0	-\$1,673,757	\$651,005	\$11,503,684
05/01/2028	04/30/2029	\$1,122,550	\$0	\$0	-\$1,627,382	\$0	-\$124,684	\$0	\$0	\$0	-\$1,752,066	\$654,552	\$11,528,720
05/01/2029	04/30/2030	\$1,122,550	\$0	\$0	-\$1,703,488	\$0	-\$127,151	\$0	\$0	\$0	-\$1,830,639	\$653,719	\$11,474,350
05/01/2030	04/30/2031	\$1,122,550	\$0	\$0	-\$1,764,568	\$0	-\$129,663	\$0	\$0	\$0	-\$1,894,231	\$648,678	\$11,351,347
05/01/2031	04/30/2032	\$1,122,550	\$0	\$0	-\$1,819,309	\$0	-\$138,221	\$0	\$0	\$0	-\$1,957,530	\$639,631	\$11,155,998
05/01/2032	04/30/2033	\$1,122,550	\$0	\$0	-\$1,854,781	\$0	-\$140,772	\$0	\$0	\$0	-\$1,995,553	\$627,091	\$10,910,086
05/01/2033	04/30/2034	\$1,122,550	\$0	\$0	-\$1,900,937	\$0	-\$143,371	\$0	\$0	\$0	-\$2,044,308	\$611,279	\$10,599,607
05/01/2034	04/30/2035	\$1,122,550	\$0	\$0	-\$1,928,906	\$0	-\$146,071	\$0	\$0	\$0	-\$2,074,977	\$592,219	\$10,239,399
05/01/2035	04/30/2036	\$1,122,550	\$0	\$0	-\$1,967,468	\$0	-\$148,769	\$0	\$0	\$0	-\$2,116,237	\$569,939	\$9,815,651
05/01/2036	04/30/2037	\$1,122,550	\$0	\$0	-\$1,984,811	\$0	-\$151,570	\$0	\$0	\$0	-\$2,136,381	\$544,561	\$9,346,381
05/01/2037	04/30/2038	\$1,122,550	\$0	\$0	-\$1,988,197	\$0	-\$154,371	\$0	\$0	\$0	-\$2,142,568	\$516,928	\$8,843,291
05/01/2038	04/30/2039	\$1,122,550	\$0	\$0	-\$1,999,164	\$0	-\$157,172	\$0	\$0	\$0	-\$2,156,336	\$487,094	\$8,296,599
05/01/2039	04/30/2040	\$1,122,550	\$0	\$0	-\$2,004,070	\$0	-\$160,027	\$0	\$0	\$0	-\$2,164,097	\$454,886	\$7,709,938
05/01/2040	04/30/2041	\$1,122,550	\$0	\$0	-\$1,985,130	\$0	-\$162,833	\$0	\$0	\$0	-\$2,147,963	\$421,038	\$7,105,563
05/01/2041	04/30/2042	\$1,122,550	\$0	\$0	-\$1,971,200	\$0	-\$165,748	\$0	\$0	\$0	-\$2,136,948	\$386,004	\$6,477,169
05/01/2042	04/30/2043	\$1,122,550	\$0	\$0	-\$1,954,130	\$0	-\$168,668	\$0	\$0	\$0	-\$2,122,798	\$349,657	\$5,826,578
05/01/2043	04/30/2044	\$1,122,550	\$0	\$0	-\$1,926,354	\$0	-\$171,698	\$0	\$0	\$0	-\$2,098,052	\$312,321	\$5,163,397
05/01/2044	04/30/2045	\$1,122,550	\$0	\$0	-\$1,915,944	\$0	-\$174,736	\$0	\$0	\$0	-\$2,090,680	\$273,741	\$4,469,008
05/01/2045	04/30/2046	\$1,122,550	\$0	\$0	-\$1,892,978	\$0	-\$177,834	\$0	\$0	\$0	-\$2,070,812	\$233,700	\$3,754,446
05/01/2046	04/30/2047	\$1,122,550	\$0	\$0	-\$1,866,785	\$0	-\$180,994	\$0	\$0	\$0	-\$2,047,779	\$192,572	\$3,021,789
05/01/2047	04/30/2048	\$1,122,550	\$0	\$0	-\$1,839,895	\$0	-\$184,218	\$0	\$0	\$0	-\$2,024,113	\$150,404	\$2,270,630
05/01/2048	04/30/2049	\$1,122,550	\$0	\$0	-\$1,793,826	\$0	-\$187,454	\$0	\$0	\$0	-\$1,981,280	\$107,714	\$1,519,614
05/01/2049	04/30/2050	\$1,122,550	\$0	\$0	-\$1,755,125	\$0	-\$190,756	\$0	\$0	\$0	-\$1,945,881	\$64,815	\$761,098
05/01/2050	04/30/2051	\$1,122,550	\$0	\$0	-\$1,711,153	\$0	-\$194,125	\$0	\$0	\$0	-\$1,905,278	\$21,629	\$0

TEMPLATE 6A

v20220802p

Reconciliation - for non-MPRA plans using the "basic method", or for MPRA plans for which the requested amount of SFA is determined under the "increasing assets method"

File name: *Template 6A Plan Name*, where "Plan Name" is an abbreviated version of the plan name.

Instructions for Section C, Item (6) of the Instructions for Filing Requirements for Multiemployer Plans Applying for Special Financial Assistance:

This Template 6A is not required if all assumptions and methods used to determine the requested SFA amount are identical to those used in the most recent actuarial certification of plan status completed before 1/1/2021 ("pre-2021 certification of plan status"), except the non-SFA and SFA interest rates, and except any assumptions changed in accordance with Section III, Acceptable Assumption Changes, in PBGC's SFA assumptions guidance (other than the acceptable assumption change for "missing" terminated vested participants described in Section III.E of PBGC's SFA assumptions guidance).

This Template 6A is also not required if the requested SFA amount from Template 4A is the same as the SFA amount shown in Template 5A (Baseline).

If the assumptions/methods used to determine the requested SFA amount differ from those in the "Baseline" projection in Template 5A, then provide a reconciliation of the change in the total amount of SFA due to each change in assumption/method from the Baseline to the requested SFA as shown in Template 4A.

For each assumption/method change from the Baseline through the requested SFA amount, provide a deterministic projection using the same calculation methodology used to determine the requested SFA amount, in the same format as Template 4A (either Sheet 4A-4 or Sheet 4A-5).

Additional instructions for each individual worksheet:

Sheet

6A-1 Reconciliation - Summary for the "basic method", or for MPRA plans for which the requested amount of SFA is determined under the "increasing assets method"

For Item number 1, show the SFA amount determined in Template 5A using the "Baseline" assumptions and methods. If there is only one change in assumptions/methods between the Baseline (Template 5A) and the requested SFA amount (Template 4A), then show on Item number 2 the requested SFA amount, and briefly identify the change in assumptions from the Baseline.

If there is more than one change in assumptions/methods from the Baseline, show each individual change as a separate Item number. Each Item number should reflect all changes already measured in the prior Item number. For example, the difference between the SFA amount shown for Item number 4 and Item number 5 should be the incremental change due to changing the identified single assumption/method. The Item numbers should show assumption/method changes in the order that they were incrementally measured.

6A-2 Reconciliation - Details for the "basic method" under § 4262.4(a)(1) for non-MPRA plans, or for the "increasing assets method" under § 4262.4(a)(2)(i) for MPRA plans for which the requested amount of SFA is determined under that method

For non-MPRA plans, see Template 4A instructions for Sheet 4A-4, except provide the projection used to determine the intermediate Item number 2 SFA amount from Sheet 6A-1 under the "basic method" described in § 4262.4(a)(1). Unlike Sheet 4A-4, it is not necessary to explicitly identify the projected SFA exhaustion year in Sheet 6A-2.

For MPRA plans for which the requested amount of SFA is determined under the "increasing assets method", see Template 4A instructions for Sheet 4A-5, except provide the projection used to determine each intermediate SFA amount from Sheet 6A-1 under the "increasing assets method" described in § 4262.4(a)(2)(i). Unlike Sheet 4A-5, it is not necessary to explicitly identify the projected SFA exhaustion year in Sheet 6A-2.

A Reconciliation Details sheet is not needed for the last Item number shown in the Sheet 6A-1 Reconciliation, since the information should be the same as shown in Template 4A. For example, if there is only one assumption change from the Baseline, then Item number 2 should identify what assumption changed between the Baseline and Item number 2, where Item number 2 is the requested SFA amount. Since details on the determination of the requested SFA amount are shown in Template 4A, a separate Sheet 6A-2 Reconciliation Details is not required here.

6A-3 Reconciliation - Details for the "basic method" under § 4262.4(a)(1) for non-MPRA plans, or for the "increasing assets method" under § 4262.4(a)(2)(i) for MPRA plans for which the requested amount of SFA is determined under that method

See instructions for 6A-2 Reconciliation Details, except for the intermediate Item number 3 SFA amount from Sheet 6A-1.

6A-4 Reconciliation - Details for the "basic method" under § 4262.4(a)(1) for non-MPRA plans, or for the "increasing assets method" under § 4262.4(a)(2)(i) for MPRA plans for which the requested amount of SFA is determined under that method

See instructions for 6A-2 Reconciliation Details, except for the intermediate Item number 4 SFA amount from Sheet 6A-1.

6A-5 Reconciliation - Details for the "basic method" under § 4262.4(a)(1) for non-MPRA plans, or for the "increasing assets method" under § 4262.4(a)(2)(i) for MPRA plans for which the requested amount of SFA is determined under that method

See instructions for 6A-2 Reconciliation Details, except for the intermediate Item number 5 SFA amount from Sheet 6A-1.

Version Updates (newest version at top)

Version	Date updated	
v20220802p	08/02/2022	Cosmetic changes to increase the size of some rows
v20220701p	07/01/2022	

TEMPLATE 6A - Sheet 6A-1

v20220802p

Reconciliation - Summary for the "basic method", or for MPRA plans for which the requested amount of SFA is determined under the "increasing assets method"

See Template 6A Instructions for Additional Instructions for Sheet 6A-1.

PLAN INFORMATION

Abbreviated Plan Name:	Local47	
EIN:	23-1996365	
PN:	001	
MPRA Plan?	No	
If a MPRA Plan, which method yields the greatest amount of SFA?		

Item number	Basis for Assumptions/Methods. For each Item, briefly describe the incremental change reflected in the SFA amount.	Change in SFA Amount (from prior Item number)	SFA Amount
1	Baseline	N/A	\$5,612,602
2	Administrative Expenses	\$260,840	\$5,873,442
3	CBU Assumption	\$2,460,823	\$8,334,265
4			
5			

NOTE: A sheet with Recon Details is not required for the last Item number provided, since that information should be the same as provided in Template 4A.

From Template 5A.

Show details supporting the SFA amount on Sheet 6A-2.

Show details supporting the SFA amount on Sheet 6A-3.

Show details supporting the SFA amount on Sheet 6A-4.

Show details supporting the SFA amount on Sheet 6A-5.

Create additional rows as needed, and create additional detailed sheets by copying Sheet 6A-5 and re-labeling the header and the sheet name to be 6A-6, 6A-7, etc.

TEMPLATE 6A - Sheet 6A-2

Reconciliation - Details for the "basic method" under § 4262.4(a)(1) for non-MPRA plans, or for the "increasing assets method" under § 4262.4(a)(2)(i) for MPRA plans for which the requested amount of SFA is determined under that method

See Template 4A instructions for Sheet 4A-4 or Sheet 4A-5, except provide the projection used to determine the intermediate SFA amount.

PLAN INFORMATION

Abbreviated Plan Name:	Local47
EIN:	23-1996365
PN:	001
MPRA Plan?	No
If a MPRA Plan, which method yields the greatest amount of SFA?	
SFA Measurement Date:	12/31/2022
Fair Market Value of Assets as of the SFA Measurement Date:	\$5,234,819
SFA Amount as of the SFA Measurement Date under the method calculated in this Sheet:	\$5,873,442
Non-SFA Interest Rate:	5.85%
SFA Interest Rate:	3.77%

\$0

		On this Sheet, show payments INTO the plan as positive amounts, and payments OUT of the plan as negative amounts.											
SFA Measurement Date / Plan Year Start Date	Plan Year End Date	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
		Contributions	Withdrawal Liability Payments	Other Payments to Plan (excluding financial assistance and SFA)	Benefit Payments	Make-up Payments Attributable to Reinstatement of Benefits Suspended through the SFA Measurement Date	Administrative Expenses (excluding amount owed PBGC under 4261 of ERISA)	Benefit Payments (from (4) and (5)) and Administrative Expenses (from (6)) Paid from SFA Assets	SFA Investment Income Based on SFA Interest Rate	Projected SFA Assets at End of Plan Year (prior year assets + (7) + (8))	Benefit Payments (from (4) and (5)) and Administrative Expenses (from (6)) Paid from Non-SFA Assets	Non-SFA Investment Income Based on Non-SFA Interest Rate	Projected Non-SFA Assets at End of Plan Year (prior year assets + (1) + (2) + (3) + (10) + (11))
12/31/2022	04/30/2023	\$374,183	\$0	\$0	-\$614,683	\$0	-\$40,304	-\$654,987	\$69,694	\$5,288,149	\$0	\$105,727	\$5,714,729
05/01/2023	04/30/2024	\$1,122,550	\$0	\$0	-\$1,299,740	\$0	-\$153,493	-\$1,453,233	\$171,970	\$4,006,886	\$0	\$367,146	\$7,204,425
05/01/2024	04/30/2025	\$1,122,550	\$0	\$0	-\$1,361,065	\$0	-\$196,054	-\$1,557,119	\$121,708	\$2,571,475	\$0	\$454,293	\$8,781,268
05/01/2025	04/30/2026	\$1,122,550	\$0	\$0	-\$1,435,710	\$0	-\$121,089	-\$1,556,799	\$67,599	\$1,082,275	\$0	\$546,539	\$10,450,357
05/01/2026	04/30/2027	\$1,122,550	\$0	\$0	-\$1,486,661	\$0	-\$124,796	-\$1,082,275	\$0	\$0	-\$529,182	\$660,358	\$11,704,083
05/01/2027	04/30/2028	\$1,122,550	\$0	\$0	-\$1,551,496	\$0	-\$128,620	\$0	\$0	\$0	-\$1,680,116	\$668,380	\$11,814,896
05/01/2028	04/30/2029	\$1,122,550	\$0	\$0	-\$1,627,382	\$0	-\$132,640	\$0	\$0	\$0	-\$1,760,022	\$672,525	\$11,849,949
05/01/2029	04/30/2030	\$1,122,550	\$0	\$0	-\$1,703,488	\$0	-\$136,704	\$0	\$0	\$0	-\$1,840,192	\$672,231	\$11,804,538
05/01/2030	04/30/2031	\$1,122,550	\$0	\$0	-\$1,764,568	\$0	-\$140,933	\$0	\$0	\$0	-\$1,905,501	\$667,664	\$11,689,251
05/01/2031	04/30/2032	\$1,122,550	\$0	\$0	-\$1,819,309	\$0	-\$147,809	\$0	\$0	\$0	-\$1,967,118	\$659,118	\$11,503,801
05/01/2032	04/30/2033	\$1,122,550	\$0	\$0	-\$1,854,781	\$0	-\$152,297	\$0	\$0	\$0	-\$2,007,078	\$647,100	\$11,266,372
05/01/2033	04/30/2034	\$1,122,550	\$0	\$0	-\$1,900,937	\$0	-\$156,977	\$0	\$0	\$0	-\$2,057,914	\$631,723	\$10,962,731
05/01/2034	04/30/2035	\$1,122,550	\$0	\$0	-\$1,928,906	\$0	-\$161,745	\$0	\$0	\$0	-\$2,090,651	\$613,003	\$10,607,634
05/01/2035	04/30/2036	\$1,122,550	\$0	\$0	-\$1,967,468	\$0	-\$166,653	\$0	\$0	\$0	-\$2,134,121	\$590,958	\$10,187,020
05/01/2036	04/30/2037	\$1,122,550	\$0	\$0	-\$1,984,811	\$0	-\$171,715	\$0	\$0	\$0	-\$2,156,526	\$565,697	\$9,718,741
05/01/2037	04/30/2038	\$1,122,550	\$0	\$0	-\$1,988,197	\$0	-\$176,929	\$0	\$0	\$0	-\$2,165,126	\$538,051	\$9,214,217
05/01/2038	04/30/2039	\$1,122,550	\$0	\$0	-\$1,999,164	\$0	-\$182,236	\$0	\$0	\$0	-\$2,181,400	\$508,060	\$8,663,427
05/01/2039	04/30/2040	\$1,122,550	\$0	\$0	-\$2,004,070	\$0	-\$187,703	\$0	\$0	\$0	-\$2,191,773	\$475,536	\$8,069,740
05/01/2040	04/30/2041	\$1,122,550	\$0	\$0	-\$1,985,130	\$0	-\$193,199	\$0	\$0	\$0	-\$2,178,329	\$441,198	\$7,455,159
05/01/2041	04/30/2042	\$1,122,550	\$0	\$0	-\$1,971,200	\$0	-\$198,857	\$0	\$0	\$0	-\$2,170,057	\$405,487	\$6,813,139
05/01/2042	04/30/2043	\$1,122,550	\$0	\$0	-\$1,954,130	\$0	-\$204,608	\$0	\$0	\$0	-\$2,158,738	\$368,260	\$6,145,211
05/01/2043	04/30/2044	\$1,122,550	\$0	\$0	-\$1,926,354	\$0	-\$210,672	\$0	\$0	\$0	-\$2,137,026	\$329,821	\$5,460,556
05/01/2044	04/30/2045	\$1,122,550	\$0	\$0	-\$1,915,944	\$0	-\$216,839	\$0	\$0	\$0	-\$2,132,783	\$289,893	\$4,740,216
05/01/2045	04/30/2046	\$1,122,550	\$0	\$0	-\$1,892,978	\$0	-\$223,107	\$0	\$0	\$0	-\$2,116,085	\$248,242	\$3,994,923
05/01/2046	04/30/2047	\$1,122,550	\$0	\$0	-\$1,866,785	\$0	-\$229,638	\$0	\$0	\$0	-\$2,096,423	\$205,217	\$3,226,268
05/01/2047	04/30/2048	\$1,122,550	\$0	\$0	-\$1,839,895	\$0	-\$236,276	\$0	\$0	\$0	-\$2,076,171	\$160,843	\$2,433,490
05/01/2048	04/30/2049	\$1,122,550	\$0	\$0	-\$1,793,826	\$0	-\$243,105	\$0	\$0	\$0	-\$2,036,931	\$115,614	\$1,634,723
05/01/2049	04/30/2050	\$1,122,550	\$0	\$0	-\$1,755,125	\$0	-\$250,044	\$0	\$0	\$0	-\$2,005,169	\$69,815	\$821,918
05/01/2050	04/30/2051	\$1,122,550	\$0	\$0	-\$1,711,153	\$0	-\$256,673	\$0	\$0	\$0	-\$1,967,826	\$23,358	\$0

TEMPLATE 6A - Sheet 6A-3

Item Description (from 6A-1):	
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v20220802p

Reconciliation - Details for the "basic method" under § 4262.4(a)(1) for non-MPRA plans, or for the "increasing assets method" under § 4262.4(a)(2)(i) for MPRA plans for which the requested amount of SFA is determined under that method

See Template 4A instructions for Sheet 4A-4 or Sheet 4A-5, except provide the projection used to determine the intermediate SFA amount.

PLAN INFORMATION

Abbreviated Plan Name:	
EIN:	
PN:	
MPRA Plan?	
If a MPRA Plan, which method yields the greatest amount of SFA?	
SFA Measurement Date:	
Fair Market Value of Assets as of the SFA Measurement Date:	
SFA Amount as of the SFA Measurement Date under the method calculated in this Sheet:	
Non-SFA Interest Rate:	
SFA Interest Rate:	

		On this Sheet, show payments INTO the plan as positive amounts, and payments OUT of the plan as negative amounts.											
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
						Make-up Payments Attributable to Reinstatement of Benefits Suspended through the SFA Measurement Date	Administrative Expenses (excluding amount owed PBGC under 4261 of ERISA)	Benefit Payments (from (4) and (5)) and Administrative Expenses (from (6)) Paid from SFA Assets	SFA Investment Income Based on SFA Interest Rate	Projected SFA Assets at End of Plan Year (prior year assets + (7) + (8))	Benefit Payments (from (4) and (5)) and Administrative Expenses (from (6)) Paid from Non-SFA Assets	Non-SFA Investment Income Based on Non- SFA Interest Rate	Projected Non-SFA Assets at End of Plan Year (prior year assets + (1) + (2) + (3) + (10) + (11))
SFA Measurement Date / Plan Year Start Date	Plan Year End Date	Contributions	Withdrawal Liability Payments	Other Payments to Plan (excluding financial assistance and SFA)	Benefit Payments								

TEMPLATE 6A - Sheet 6A-4

Item Description (from 6A-1):	
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v20220802p

Reconciliation - Details for the "basic method" under § 4262.4(a)(1) for non-MPRA plans, or for the "increasing assets method" under § 4262.4(a)(2)(i) for MPRA plans for which the requested amount of SFA is determined under that method

See Template 4A instructions for Sheet 4A-4 or Sheet 4A-5, except provide the projection used to determine the intermediate SFA amount.

PLAN INFORMATION

Abbreviated Plan Name:		
EIN:		
PN:		
MPRA Plan?		
If a MPRA Plan, which method yields the greatest amount of SFA?		
SFA Measurement Date:		
Fair Market Value of Assets as of the SFA Measurement Date:		
SFA Amount as of the SFA Measurement Date under the method calculated in this Sheet:		
Non-SFA Interest Rate:		
SFA Interest Rate:		

On this Sheet, show payments INTO the plan as positive amounts, and payments OUT of the plan as negative amounts.

[illegible]

Reconciliation - Details for the "basic method" under § 4262.4(a)(1) for non-MPRA plans, or for the "increasing assets method" under § 4262.4(a)(2)(i) for MPRA plans for which the requested amount of SFA is determined under that method

v20220802p

PLAN INFORMATION

[illegible]

Version Updates

Version

Date updated

v20220701p

v20220701p

07/01/2022

TEMPLATE 7

v20220701p

7a - Assumption/Method Changes for SFA Eligibility

File name: *Template 7 Plan Name*, where "Plan Name" is an abbreviated version of the plan name.

Instructions for Section C, Item (7)a. of the Instructions for Filing Requirements for Multiemployer Plans Applying for Special Financial Assistance:

Sheet 7a of Template 7 is not required if the plan is eligible for SFA under § 4262.3(a)(2) (MPRA suspensions) or § 4262.3(a)(4) (certain insolvent plans) of PBGC's special financial assistance regulation.

Sheet 7a of Template 7 is not required if the plan is eligible based on a certification of plan status completed before January 1, 2021.

Sheet 7a of Template 7 is not required if the plan is eligible based on a certification of plan status completed after December 31, 2020 but reflects the same assumptions as those in the pre-2021 certification of plan status.

Provide a table identifying which assumptions/methods used in determining the plan's eligibility for SFA differ from those used in the pre-2021 certification of plan status and brief explanations as to why using those assumptions/methods is no longer reasonable and why the changed assumptions/methods are reasonable.

This table should identify all changed assumptions/methods (including those that are reflected in the Baseline provided in Template 5A or Template 5B) and should be an abbreviated version of information provided in Section D, Item (6)a. of the SFA filing instructions.

For example, if the mortality assumption used in the pre-2021 certification of plan status is the RP-2000 mortality table, and the plan proposes to change to the Pri-2012(BC) table, complete one line of the table as follows:

	(A)	(B)	(C)
Assumption/Method That Has Changed From Assumption/Method Used in Most Recent Certification of Plan Status Completed Prior to 1/1/2021	Brief description of assumption/method used in the most recent certification of plan status completed prior to 1/1/2021	Brief description of assumption/method used in showing the plan's eligibility for SFA (if different)	Brief explanation on why the assumption/method in (A) is no longer reasonable and why the assumption/method in (B) is reasonable
Base Mortality Assumption	RP-2000 mortality table	Pri-2012(BC) mortality table	Prior assumption is outdated. New assumption reflects more recently published experience for blue collar workers.

Add one line for each assumption/method that has changed from that used in the most recent certification of plan status completed prior to 1/1/2021.

Since this Template 7a is intended as an abbreviated version of more detailed information provided in Section D, Item (6)a. of the SFA filing instructions, it is not necessary to include full tables of rates at every age (e.g., for retirement, turnover, etc.). Instead, a high level description that focuses on what aspect of the assumption/method has changed is preferred.

Assumption/Method Changes - SFA Eligibility

v20220701p

PLAN INFORMATION

Abbreviated Plan Name:		
EIN:		
PN:		

Brief description of basis for qualifying for SFA (e.g., critical and declining status in 2020, insolvent plan, critical status and meet other criteria)	
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[illegible]

TEMPLATE 7

v20220701p

7b - Assumption/Method Changes for SFA Amount

File name: *Template 7 Plan Name*, where "Plan Name" is an abbreviated version of the plan name.

Instructions for Section C, Item (7)b. of the Instructions for Filing Requirements for Multiemployer Plans Applying for Special Financial Assistance:

Provide a table identifying which assumptions/methods used in determining the amount of SFA differ from those used in the pre-2021 certification of plan status (except the non-SFA and SFA interest rates) and brief explanations as to why using those original assumptions/methods is no longer reasonable and why the changed assumptions/methods are reasonable.

Please state if the changed assumption is an extension of the CBU assumption or the administrative expenses assumption as described in Paragraph A "Adoption of assumptions not previously factored into pre-2021 certification of plan status" of Section III, Acceptable Assumption Changes of PBGC's guidance on Special Financial Assistance Assumptions.

This table should identify all changed assumptions/methods except for the interest rates (including those that are reflected in the Baseline provided in Template 5A or Template 5B) and should be an abbreviated version of information provided in Section D, Item (6)b. of the SFA filing instructions.

For example, if the mortality assumption used in the pre-2021 certification of plan status is the RP-2000 mortality table, and the plan proposes to change to the Pri-2012(BC) table, complete one line of the table as follows:

	(A)	(B)	(C)
Assumption/Method That Has Changed From Assumption Used in Most Recent Certification of Plan Status Completed Prior to 1/1/2021	Brief description of assumption/method used in the most recent certification of plan status completed prior to 1/1/2021	Brief description of assumption/method used to determine the requested SFA amount (if different)	Brief explanation on why the assumption/method in (A) is no longer reasonable and why the assumption/method in (B) is reasonable
Base Mortality Assumption	RP-2000 mortality table	Pri-2012(BC) mortality table	Original assumption is outdated. New assumption reflects more recently published experience for blue collar workers.

For example, assume the plan is projected to be insolvent in 2029 in the pre-2021 certification of plan status. The plan changes its CBU assumption by extending the assumption to the later projection years as described in Paragraph A, "Adoption of assumptions not previously factored into pre-2021 certification of plan status" of Section III, Acceptable Assumption Changes of PBGC's guidance on Special Financial Assistance Assumptions. Complete one line of the table as follows:

	(A)	(B)	(C)
Assumption/Method That Has Changed From Assumption Used in Most Recent Certification of Plan Status Completed Prior to 1/1/2021	Brief description of assumption/method used in the most recent certification of plan status completed prior to 1/1/2021	Brief description of assumption/method used to determine the requested SFA amount (if different)	Brief explanation on why the assumption/method in (A) is no longer reasonable and why the assumption/method in (B) is reasonable
CBU Assumption	Decrease from most recent plan year's actual number of CBUs by 2% per year to 2028	Same number of CBUs for each projection year to 2028 as shown in (A), then constant CBUs for all years after 2028.	Original assumption does not address years after original projected insolvency in 2029. Proposed assumption uses acceptable extension methodology.

Add one line for each assumption/method that has changed from that used in the most recent certification of plan status completed prior to 1/1/2021.

Since this Template 7b is intended as an abbreviated version of more detailed information provided in Section D, Item (6)b. of the SFA filing instructions, it is not necessary to include full tables of rates at every age (e.g., for retirement, turnover, etc.). Instead, a high level description that focuses on what aspect of the assumption/method has changed is preferred.

Template 7 - Sheet 7b

v20220701p

Assumption/Method Changes - SFA Amount

PLAN INFORMATION

Abbreviated Plan Name:	Local47
EIN:	23-1996365
PN:	001

	(A)	(B)	(C)
Assumption/Method That Has Changed From Assumption Used in Most Recent Certification of Plan Status Completed Prior to 1/1/2021	Brief description of assumption/method used in the most recent certification of plan status completed prior to 1/1/2021	Brief description of assumption/method used to determine the requested SFA amount (if different)	Brief explanation on why the assumption/method in (A) is no longer reasonable and why the assumption/method in (B) is reasonable
Base Mortality Table	RP-2014 Blue Collar Mortality adjusted to 2006 and projected generationally with Scale MP-2019	RP-2014 Blue Collar Mortality adjusted to 2006 and projected generationally with Scale MP-2021	Projection scale modified in accordance with PBGC guidance on Acceptable Assumption Changes
CBU Assumption	No change. CBUs assumed to reflect all reciprocity	134,009 CBUs for the plan year ending 4/30/2023, declining 3% per year through 4/30/2029 and 3% annual decline through 4/30/2029 and 1% annual decline thereafter.	The 10 year geometric average decline of CBUs prior to the COVID exclusion was 3.79%. A 3% decline is further supported by the 5.04% average annual decline in active plan participation from 5/1/2009 to 5/1/2024. The updated assumption extends through the end of the SFA projection period, April 30, 2051, and conforms to the PBGC's Generally Acceptable Assumption Change guidelines. A 3% decline from 151,373 for the plan year ending 4/30/2019 gets us to our starting point of 134,009 for the plan year ending 4/30/2023.
Administrative Expenses	Based on actual expenses paid in prior year with 2% annual increases	3% annual increase for both PBGC premiums and other administrative expenses, with additional adjustments for known increases in PBGC premium rates.	Baseline assumption underestimated future PBGC premium increases and other increases to expenses. The updated assumption reflects the 10-year geometric average of the increases in administrative expenses other than PBGC premiums from 2012 through 2021, plus average of increase in National Average Wage for PBGC premium rates. The actual non-PBGC expense increase is rounded down to match the PBGC annual increase. The SFA Application fees are also included and detailed within the Section D Narrative.
New Entrant Profile	Based on characteristics of prior year's new entrants	Based on the characteristics of the new entrants to the plan in the five plan years preceding the plan's SFA measurement date	Changed in accordance with PBGC guidance on Acceptable Assumption Changes

Version Updates

v20220802p

Version

Date updated

v20220802p

08/02/2022 Cosmetic changes to increase the size of some rows

v20220701p

07/01/2022

TEMPLATE 8

File name: *Template 8 Plan Name*, where "Plan Name" is an abbreviated version of the plan name.

v20220802p

Contribution and Withdrawal Liability Details

Provide details of the projected contributions and withdrawal liability payments used to calculate the requested SFA amount. This should include total contributions, contribution base units (including identification of the base unit used (i.e., hourly, weekly)), average contribution rate(s), reciprocity contributions (if applicable), additional contributions from the rehabilitation plan (if applicable), and any other identifiable contribution streams. For withdrawal liability, separately show amounts for currently withdrawn employers and for future assumed withdrawals. Also provide the projected number of active participants at the beginning of each plan year.

The first row in the projection period is for the period beginning on the SFA measurement date and ending on the last day of the plan year containing the SFA measurement date. For all other periods, provide the full plan year of information up to the plan year ending in 2051.

PLAN INFORMATION

Abbreviated Plan Name:	Local47
EIN:	23-1996365
PN:	001

Unit (e.g. hourly, weekly)	Hourly
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		All Other Sources of Non-Investment Income								Projected Number of Active Participants (Including New Entrants) at the Beginning of the Plan Year	
SFA Measurement Date / Plan Year Start Date	Plan Year End Date	Total Contributions*	Total Contribution Base Units	Average Contribution Rate	Reciprocity Contributions (if applicable)	Additional Rehab Plan Contributions (if applicable)	Other - Explain if Applicable	Withdrawal Liability Payments for Currently Withdrawn Employers	Withdrawal Liability Payments for Projected Future Withdrawals		
12/31/2022	04/30/2023	\$388,626	44,670	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	110
05/01/2023	04/30/2024	\$1,130,904	129,989	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	106
05/01/2024	04/30/2025	\$1,096,974	126,089	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	103
05/01/2025	04/30/2026	\$1,064,062	122,306	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	99
05/01/2026	04/30/2027	\$1,032,142	118,637	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	96
05/01/2027	04/30/2028	\$1,001,179	115,078	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	93
05/01/2028	04/30/2029	\$971,146	111,626	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	90
05/01/2029	04/30/2030	\$961,437	110,510	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	87
05/01/2030	04/30/2031	\$951,824	109,405	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	86
05/01/2031	04/30/2032	\$942,306	108,311	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	85
05/01/2032	04/30/2033	\$932,884	107,228	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	84
05/01/2033	04/30/2034	\$923,557	106,156	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	84
05/01/2034	04/30/2035	\$914,318	105,094	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	83
05/01/2035	04/30/2036	\$905,174	104,043	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	82
05/01/2036	04/30/2037	\$896,126	103,003	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	82
05/01/2037	04/30/2038	\$887,165	101,973	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	81
05/01/2038	04/30/2039	\$878,291	100,953	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	80
05/01/2039	04/30/2040	\$869,504	99,943	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	79
05/01/2040	04/30/2041	\$860,813	98,944	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	78
05/01/2041	04/30/2042	\$852,209	97,955	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	77
05/01/2042	04/30/2043	\$843,683	96,975	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	76
05/01/2043	04/30/2044	\$835,244	96,005	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	76
05/01/2044	04/30/2045	\$826,892	95,045	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	75
05/01/2045	04/30/2046	\$818,627	94,095	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	75
05/01/2046	04/30/2047	\$810,440	93,154	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	73
05/01/2047	04/30/2048	\$802,331	92,222	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	72
05/01/2048	04/30/2049	\$794,310	91,300	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	72
05/01/2049	04/30/2050	\$786,367	90,387	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	71
05/01/2050	04/30/2051	\$778,502	89,483	\$8.70	\$0	\$0	\$0	\$0	\$0	\$0	70

* Total contributions shown here should be contributions based upon CBUs and should not include items separately shown in any columns under "All Other Sources of Non-Investment Income."

Version Updates

Version	Date updated
v20230727	07/27/2023

v20230727

TEMPLATE 10

v20230727

Pre-2021 Zone Certification, Baseline Details, and Final SFA Assumption Summaries

File name: *Template 10 Plan Name*, where "Plan Name" is an abbreviated version of the plan name.

Provide a table identifying and summarizing which assumptions/methods were used in each of the pre-2021 certification of plan status, the Baseline details (Template 5A or Template 5B), and the final SFA calculation (Template 4A or Template 4B).

This table should identify all assumptions/methods used, including those that are reflected in the Baseline provided in Template 5A or Template 5B and any assumptions not explicitly listed. Please identify the source (file and page number) of the pre-2021 certification of plan status assumption. Additionally, please select the appropriate assumption change category per SFA assumption guidance*. Please complete all rows of Template 10. If an assumption on Template 10 does not apply to the application, please enter "N/A" and explain as necessary in the "comments" column. If the application contains assumptions not listed on Template 10, create additional rows as needed.

See the table below for a brief example of how to fill out the requested information in summary form. In the example the first row demonstrates how one would fill out the information for a change in the mortality assumption used in the pre-2021 certification of plan status, where the RP-2000 mortality table was the original assumption, and the plan proposes to change to the Pri-2012(BC) table.

	(A)	(B)	(C)	(D)	(E)														
	Source of (B)	Assumption/Method Used in Most Recent Certification of Plan Status Completed Prior to 1/1/2021	Baseline Assumption/Method Used	Final SFA Assumption/Method Used	Category of assumption change from (B) to (D) per SFA Assumption Guidance														
Base Mortality - Healthy	2019 Company XYZ AVR.pdf p. 55	RP-2000 mortality table	Pri-2012(BC) mortality table	Same as baseline	Acceptable Change														
Contribution Base Units	2020 Company XYZ ZC.pdf p. 19	125,000 hours projected to insolvency in 2024	125,000 hours projected through the SFA projection period in 2051	100,000 hours projected with 3.0% reductions annually for 10 years and 1.0% reductions annually thereafter	Generally Acceptable Change														
Assumed Withdrawal Payments -Future Withdrawals	2020 Company XYZ ZC.pdf p. 20	None assumed until insolvency in 2024	None assumed through the SFA projection period in 2051	Same as baseline	Other Change														
Retirement - Actives	2019 Company XYZ AVR.pdf p. 54	<table><tr><th>Age</th><th>Actives</th></tr><tr><td>55</td><td>10%</td></tr><tr><td>56</td><td>20%</td></tr><tr><td>57</td><td>30%</td></tr><tr><td>58</td><td>40%</td></tr><tr><td>59</td><td>50%</td></tr><tr><td>60+</td><td>100%</td></tr></table>	Age	Actives	55	10%	56	20%	57	30%	58	40%	59	50%	60+	100%	Same as Pre-2021 Zone Cert	Same as baseline	No Change
Age	Actives																		
55	10%																		
56	20%																		
57	30%																		
58	40%																		
59	50%																		
60+	100%																		

Add additional lines if needed.

*<https://www.pbgc.gov/sites/default/files/sfa/sfa-assumptions-guidance.pdf>

Template 10
Pre-2021 Zone Certification, Baseline Details, and Final SFA Assumption Summaries

v20230727

PLAN INFORMATION

Abbreviated Plan Name:	Local47
EIN:	31-1996363
PN:	001

	(A)	(B)	(C)	(D)	(E)	
	Source of (B)	Assumption/Method Used in Most Recent Certification of Plan Status Completed Prior to 1/1/2021	Baseline Assumption/Method Used	Final SFA Assumption/Method Used	Category of assumption change from (B) to (D) per SFA Assumption Guidance	Comments
SFA Measurement Date	N/A	N/A	12/31/2022	Same as Baseline	N/A	
Census Data as of	05/01/2019	05/01/2020	05/01/2022	Same as Baseline	N/A	
DEMOGRAPHIC ASSUMPTIONS						
Base Mortality - Healthy	2020Zone20200729 Local47.pdf, pg. 7	HC RP-2014 Adjusted to 2006 Mortality Table	HC RP-2014 Adjusted to 2006 Mortality Table	Same as Baseline	No Change	
Mortality Improvement - Healthy	2020Zone20200729 Local47.pdf, pg. 7	Scale MP 2019	Scale MP 2021	Same as Baseline	Acceptable Change	
Base Mortality - Disabled	2020Zone20200729 Local47.pdf, pg. 7-8	HC RP-2014 Adjusted to 2006 Mortality Table	HC RP-2014 Adjusted to 2006 Mortality Table	Same as Baseline	No Change	
Mortality Improvement - Disabled	2020Zone20200729 Local47.pdf, pg. 7-8	Scale MP 2019	Scale MP 2021	Same as Baseline	Acceptable Change	
Retirement - Actives	2020Zone20200729 Local47.pdf, pg. 7	Please refer to "Retirement - Actives" tab	Same	Same	No Change	
Retirement - TVs	Not disclosed	Later of age 60 or valuation date	Same	Same	No Change	
Turnover	20194VR Local47.pdf, pg. 43	Please refer to "Turnover" tab	Same	Same	No Change	
Disability	20194VR Local47.pdf, pg. 42	None Assumed	None Assumed	None Assumed	No Change	
Optional Form Elections - Actives	20194VR Local47.pdf, pg. 43	Benefits earned prior to May 3, 2009 are payable in the normal form as a subsidized 10 Year Certain and Life Annuity, if single or a subsidized Joint and 50% Survivor Annuity, if married. Benefits earned after May 3, 2009 are payable as a single life annuity.	Same	Same	No Change	Subordination of all forms of annuity payment for future service benefits earned after May 3, 2009 were eliminated following the Plan's Endangered Status certification for the plan year beginning May 1, 2009.
Optional Form Elections - TVs	Not disclosed	10 Year Certain and Life Annuity	Same	Same	No Change	
Marital Status	20194VR Local47.pdf, pg. 43	80% married	Same	Same	No Change	
Spouse Age Difference	20194VR Local47.pdf, pg. 43	Males are 3 years older than females	Same	Same	No Change	
Active Participant Count	20194VR Local47.pdf, pg. 4	Assumed to remain constant	Same	Decline by 1% per year until 5/1/2029 and decline by 1% per year thereafter.	Acceptable (Consistent with CBU assumption)	
New Entrant Profile	Local47 Checklist Section D - narrative.pdf, page 9	The new entrant profile reflects experience from the preceding plan year. It is assumed that each participant exiting the Plan is replaced by a new entrant.	See "New Entrant Profile" section of Section Section D narrative	Same	Acceptable Change	
Missing or Incomplete Data	N/A	N/A	N/A	N/A	No Change	
"Missing" Terminated Vested Participant Assumption	N/A	N/A	N/A	N/A	No Change	
Treatment of Participants Working Past Retirement Date	Not disclosed	Continued accruals; participants given Suspension of Benefits Notice	Same	Same	No Change	
Assumptions Related to Reciprocity	Local47 Checklist Section D - narrative.pdf, page 11	None assumed.	Same	CBUs include adjustment for reciprocity.	Other Change	
Other Demographic Assumption 1						
Other Demographic Assumption 2						
Other Demographic Assumption 3						
NON-DEMOGRAPHIC ASSUMPTIONS						
Contribution Base Units	2020Zone20200729 Local47.pdf, pg. 8	Each active employee works 1,200 hours per year	Same	134,009 CBUs for plan year ending 4/30/2023, declining 3% per year through 4/30/2029 and declining by 1% per year thereafter.	Generally Acceptable Change	Explicated throughout Section D Narrative. Please also refer to email to PBGC on 11/18/2024. Found reasonable per PBGC email on 11/20/2024.
Contribution Rate	Local47 Checklist Section D - narrative.pdf, page 9	\$7.35 effective 5/1/2020, increasing to \$7.85 effective 5/1/2021, \$8.35 effective 5/1/2022, and \$8.85 effective 5/1/2023 and later	\$7.85 effective 5/1/2021	\$8.70	Other Change	Explicated throughout Section D Narrative. Please refer to email to PBGC 11/18/2024. Found reasonable per PBGC email on 11/20/2024.
Administrative Expenses	20224VR Local47.pdf, pg. 32	Based on total administrative expenses paid in prior year with 7% annual increases	Same	See description in Local47 Checklist Section D - narrative.pdf, page 6	Other Change	Baseline was applied to all zone certifications, but not disclosed.
Assumed Withdrawal Payments - Currently Withdrawn Employees	N/A	None	None	None		There has never been a withdrawal liability assessed in the plan
Assumed Withdrawal Payments -Future Withdrawals	N/A	None	None	None		There has never been a withdrawal liability assessed in the plan
Other Assumption 1						
Other Assumption 2						
Other Assumption 3						
CASH FLOW TIMING ASSUMPTIONS						
Benefit Payment Timing	Not disclosed	Beginning of month	Same	Same		
Contribution Timing	Not disclosed	Mid-year	Same	Same		
Withdrawal Payment Timing	N/A	N/A	N/A	N/A		
Administrative Expense Timing	Not disclosed	Mid-year	Same	Same		
Other Payment Timing						

Create additional rows as needed.

Local47 - Active Retirement Assumption

Retirement is assumed at age 60 and 5 years of service, or 30 years of service

% of Retirement

Age	5-30 years of service	30 or more years of service
50	0.0%	2.5%
51	0.0%	2.5%
52	0.0%	2.5%
53	0.0%	3.0%
54	0.0%	3.0%
55	0.0%	3.0%
56	0.0%	6.0%
57	0.0%	7.5%
58	0.0%	9.0%
59	0.0%	10.0%
60	25.0%	25.0%
61	10.0%	10.0%
62	50.0%	50.0%
63	50.0%	50.0%
64	50.0%	50.0%
65	100.0%	100.0%

Age	Male	Female
25	10.00%	15.00%
30	7.50%	10.00%
35	5.00%	7.50%
40	3.00%	5.00%
45	1.50%	2.50%
50	0.00%	0.00%