

**VIA ELECTRONIC FILING**

Pension Benefit Guaranty Corporation  
1200 K Street NW  
Washington, DC 20005

**Re: Bakery Drivers Local 550 and Industry Pension Fund  
Application for Special Financial Assistance**


Dear Sir or Madam:

The undersigned Board of Trustees of the Bakery Drivers Local 550 and Industry Pension Fund (“550 Fund” or “Fund”) hereby submits this application and accompanying exhibits for Special Financial Assistance (“SFA”) under Section 4262 of the Employee Retirement Income Security Act of 1974, as amended, and the regulations promulgated pursuant thereto.


Without assistance, the Fund is projected by the Fund Actuary to become insolvent in September 2023. As insolvency for this Fund is fewer than two months away, this application is being filed with the expectation that it will be acted on with great urgency.

The 550 Fund, its retirees, and other participants look forward to your prompt review and approval of this application. Please do not hesitate to contact the authorized representatives listed in this application if you have any questions or require additional information.


Sincerely,

DocuSigned by:  
  
Dennis McGuire  
Employer Trustee

DocuSigned by:  
  
Lou Minella  
Employer Trustee

DocuSigned by:  
  
Philip Paturzo  
Employer Trustee

DocuSigned by:  
  
Michael Spinelli  
Union Trustee

DocuSigned by:  
  
Demos Demopoulos  
Union Trustee

## (1) Cover Letter and Signatures

The preceding pages provide the cover letter for the application for special financial assistance (“SFA”) with required signatures from authorized members of the Board of Trustees.

## (2) 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** Board of Trustees  
Bakery Drivers Local 550 and Industry Pension Fund  
99 Tulip Avenue, Suite 402  
Floral Park, NY 11001  
Phone: 516.328.0072

**Fund Administrator** Camille Luisi  
Fund Administrator  
Bakery Drivers Local 550 and Industry Pension Fund  
99 Tulip Avenue, Suite 402  
Floral Park, NY 11001  
Email: [local550@verizon.net](mailto:local550@verizon.net)  
Phone: 516.328.0072

**Legal Counsel** Eric R. Greene, Esq.  
Spivak Lipton LLP  
1040 Avenue of the Americas  
New York, NY 10018  
Email: [egreene@spivaklipton.com](mailto:egreene@spivaklipton.com)  
Phone: 212.765.2100

Adrienne Saldaña, Esq.  
Spivak Lipton LLP  
1040 Avenue of the Americas  
New York, NY 10018  
Email: [asaldana@spivaklipton.com](mailto:asaldana@spivaklipton.com)  
Phone: 212.765.2100

Jenna A. Agatep, Esq.  
Spivak Lipton LLP  
1040 Avenue of the Americas  
New York, NY 10018  
Email: [jagatep@spivaklipton.com](mailto:jagatep@spivaklipton.com)  
Phone: 212.765.2100

Amy Pocino Kelly, Esq.  
Morgan, Lewis & Bockius LLP  
1701 Market Street  
Philadelphia, PA 19103-2921  
Email: [amy.kelly@morganlewis.com](mailto:amy.kelly@morganlewis.com)  
Phone: 215.963.5042

**Enrolled Actuary** Joshua Kaplan  
Senior Vice President and Actuary  
Segal  
333 West 34<sup>th</sup> Street  
New York, NY 10001-2402  
Email: [jkaplan@segalco.com](mailto:jkaplan@segalco.com)  
Phone: 212.251.5173

### (3) Eligibility for SFA

The Plan is eligible for SFA because it has been certified by its actuary to be in critical and declining status as of September 1, 2022, as that was the first day of applicability of IRC section 432 for the plan year beginning November 1, 2021.

### (4) Priority Status/Emergency Application

The Plan previously submitted under priority group 2. The plan is now submitting as an emergency application under Final Rule § 4262.10(f). Without SFA, the Plan is projected to become insolvent within one year of the date of this application, specifically as of September 1, 2023 and has notified the PBGC prior to submission of this application that this application qualifies as an emergency filing.

### (5) Narrative Description of Contributions

Final Rule § 4264.4(e)(3) states that the actuarial assumptions are those used for the plan's most recently completed certification of plan status before January 1, 2021. In this case, that is the certification of plan status as of November 1, 2016. That certification indicates that the number of active participants and contribution base units (CBUs) are projected to be zero after December 17, 2016. That projection was correct until a bargaining unit with 18 active employees joined the plan effective September 1, 2022. The number of active participants is projected to remain at 18 and each participant is projected to work an average of 50 weeks per year at a \$100.00 per week contribution rate, for a total projected contribution of \$90,000 per year (\$16,200 for the short plan year from September 1, 2022 to October 31, 2022).

All previously withdrawn employers have either fully satisfied their withdrawal liability, or the withdrawal liability has been determined to be uncollectible. Therefore, there are no assumed withdrawal liability payments from previously withdrawn employers. The current employer in the plan is not expected to withdraw and therefore there are no assumed withdrawal liability payments from future employer withdrawals.

### (6) a. Assumptions for SFA Eligibility

The Plan is eligible for SFA under § 4262.3(a)(1), as it was certified to be in critical and declining status within the meaning of section 305(b)(6) of ERISA as of September 1, 2022 for the plan year beginning November 1, 2021, based on the same assumptions that were used in the most recent actuarial certification of plan status completed before January 1, 2021.

## (6) b. Changes to Assumptions for SFA Amount

The following are descriptions of the actuarial assumptions used to determine the amount of SFA that are different than those used in the most recent status certification completed before January 1, 2021, in other words, for the plan year beginning November 1, 2016 (the “2016 status certification”).

### Mortality Assumption

<b>Prior Assumption</b>	<p>For the November 1, 2016 certification of Plan status, the mortality assumption was based on the following:</p> <ul style="list-style-type: none"> <li>• <i>Healthy annuitants:</i> RP-2014 Healthy Annuitant Blue Collar Mortality tables (sex distinct), with rates increased by 10%, and generationally projected using Scale MP-2014 from 2014.</li> <li>• <i>Pre-retirement:</i> RP-2014 Blue Collar Employee Mortality tables (sex distinct), with rates increased by 10%, and generationally projected using Scale MP-2014 from 2014.</li> <li>• <i>Disabled annuitants:</i> RP-2014 Disabled Retiree Mortality tables (sex distinct), and generationally projected using Scale MP-2014 from 2014.</li> </ul>
<b>SFA Assumption</b>	<p>The mortality assumption to determine the SFA amount was updated based on the following:</p> <ul style="list-style-type: none"> <li>• <i>Healthy annuitants:</i> Pri-2012 Healthy Annuitant Blue Collar Mortality amount-weighted tables (sex distinct), generationally projected using Scale MP-2021.</li> <li>• <i>Pre-retirement:</i> Pri-2012 Blue Collar Employee Mortality amount-weighted tables (sex distinct), generationally projected using Scale MP-2021.</li> <li>• <i>Disabled annuitants:</i> Pri-2012 Disabled Retiree Mortality amount-weighted tables (sex distinct), generationally projected using Scale MP-2021.</li> </ul>
<b>Rationale for Change</b>	<p>The mortality assumption for the 2016 status certification is no longer reasonable as the 10% increase to the incidence of healthy mortality does not comply with the credibility standards referenced in § 1.430(h)(2)-3, which was published after the assumption was initially set.</p> <p>The updated assumption is consistent with the “acceptable” standard in PBGC’s guidance on assumption changes and is reasonable for determining the amount of SFA.</p>

## Contribution Base Units (CBUs)

<b>Prior Assumption</b>	CBUs are covered weeks. In the 2016 status certification, covered weeks were assumed to be zero weeks of contribution from December 17, 2016 through the projected date of insolvency.
<b>SFA Assumption</b>	For the Baseline (Template 5) projection, the CBUs were projected to remain at zero weeks from the point of projected insolvency through October 31, 2051.
<b>Rationale for Change</b>	The changed assumption is an extension of the CBU assumption as described in Paragraph A, "Adoption of assumptions not previously factored into the pre-2021 certification of plan status," of Section III, Acceptable Assumption Changes, in PBGC's SFA assumptions guidance.
<b>SFA Assumption</b>	For determining the SFA amount, the CBUs were projected to be 900 weeks per year from September 1, 2022 through October 31, 2051 (162 weeks for the short plan year from September 1, 2022 to October 31, 2022).
<b>Rationale for Change</b>	The prior assumption was unreasonable because it did not take into account the new bargaining unit that joined the plan effective September 1, 2022. The changed assumption recognizes the bargaining group that joined the plan effective September 1, 2022.

## Withdrawal Liability Payments

<b>Prior Assumption</b>	As of the 2016 status certification, there were no assumed withdrawal liability payments due through the projected date of insolvency.
<b>SFA Assumption</b>	For determining the SFA amount, withdrawal liability payments were projected to remain at zero from the point of projected insolvency through October 31, 2051.
<b>Rationale for Change</b>	The prior assumption was unreasonable because it did not project past the point of projected insolvency. The changed assumption is an extension consistent with the methodology of the CBU assumption as described in Paragraph A, "Adoption of assumptions not previously factored into the pre-2021 certification of plan status," of Section III, Acceptable Assumption Changes, in PBGC's SFA assumptions guidance.

## Administrative Expenses

<b>Prior Assumption</b>	<p>The 2016 status certification projected administrative expenses assuming:</p> <ul style="list-style-type: none"> <li>• \$208,080 per year, payable monthly, (\$200,130 as of the beginning of the year) for the Plan year beginning November 1, 2016.</li> <li>• Administrative expenses are assumed to increase with inflation of 2.0% per year for each year after November 1, 2016 through the projected date of insolvency.</li> </ul>
-------------------------	---

<b>SFA Assumption</b>	For the Baseline (Template 5) projection, the administrative expenses are projected to continue to increase by the assumed inflation rate of 2.0% per year from the projected date of insolvency through October 31, 2051. In addition, the administrative expenses are projected to increase by \$8,349 in the year beginning November 1, 2031 based on 759 projected participants and a projected \$11 increase (from \$41 to \$52) in the PBGC premium. The projected expenses were limited to 12% of the expected benefit payments in each year.
<b>Rationale for Change</b>	This assumption change is an extension of 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, in PBGC's SFA assumptions guidance.
<b>SFA Assumption</b>	<p>For the determination of the SFA amount, the administrative expense assumption is based on the actual administrative expenses of \$316,449 for the full plan year ended October 31, 2021. This amount (and the adjustments discussed below) are projected to increase by the assumed inflation rate of 2.0% per year through October 31, 2051. This projection then has the following additional adjustments:</p> <ul style="list-style-type: none"> <li>• Similar to the Baseline projection, there is a \$8,580 increase in the year beginning November 1, 2031 based on 780 projected participants and a projected \$11 increase (from \$41 to \$52) in the PBGC premium.</li> <li>• There is an adjustment for a one-time expense of \$600,000 for the plan year ending October 31, 2023 due to professional fees related to the initial and revised filings of the SFA application.</li> <li>• There is an assumed \$60,387 increase in ongoing administrative expenses in the plan year beginning November 1, 2022 and ending October 31, 2023.</li> </ul> <p>The projected expenses were limited to 15% of the expected benefit payments in each year.</p> <p>Note that the expenses for the four-month period ending October 31, 2022 were set equal to the actual expenses paid during that period.</p> <p>Also note that a breakout of the projected PBGC premiums was provided as requested. However, the assumption is based on total projected expenses. The "other" expenses is simply the total expenses less the PBGC premium.</p>
<b>Rationale for Change</b>	<p><i>Baseline Amount</i></p> <p>The prior administrative expense assumption from the 2016 status certification was set shortly after the earlier transfer of participants to the Teamsters Bakery Drivers and Industry Pension Fund and the mass withdrawal in this Fund. At that time, the allocation of costs to each Fund was purely speculative. Actual expenses since that time have consistently and significantly exceeded the prior assumption. Therefore, the prior assumption is unreasonable. It is reasonable to base future assumed administrative expenses on the most-recent full plan year expenses.</p> <p><i>Adjustment for SFA fees</i></p> <p>The SFA application is a substantial project and there were a number of complex issues unique to this application. The Fund must compensate its professionals for this work. Based on actual amounts already or soon to be</p>

billed by the plan professionals, \$600,000 is a reasonable estimate for this expense.

#### *Adjustment to ongoing expenses*

This Fund shared ongoing administrative expenses with two other funds, namely the Bakery Drivers Local 550 and Industry Welfare Fund ("BD 550 WF") and the Teamsters Bakery Drivers and Industry Pension Fund ("TBD PF"). For the year ended October 31, 2021, the total common administrative expenses were \$342,741, which were allocated \$126,855 to this Fund, \$47,812 to the BD 550 WF, and \$168,054 to the TBD PF. The BD 550 WF is in the process of closing down and as of January 1, 2022 no expenses are allocated to that fund. Therefore, the common expenses will be allocated among the two remaining funds. We have assumed that the expenses previously allocated to the BD 550 WF will be allocated proportionally to the current allocations. Therefore, the additional allocation to this Fund will be  $\$47,812 \times \$126,855 / (\$126,855 + \$168,054) = \$20,566$ . When adjusted for two years of 2.0% inflation, the increase for the plan year ending October 31, 2023 is \$21,397.

The actuarial consulting retainer amount was \$50,000 in 2010. Due to the Fund's projected insolvency, it was agreed not to increase this amount. After the Fund's mass withdrawal, this retainer amount was further reduced to \$25,000 due to no longer needing a funding valuation, an annual zone certification, etc. As the Fund has been restored, these requirements will resume. Furthermore, the Fund will no longer be facing imminent insolvency. Therefore, the Trustees have agreed to that the earlier retainer amount should be adjusted for inflation and therefore increased to \$65,000 for year-end 2023. The projected actuarial fees for the plan year ending October 31, 2023 based on the actual expenses for the plan year ended October 31, 2021 were  $\$25,000 \times 1.02^2 = \$26,010$ . Therefore, it is reasonable that the assumed expenses will increase by \$38,990 (\$65,000 less \$26,010) for the year ending October 31, 2023.

#### *Limitation based on benefit payments*

The prior assumption of 12% is not reasonable based on the level of benefit payments that will be in effect when this limitation becomes effective. Based on the "acceptable" assumption, the limitation would be 12%. But this rule is based on the *current* level of benefit payments. The limitation (based on 12%) would not kick in until the plan year beginning November 1, 2042. At that time, the benefit payments are projected to be below \$5 million per year. If the "acceptable" assumption for a similar plan applying at that time would be a 15% limitation, clearly that should be the appropriate and reasonable assumption for those same payment years for a plan applying today.

## Form of Payment Election

<b>Prior Assumption</b>	80% of participants (all those assumed to be married) elect the 50% Joint and Survivor Annuity 20% of participants (all those assumed to be unmarried) elect the Single Life Annuity
<b>SFA Assumption</b>	35% elect the 50% Joint and Survivor Annuity 12% elect the 75% Joint and Survivor Annuity 53% elect the Single Life Annuity
<b>Rationale for Change</b>	The prior assumption is no longer reasonable as it is not consistent with actual plan experience.  The new assumption is reasonable as it is consistent with actual plan experience based on a review of all new retirements over the fifteen-year period that ended October 31, 2020. The actual experience for form of payment election is shown in the chart below. Note that the Single Life Annuity with the 3-year and 5-year certain periods are no longer offered by the Plan and therefore all Single Life Annuity forms were aggregated for the assumption. The 50% Joint and Survivor and the 50% Joint and Survivor with “Pop-up” were deemed sufficiently similar and were therefore aggregated for purposes of the assumption.

## Historical Data on Form of Payment Election

Number and Percentage of Participants Electing Each of the Forms of Payment during the Period November 1, 2005 to October 31, 2020		
Form of Payment	Number Electing Form of Payment	Percentage Electing Form of Payment
Single Life Annuity	55	12%
Single Life Annuity with 3-year certain period	71	15%
Single Life Annuity with 5-year certain period	122	26%
50% Joint and Survivor Annuity	98	21%
50% Joint and Survivor Annuity with “Pop-up”	66	14%
75% Joint and Survivor Annuity	57	12%
Total	469	100%

## New Entrant Profile

<b>Prior Assumption</b>	There was no assumption for new entrants in the November 1, 2016 actuarial certification of plan status.
<b>SFA Assumption</b>	The assumption for new entrants as of September 1, 2022 is based on the demographic information for the actual group of new entrants on that date. New entrants after September 1, 2022 are based on the demographics and hire dates of that same group of participants. One-year age banding was used and new entrants are assumed to start with zero service at age of hire. Specifically, the new entrant profile is as follows:



	Count	Percent of Total	Sex	Age at September 1, 2022	Age at Hire
	2	11.11%	M	25	24
	1	5.56%	M	28	27
	1	5.56%	M	28	28
	1	5.56%	M	29	28
	3	16.67%	M	30	29
	1	5.56%	F	34	31
	1	5.56%	M	36	35
	1	5.56%	M	41	40
	1	5.56%	M	41	41
	1	5.56%	M	43	43
	1	5.56%	M	46	40
	1	5.56%	M	50	49
	1	5.56%	M	57	56
	1	5.56%	M	59	58
	1	5.56%	M	63	62

**Rationale for Change** There was no prior assumption for new entrants, as there was no future employment assumed, so there needs to be an assumption added for the current bargaining group that is projected to maintain level employment. The first group of new entrants is based on the actual group of active employees who entered the plan on September 1, 2022. New entrants after September 1, 2022 are expected to be demographically similar to the initial group of new entrants.

## (7) Reinstatement of Suspended Benefits

As of the date of the SFA application, the Plan has not suspended benefits under section 305(e)(9) or section 4245(a) of ERISA. However, if the Plan does not receive SFA prior to September 1, 2023, the Plan is expected to suspend benefits under section 4245(a) of ERISA. If benefits are suspended, the Plan will reinstate the benefits that were previously suspended for participants and beneficiaries effective as of the first month in which the SFA is paid to the Fund. The Fund will provide make-up payments equal to the amount of benefits previously suspended to any participants or beneficiaries who are in pay status as of the date that the SFA is paid to the Fund. The make-up payments will be paid in a single lump sum no later than 3 months after the date that the SFA is paid to the Fund.

## Section E, Item 5: Certification of SFA Amount

### Certification of the Amount of Special Financial Assistance

This is a certification that the amount of special financial assistance (“SFA”) requested in this application, \$126,160,291, is the amount to which the Bakery Drivers Local 550 and Industry Pension Fund (“Fund”) is entitled under §4262(j)(1) of ERISA and §4262.4 of the final rule issued by the Pension Benefit Guaranty Corporation’s (“PBGC”).

#### Base Data

The “base data” used in the calculation of the SFA amount include:

- SFA measurement date of June 30, 2022
- Participant census data as of October 31, 2020
- Non-SFA interest rate of 5.38% and SFA interest rate of 3.07%, as prescribed under §4262.4, paragraphs (e)(1) and (e)(2), respectively.

#### Census Data

The participant census data used to calculate the SFA amount is the same as the data used in the actuarial valuation as of October 31, 2020, except that it excludes participants who were identified as deceased prior to October 31, 2020 by the death audit performed by PBGC on the terminated vested data. Note that the Fund’s death audit did not reveal any additional deaths.

Specifically, the data was adjusted to exclude two participants that were determined by the PBGC death audit to be deceased prior to October 31, 2020. Of these two deaths, one participant was determined to have a spouse eligible for future benefits and that spouse was included in the SFA data census.

#### Actuarial Statement

Segal has performed the calculation of the SFA amount at the request of the Board of Trustees of the Bakery Drivers Local 550 and Industry Pension Fund as part of the Plan’s application for SFA. The calculation of the SFA amount shown in the Fund’s application for SFA is not applicable for other purposes.

In general, the actuarial assumptions and methods used in the calculation of the SFA amount are the same as those used in the certification of the Plan’s status as of November 1, 2016, dated January 27, 2017. Assumptions that were extended or otherwise changed for purposes of calculating the SFA amount include those related to interest rate, mortality, contribution base units, withdrawal liability payments, benefit election forms, administrative expenses, and future new entrants. Section D, item 6.b. of the Plan’s application for SFA includes descriptions and justifications of the assumption changes.

Segal has performed the calculation of the SFA amount in accordance with generally accepted actuarial principles and practices, as well as the provisions under §4262.4 of PBGC’s SFA final rule. The calculation is based on the fair market value of assets as of the SFA measurement date, as certified by the Board of Trustees, and other relevant information provided by the Plan Administrator.

**Bakery Drivers Local 550 and Industry Pension Fund**

EIN 13-6626195, PN 001 | Application for Special Financial Assistance | Section E, Item 5

Segal 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, Segal 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.

Segal does not practice law and, therefore, cannot and does not provide legal advice. Any statutory interpretation on which these calculations are based reflects Segal's understanding as an actuarial firm.

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 considering the experience of the Plan and reasonable expectations.



Joshua Kaplan, FSA, FCA, MAAA, EA  
Senior Vice President and Actuary  
Enrolled Actuary No. 23-05487

July 24, 2023

**Penalty of Perjury Statement Pursuant to PBGC Regulation § 4262.6(b)**

Under penalty of perjury under the laws of the United States of America, I declare 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.

Name: Demos Demopoulos

Union Trustee

Signature:  \_\_\_\_\_

Date: 7/28/2023

**Penalty of Perjury Statement Pursuant to PBGC Regulation § 4262.6(b)**

Under penalty of perjury under the laws of the United States of America, I declare 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.

Name: Dennis McGuire

Employer Trustee

Signature:  [REDACTED]


Date: 7/27/2023

**Penalty of Perjury Statement Pursuant to PBGC Regulation § 4262.6(b)**

Under penalty of perjury under the laws of the United States of America, I declare 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.

Name: Lou Minella

Employer Trustee

Signature:  DocuSigned by: [Handwritten Signature] [REDACTED]

Date: 7/27/2023

**Penalty of Perjury Statement Pursuant to PBGC Regulation § 4262.6(b)**

Under penalty of perjury under the laws of the United States of America, I declare 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.

Name: MICHAEL SPINELLI

Union Trustee

Signature:  [REDACTED]

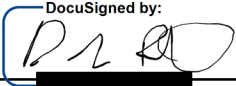
Date: 7/27/2023

**Penalty of Perjury Statement Pursuant to PBGC Regulation § 4262.6(b)**

Under penalty of perjury under the laws of the United States of America, I declare 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.

Name: Philip Paturzo

Employer Trustee

Signature:  [REDACTED]

Date: 7/27/2023



## 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](http://www.pbgc.gov), will be updated when the e-Filing Portal reopens for applications. PBGC maintains information on its website at [www.pbgc.gov](http://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](http://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
---------	--------------

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:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
<b>Plan Information, Checklist, and Certifications</b>									
a.		Is this application a revised application submitted after the denial of a previously filed application for SFA?	Yes No	Yes	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	No	N/A	N/A	If a "lock-in" application was filed, provide the filing date.	N/A	N/A
e.		Has this plan been terminated?	Yes No	Yes	N/A	N/A	Plan terminated by mass withdrawal 12/17/2016 and was restored 9/1/2022	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	Plan Restatement 2014 BD 550 PF.pdf Plan Amendments 1-6 BD 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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	Trust Agreement BD 550 PF.pdf Trust Resolutions DB 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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	IRS Determination Letter 2015 BD 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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	2018AVR BD 550 PF.pdf 2019AVR BD 550 PF.pdf 2020AVR BD 550 PF.pdf	N/A	There are 3 reports provided, for 2018, 2019, and 2020. DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	Most recent actuarial valuation for the plan	YYYYAVR Plan Name
5.a.	Section B, Item (3)	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	Rehabilitation Plan BD 550 PF.pdf	N/A	There were no contributions in the most recent plan year. The last time there were contributions, all were under the Default Schedule. Currently there is only a Default Schedule. DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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.		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	N/A		N/A	Documentation of rehabilitation plan changes is included in the rehabilitation plan document attached	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	2020Form 5500 BD 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	Latest annual return/report of employee benefit plan (Form 5500)	YYYYForm5500 Plan Name
7.a.		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	2021Zone20220906 BD 550 PF.pdf	N/A	There is one zone certification provided, for the 2021 plan year. No zone certifications were prepared for the 2018, 2019, or 2020 plan years. DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	Zone certification	YYYYZoneYYYYMMDD Plan Name, where the first "YYYY" is the applicable plan year, and "YYYYMMDD" is the date the certification was prepared.
7.b.	Section B, Item (5)	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:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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	Account Statements BD 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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	2021 Financial Statement BD 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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	WDL BD 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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	Death Audit BD 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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	N/A	N/A - include as part of documents in Checklist Item #11.a.	N/A	The Fund's death audit did not identify any deaths that occurred before the date of the census data used for SFA purposes.	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	Yes	Terminated Vested Participants BD 550 PF.xlsx	N/A	DOCUMENT PREVIOUSLY PROVIDED VIA LEAPFILE. Response was received and changes are reflected in this application.	Submit the data file and the date of the census data through PBGC's secure file transfer system, Leapfile. Go to <a href="http://pbgc.leapfile.com">http://pbgc.leapfile.com</a> , click on "Secure Upload" and then enter <a href="mailto:sfa@pbgc.gov">sfa@pbgc.gov</a> 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)

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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	Payment Form BD 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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	Yes	Template 1 BD 550 PF.xlsx	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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	The plan is not required to provide this information as it has less than 10,000 participants	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 BD 550 PF.xlsx	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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, 4A-4 SFA Details .4(a)(1) 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 BD 550 PF.xlsx	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, 4A-5 SFA Details .4(a)(2)(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	The plan is not a MPRA plan	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, 4A-5 SFA Details .4(a)(2)(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	The plan is not a MPRA plan	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 4B-1 SFA Ben Pmts sheet, 4B-2 SFA Details 4(a)(2)(ii) sheet, and 4B-3 SFA Exhaustion 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	The plan is not a MPRA plan	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, 4A-1 Interest Rates 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:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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.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 <u>basic method</u> 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 5A BD 550 PF.xlsx	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 <u>increasing assets method</u> , 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 <u>increasing assets method</u> 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	The plan is not a MPRA plan	Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 5A Plan Name

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

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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	The plan is not a MPRA plan	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 BD 550 PF.xlsx	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)

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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	The plan is not a MPRA plan	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	The plan is not a MPRA plan	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)

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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	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.	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 BD 550 PF.xlsx	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 BD 550 PF.xlsx	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:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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		N/A	The file name is <i>Template 10 BD 550 PF.xlsx</i> . Note cell F53 is password protected.	Financial assistance spreadsheet (template)	<i>Template 10 Plan Name</i>
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 BD 550 PF.pdf	Page 1	Identify here the name of the single document that includes all information requested in Section D of the SFA Filing Instructions (Checklist Items #21 through #28.c.).	Financial Assistance Application	<i>SFA App Plan Name</i>
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	For each Checklist Item #21 through #28.c., identify the relevant page number(s) within the single document.	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		The plan is not a MPRA plan	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 2		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 3	The plan is eligible for SFA because it is a critical and declining plan	N/A	N/A - included as part of SFA App Plan Name

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

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
26.a.		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	Page 3	This application is being filed after March 11, 2023, but the plan previously filed under priority group 2	N/A	N/A - included as part of SFA App Plan Name
26.b.	Section D, Item (4)	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	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
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 3		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	N/A	N/A - included as part of SFA App Plan Name		There are no such assumption changes	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 4-9		N/A	N/A - included as part of SFA App Plan Name

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

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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		The mortality assumption does not use a plan-specific mortality table or a plan-specific adjustment to a standard mortality table for determining the SFA amount.	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	Yes	N/A - included as part of SFA App Plan Name	Page 9	The plan has not implemented a suspension of benefits but this description has been included because the plan may implement a suspension of benefits prior to the receipt of SFA	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	Yes	N/A - included as part of SFA App Plan Name	Page 9		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		The plan did not restore benefits under 26 CFR 1.432(e)(9)-1(e)(3) before the SFA measurement date	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 BD 550 PF.xlsx	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:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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	The plan is not required to submit the additional information described in Addendum 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	Yes	SFA Elig Cert CD BD 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	Financial Assistance Application	SFA Elig Cert CD Plan Name



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

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
32.a.	Section E, Item (3)	<p>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:</p> <p>(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)?</p> <p>(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?</p> <p>(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?</p> <p>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?</p> <p>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.</p> <p>Is the information for Checklist Items #32.a. and #32.b. contained in a single document and uploaded using the required filenaming convention?</p>		N/A		N/A	The plan is not claiming eligibility under section 4262.3(a)(3) of PBGC's SFA regulation	Financial Assistance Application	SFA Elig Cert C Plan Name
32.b.	Section E, Item (3)	<p>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:</p> <p>(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)</p> <p>(ii) derivation of the modified funded percentage</p> <p>(iii) derivation of the participant ratio</p> <p>Does the certification identify what test(s) under section 305(b)(2) of ERISA is met for the specified year listed above?</p> <p>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?</p> <p>Enter N/A if the plan does not claim SFA eligibility under §4262.3(a)(3).</p>	Yes No N/A	N/A	N/A - included with SFA Elig Cert C Plan Name	N/A	Checklist Item #31.a is 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)

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
33.	Section E, Item (4)	<p>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?</p> <p>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 <a href="http://www.pbgc.gov">www.pbgc.gov</a> as being in priority group 6. See § 4262.10(d).</p> <p>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?</p> <p>Is the filename uploaded using the required filenaming convention?</p>	Yes No N/A	N/A	PG Cert BD 550 PF.pdf	N/A	The application is being submitted after March 11, 2023. Note the prior application was submitted prior to March 11, 2023 and included this certification. DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	Financial Assistance Application	PG Cert Plan Name
34.a.		<p>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:</p> <p>(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?</p> <p>(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?</p> <p>Is the information in Checklist #34.a. combined with #34.b. (if applicable) as a single document, and uploaded using the required filenaming convention?</p>	Yes No	Yes	SFA Amount Cert BD 550 PF.pdf	N/A		Financial Assistance Application	SFA Amount Cert Plan Name
34.b.	Section E, Item (5)	<p>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)?</p> <p>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?</p> <p>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?</p> <p>Enter N/A if the plan is not a MPRA plan.</p>	Yes No N/A	N/A	N/A - included with SFA Amount Cert Plan Name	N/A	The plan is not a MPRA plan	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:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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	FMV Cert BD 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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	Compliance Amend BD 550 PF.pdf	N/A	DOCUMENT(S) PREVIOUSLY PROVIDED IN SFA APPLICATION DATED 9/28/2022	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(c)(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	Yes	Reinstatement Amend BD 550 PF. pdf	N/A	The plan has not suspended benefits but may prior to the receipt of SFA	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	The plan was not partitioned	Pension plan documents, all versions available, and all amendments signed and dated	Partition Amend Plan Name

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

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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 BD 550 PF.pdf	N/A		Financial Assistance Application	<i>Penalty Plan Name</i>
<b>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)</b>									
<b>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.</b>									
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 <u>using the basic method</u> described in § 4262.4(a)(1) <u>as if any events had not occurred?</u> 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

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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 .4(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)

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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)

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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

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

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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.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	<i>SFA Amount Cert Plan Name Merged CE</i>  "Plan Name Merged" is an abbreviated version of the plan name for the separate plan involved in the merger.
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
-----	---	---	-----------	--	--	-----	--	---	-----



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

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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
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

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

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
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
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	<i>WDL Plan Name Merged</i> , 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	<i>Death Audit Plan Name Merged</i> , 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)	<i>Template 1 Plan Name Merged</i> , 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	<i>Template 2 Plan Name Merged</i> , 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)	<i>Template 3 Plan Name Merged</i> , where "Plan Name Merged" is an abbreviated version of the plan name for the plan merged into this plan.

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

v20230727

APPLICATION CHECKLIST

Plan name:	Bakery Drivers Local 550 and Industry Pension Fund
EIN:	13-6626195
PN:	001
SFA Amount Requested:	\$126,160,291.00

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
------------------	-----------------------------------	------------------	---------------	--------------------------	--------------------------	---------------	---	--------------------------------



Jeremy Kleiman  
Senior Associate Benefits Consultant  
T 212.251.5184  
jkleiman@segalco.com

333 West 34th Street  
New York, NY 10001-2402  
segalco.com

## Memorandum

**To:** Board of Trustees of the Bakery Drivers Local 550 and Industry Pension Fund

**From:** Jeremy Kleiman

**Date:** July 20, 2023

**Re:** Segal Retainer Increase Request for the Bakery Drivers Local 550 and Industry Pension Fund ("the Fund")

As a matter of formally documenting the already agreed upon increase to Segal's retainer, this memo will provide background related to Segal's retainer, and documentation of our future increases.

When the Fund was terminated by Mass Withdrawal, Segal's retainer fees were \$50,000 annually. However, reflecting the reduced actuarial requirement for a mass withdrawal plan and recognizing the Fund's impending insolvency, Segal offered to reduce our fee to where it currently stands, at \$25,000 annually. The reduced retainer fee was effective for the year beginning January 1, 2017. Please note that the retainer fee of \$50,000 was in place since 2009 and had not increased between 2009 and 2017.

Segal is requesting that the Fund increase our annual retainer fee to \$65,000, effective January 1, 2023, contingent on the Fund receiving Special Financial Assistance ("SFA"). This would be an increase commensurate to the Fund's fee of \$50,000 (prior to the mass withdrawal reduction), with a modest inflationary increase of approximately 2% compounded annually over the period between when the \$50,000 retainer fee went into effect the proposed effective date. Should the Fund not qualify for SFA, the current retainer fee of \$25,000 annually, would remain in effect. The Trustees can signify their agreement by signing and returning this document. A formal retainer agreement will be presented to the Board of Trustees upon approval for SFA.

DocuSigned by:

Handwritten signature of Dennis McGuire in black ink.

Dennis McGuire  
Employer Trustee

Date: 7/27/2023

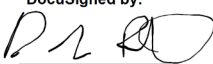
DocuSigned by:

Handwritten signature of Lou Minella in black ink.


Lou Minella  
Employer Trustee

Date: 7/27/2023


July 20, 2023  
Page 2

DocuSigned by:  
  
\_\_\_\_\_  
Philip Faturzo  
Employer Trustee

Date: 7/27/2023

DocuSigned by:  
  
\_\_\_\_\_  
Demos Demopoulos  
Union Trustee

Date: 7/28/2023

DocuSigned by:  
  
\_\_\_\_\_  
Michael Spinelli  
Union Trustee

Date: 7/27/2023

cc: Ms. Camille Luisi  
Fund Counsel  
Mr. Josh Kaplan

**AMENDMENT TO THE  
BAKERY DRIVERS LOCAL 550 AND INDUSTRY PENSION FUND  
2014 RULES AND REGULATIONS  
TO REINSTATE SUSPENDED BENEFITS**

**Background**

1. The Board of Trustees of the Bakery Drivers Local 550 and Industry Pension Fund (the “Board”) has applied to the Pension Benefit Guaranty Corporation (“PBGC”) under section 4262 of the Employment Retirement Income Security Act of 1974, as amended (“ERISA”), and 29 C.F.R. § 4262 for Special Financial Assistance (“SFA”) for the Bakery Drivers Local 550 and Industry Pension Fund (the “Plan”).
2. 29 C.F.R. §§ 4262.6(e)(2) and 4262.15(a) require that the plan sponsor of a plan that is applying for SFA, and that suspended benefits under section 305(e)(9) or 4245(a) of ERISA, amend the written instrument governing the plan to reinstate such suspended benefits and provide make-up payments in accordance with guidance issued by the Secretary of the Treasury under section 432(k) of the Internal Revenue Code (which was issued in IRS Notice No. 2021-38).
3. 29 C.F.R. § 4262.7(e)(2) requires that an application for SFA for a plan that suspended benefits under section 305(e)(9) or 4245(a) of ERISA include a copy of the proposed plan amendment required under section 4262.6(e)(2) of ERISA and certification by the plan sponsor that the plan amendment will be timely adopted. Section 4262.7(e)(2) further requires (1) that such certification be signed either by all members of the plan’s board of trustees or by one or more trustees duly authorized both to sign the certification on behalf of the entire board and to commit the board to timely adopting the amendment after the plan’s application for SFA is approved, and (2) that each signature be accompanied by the printed name and title of the signer.
4. Benefits under the Plan have been suspended under section 4245(a) of ERISA due to plan insolvency.
5. Under Article 8 of the Bakery Drivers Local 550 and Industry Pension Fund Rules and Regulations, effective December 31, 2014, (the “Plan Document”), the Board has the power to amend the Plan Document.

**Amendment**

The Plan Document is amended by adding a new Article 12 to read as follows:

“Effective as of the first month in which special financial assistance is paid to the Plan, the Plan shall reinstate all benefits that were suspended under 4245(a) of ERISA.

The Plan shall pay each participant and beneficiary that is in pay status as of the date special financial assistance is paid to the Plan the aggregate amount of their benefits that were not paid because of the suspension, with no actuarial adjustment or interest. Such payment shall be made in a lump sum no later than 3 months after the date the special financial assistance is paid to the Plan, irrespective of whether the participant or beneficiary dies after the date special financial assistance is paid.”

\_\_\_\_\_  
Dennis McGuire  
Employer Trustee

\_\_\_\_\_  
Michael Spinelli  
Union Trustee

\_\_\_\_\_  
Lou Minella  
Employer Trustee


\_\_\_\_\_  
Demos Demopoulos  
Union Trustee


\_\_\_\_\_  
Philip Paturzo  
Employer Trustee

Date:


**CERTIFICATION THAT THE PLAN AMENDMENT  
TO REINSTATE SUSPENDED BENEFITS WILL BE TIMELY ADOPTED**


As required by 29 C.F.R. § 4262.7(e)(2) for the application for special financial assistance for the Bakery Drivers Local 550 and Industry Pension Fund (the "Application" for the "Plan"), we, the members of the Board of Trustees of the Plan, hereby certify that the proposed amendment to the Bakery Drivers Local 550 and Industry Pension Fund Rules and Regulations, effective December 31, 2014, to reinstate benefits under the Plan that have been suspended under section 4245(a) of ERISA due to plan insolvency, which proposed amendment is submitted herewith as part of the Application, will be timely adopted upon approval by the Pension Benefit Guaranty Corporation of the Application.

DocuSigned by:  
 7/27/2023  
\_\_\_\_\_  
Dennis McGuire  
Employer Trustee

DocuSigned by:  
 7/27/2023  
\_\_\_\_\_  
Michael Spinelli  
Union Trustee

DocuSigned by:  
 7/27/2023  
\_\_\_\_\_  
Lou Minella  
Employer Trustee

DocuSigned by:  
 6/28/2023  
\_\_\_\_\_  
Demos Demopoulos  
Union Trustee

DocuSigned by:  
 7/27/2023  
\_\_\_\_\_  
Philip Paturzo  
Employer Trustee



## 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	

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:	BD 550 PF
EIN:	13-6626195
PN:	001
Initial Application Date:	09/28/2022
SFA Measurement Date:	06/30/2022
Last day of first plan year ending after the measurement date:	10/31/2022

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:	5.38%	Rate used in projection of non-SFA assets.
SFA Interest Rate Used:	3.07%	Rate used in projection of SFA assets.

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

Plan Interest Rate:	7.50%	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):	September 2022	1.41%	3.09%	3.58%	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 <a href="#">IRS Notice 21-50</a> 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' <a href="#">Funding Yield Curve Segment Rate Tables</a> web page (See Funding Table 3 under the heading "24-Month Average Segment Rates Not Adjusted").
1 month preceding month in which plan's initial application is filed, and corresponding segment rates:	August 2022	1.27%	2.99%	3.51%	
2 months preceding month in which plan's initial application is filed, and corresponding segment rates:	July 2022	1.14%	2.89%	3.44%	
3 months preceding month in which plan's initial application is filed, and corresponding segment rates:	June 2022	1.02%	2.80%	3.38%	

Non-SFA Interest Rate Limit (lowest 3rd segment rate plus 200 basis points):	5.38%	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):	5.38%	This amount is calculated based on the other information entered above.
Non-SFA Interest Rate Match Check:	Match	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):	3.07%	This amount is calculated based on the other information entered.
SFA Interest Rate Calculation (lesser of Plan Interest Rate and SFA Interest Rate Limit):	3.07%	This amount is calculated based on the other information entered above.
SFA Interest Rate Match Check:	Match	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:	BD 550 PF
EIN:	13-6626195
PN:	001
SFA Measurement Date:	06/30/2022

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
06/30/2022	10/31/2022	\$3,245,141	\$105,583	\$0	\$0	\$3,350,724
11/01/2022	10/31/2023	\$9,391,599	\$491,929	\$0	\$0	\$9,883,528
11/01/2023	10/31/2024	\$9,039,710	\$681,781	\$0	\$0	\$9,721,491
11/01/2024	10/31/2025	\$8,680,935	\$902,747	\$0	\$0	\$9,583,683
11/01/2025	10/31/2026	\$8,316,498	\$1,079,047	\$0	\$0	\$9,395,545
11/01/2026	10/31/2027	\$7,947,611	\$1,268,008	\$0	\$0	\$9,215,619
11/01/2027	10/31/2028	\$7,575,442	\$1,425,645	\$0	\$2,535	\$9,003,623
11/01/2028	10/31/2029	\$7,201,108	\$1,577,652	\$0	\$5,555	\$8,784,315
11/01/2029	10/31/2030	\$6,825,668	\$1,701,706	\$0	\$5,770	\$8,533,144
11/01/2030	10/31/2031	\$6,450,168	\$1,837,809	\$0	\$9,871	\$8,297,848
11/01/2031	10/31/2032	\$6,075,703	\$2,014,023	\$0	\$10,367	\$8,100,093
11/01/2032	10/31/2033	\$5,703,443	\$2,111,291	\$0	\$11,284	\$7,826,017
11/01/2033	10/31/2034	\$5,334,672	\$2,175,404	\$0	\$12,261	\$7,522,337
11/01/2034	10/31/2035	\$4,970,811	\$2,268,356	\$0	\$13,190	\$7,252,356
11/01/2035	10/31/2036	\$4,613,336	\$2,307,287	\$0	\$14,119	\$6,934,743
11/01/2036	10/31/2037	\$4,263,733	\$2,396,911	\$0	\$15,125	\$6,675,768
11/01/2037	10/31/2038	\$3,923,439	\$2,441,081	\$0	\$21,523	\$6,386,043
11/01/2038	10/31/2039	\$3,593,787	\$2,465,313	\$0	\$23,563	\$6,082,663
11/01/2039	10/31/2040	\$3,275,981	\$2,480,140	\$0	\$25,764	\$5,781,885
11/01/2040	10/31/2041	\$2,971,116	\$2,455,361	\$0	\$28,044	\$5,454,521
11/01/2041	10/31/2042	\$2,680,155	\$2,419,810	\$0	\$33,294	\$5,133,259
11/01/2042	10/31/2043	\$2,403,961	\$2,363,450	\$0	\$35,797	\$4,803,208
11/01/2043	10/31/2044	\$2,143,314	\$2,310,403	\$0	\$38,822	\$4,492,539
11/01/2044	10/31/2045	\$1,898,903	\$2,234,131	\$0	\$44,529	\$4,177,563
11/01/2045	10/31/2046	\$1,671,324	\$2,162,040	\$0	\$50,155	\$3,883,519
11/01/2046	10/31/2047	\$1,461,039	\$2,076,524	\$0	\$55,111	\$3,592,673
11/01/2047	10/31/2048	\$1,268,321	\$1,991,427	\$0	\$57,865	\$3,317,612
11/01/2048	10/31/2049	\$1,093,184	\$1,902,085	\$0	\$61,462	\$3,056,731
11/01/2049	10/31/2050	\$935,354	\$1,804,018	\$0	\$64,894	\$2,804,266
11/01/2050	10/31/2051	\$794,296	\$1,702,665	\$0	\$68,757	\$2,565,717



**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:	BD 550 PF
EIN:	13-6626195
PN:	001
SFA Measurement Date:	06/30/2022

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

SFA Measurement Date / Plan Year Start Date		Plan Year End Date	Total Participant Count at Beginning of Plan Year	PROJECTED ADMINISTRATIVE EXPENSES for:		
				PBGC Premiums	Other	Total
06/30/2022	10/31/2022	N/A		\$35,072	\$87,022	\$122,094
11/01/2022	10/31/2023	1080		\$34,560	\$955,061	\$989,621
11/01/2023	10/31/2024	1046		\$36,610	\$360,803	\$397,413
11/01/2024	10/31/2025	1012		\$36,432	\$368,929	\$405,361
11/01/2025	10/31/2026	978		\$35,208	\$378,260	\$413,468
11/01/2026	10/31/2027	943		\$34,891	\$386,846	\$421,737
11/01/2027	10/31/2028	909		\$34,542	\$395,630	\$430,172
11/01/2028	10/31/2029	876		\$34,164	\$404,611	\$438,775
11/01/2029	10/31/2030	843		\$32,877	\$414,674	\$447,551
11/01/2030	10/31/2031	811		\$32,440	\$424,062	\$456,502
11/01/2031	10/31/2032	780		\$40,560	\$433,652	\$474,212
11/01/2032	10/31/2033	749		\$39,697	\$443,999	\$483,696
11/01/2033	10/31/2034	718		\$38,772	\$454,598	\$493,370
11/01/2034	10/31/2035	688		\$37,840	\$465,397	\$503,237
11/01/2035	10/31/2036	658		\$36,848	\$476,454	\$513,302
11/01/2036	10/31/2037	628		\$35,796	\$487,772	\$523,568
11/01/2037	10/31/2038	600		\$35,400	\$498,639	\$534,039
11/01/2038	10/31/2039	573		\$34,380	\$510,340	\$544,720
11/01/2039	10/31/2040	546		\$33,306	\$522,308	\$555,614
11/01/2040	10/31/2041	520		\$32,240	\$534,486	\$566,726
11/01/2041	10/31/2042	494		\$31,122	\$546,939	\$578,061
11/01/2042	10/31/2043	469		\$30,485	\$559,137	\$589,622
11/01/2043	10/31/2044	445		\$29,370	\$572,044	\$601,414
11/01/2044	10/31/2045	421		\$28,207	\$585,235	\$613,442
11/01/2045	10/31/2046	398		\$27,462	\$555,066	\$582,528
11/01/2046	10/31/2047	376		\$26,320	\$512,581	\$538,901
11/01/2047	10/31/2048	355		\$25,205	\$472,437	\$497,642
11/01/2048	10/31/2049	335		\$24,455	\$434,055	\$458,510
11/01/2049	10/31/2050	315		\$23,310	\$397,330	\$420,640
11/01/2050	10/31/2051	295		\$22,420	\$362,438	\$384,858

TEMPLATE 4A - Sheet 4A-4

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.

**PLAN INFORMATION**

Abbreviated Plan Name:	BD 550 PF
EIN:	13-6626195
PN:	001
MPRA Plan?	No
If a MPRA Plan, which method yields the greatest amount of SFA?	N/A
SFA Measurement Date:	06/30/2022
Fair Market Value of Assets as of the SFA Measurement Date:	\$12,019,545
SFA Amount as of the SFA Measurement Date under the method calculated in this Sheet:	\$126,160,291
Projected SFA exhaustion year:	11/01/2040
Non-SFA Interest Rate:	5.38%
SFA Interest Rate:	3.07%

Meets the definition of a MPRA plan described in § 4262.4(a)(3)?

MPRA increasing assets method described in § 4262.4(a)(2)(i).  
MPRA present value method described in § 4262.4(a)(2)(ii).

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.

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.

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 4A-2)	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))
06/30/2022	10/31/2022	\$16,200	\$0	\$0	-\$3,350,724	\$0	-\$122,094	-\$3,472,818	\$1,256,398	\$123,943,871	\$0	\$211,833	\$12,247,578
11/01/2022	10/31/2023	\$90,000	\$0	\$0	-\$9,883,528	\$0	-\$989,621	-\$10,873,149	\$3,627,633	\$116,698,355	\$0	\$661,118	\$12,998,696
11/01/2023	10/31/2024	\$90,000	\$0	\$0	-\$9,721,491	\$0	-\$397,413	-\$10,118,904	\$3,416,165	\$109,995,616	\$0	\$701,528	\$13,790,224
11/01/2024	10/31/2025	\$90,000	\$0	\$0	-\$9,583,683	\$0	-\$405,361	-\$9,989,044	\$3,212,560	\$103,219,132	\$0	\$744,112	\$14,624,336
11/01/2025	10/31/2026	\$90,000	\$0	\$0	-\$9,395,545	\$0	-\$413,468	-\$9,809,013	\$3,007,523	\$96,417,642	\$0	\$788,988	\$15,503,324
11/01/2026	10/31/2027	\$90,000	\$0	\$0	-\$9,215,619	\$0	-\$421,737	-\$9,637,356	\$2,801,580	\$89,581,866	\$0	\$836,277	\$16,429,601
11/01/2027	10/31/2028	\$90,000	\$0	\$0	-\$9,003,623	\$0	-\$430,172	-\$9,433,795	\$2,595,112	\$82,743,183	\$0	\$886,111	\$17,405,712
11/01/2028	10/31/2029	\$90,000	\$0	\$0	-\$8,784,315	\$0	-\$438,775	-\$9,223,090	\$2,388,674	\$75,908,768	\$0	\$938,626	\$18,434,337
11/01/2029	10/31/2030	\$90,000	\$0	\$0	-\$8,533,144	\$0	-\$447,551	-\$8,980,695	\$2,182,893	\$69,110,965	\$0	\$993,966	\$19,518,303
11/01/2030	10/31/2031	\$90,000	\$0	\$0	-\$8,297,848	\$0	-\$456,502	-\$8,754,350	\$1,977,969	\$62,334,585	\$0	\$1,052,283	\$20,660,586
11/01/2031	10/31/2032	\$90,000	\$0	\$0	-\$8,100,093	\$0	-\$474,212	-\$8,574,305	\$1,772,960	\$55,533,240	\$0	\$1,113,738	\$21,864,323
11/01/2032	10/31/2033	\$90,000	\$0	\$0	-\$7,826,017	\$0	-\$483,696	-\$8,309,713	\$1,568,563	\$48,792,090	\$0	\$1,178,499	\$23,132,822
11/01/2033	10/31/2034	\$90,000	\$0	\$0	-\$7,522,337	\$0	-\$493,370	-\$8,015,707	\$1,366,501	\$42,142,883	\$0	\$1,246,744	\$24,469,566
11/01/2034	10/31/2035	\$90,000	\$0	\$0	-\$7,252,356	\$0	-\$503,237	-\$7,755,593	\$1,166,701	\$35,553,991	\$0	\$1,318,661	\$25,878,227
11/01/2035	10/31/2036	\$90,000	\$0	\$0	-\$6,934,743	\$0	-\$513,302	-\$7,448,045	\$969,538	\$29,075,484	\$0	\$1,394,447	\$27,362,674
11/01/2036	10/31/2037	\$90,000	\$0	\$0	-\$6,675,768	\$0	-\$523,568	-\$7,199,336	\$774,791	\$22,650,939	\$0	\$1,474,310	\$28,926,984
11/01/2037	10/31/2038	\$90,000	\$0	\$0	-\$6,386,043	\$0	-\$534,039	-\$6,920,082	\$582,206	\$16,313,064	\$0	\$1,558,470	\$30,575,454
11/01/2038	10/31/2039	\$90,000	\$0	\$0	-\$6,082,663	\$0	-\$544,720	-\$6,627,383	\$392,506	\$10,078,186	\$0	\$1,647,158	\$32,312,612
11/01/2039	10/31/2040	\$90,000	\$0	\$0	-\$5,781,885	\$0	-\$555,614	-\$6,337,499	\$205,921	\$3,946,609	\$0	\$1,740,617	\$34,143,229
11/01/2040	10/31/2041	\$90,000	\$0	\$0	-\$5,454,521	\$0	-\$566,726	-\$6,046,609	\$0	\$0	-\$2,074,638	\$1,780,005	\$33,938,595
11/01/2041	10/31/2042	\$90,000	\$0	\$0	-\$5,133,259	\$0	-\$578,061	-\$5,758,061	\$0	\$0	-\$5,711,320	\$1,665,581	\$29,982,857
11/01/2042	10/31/2043	\$90,000	\$0	\$0	-\$4,803,208	\$0	-\$589,622	-\$5,392,830	\$0	\$0	-\$5,392,830	\$1,462,021	\$26,142,048
11/01/2043	10/31/2044	\$90,000	\$0	\$0	-\$4,492,539	\$0	-\$601,414	-\$4,091,125	\$0	\$0	-\$5,093,953	\$1,264,079	\$22,402,174
11/01/2044	10/31/2045	\$90,000	\$0	\$0	-\$4,177,563	\$0	-\$613,442	-\$3,564,121	\$0	\$0	-\$4,791,005	\$1,071,685	\$18,772,854
11/01/2045	10/31/2046	\$90,000	\$0	\$0	-\$3,883,519	\$0	-\$582,528	-\$3,301,041	\$0	\$0	-\$4,466,047	\$885,683	\$15,282,491
11/01/2046	10/31/2047	\$90,000	\$0	\$0	-\$3,592,673	\$0	-\$538,901	-\$3,053,774	\$0	\$0	-\$4,131,574	\$707,375	\$11,948,292
11/01/2047	10/31/2048	\$90,000	\$0	\$0	-\$3,317,612	\$0	-\$497,642	-\$2,820,130	\$0	\$0	-\$3,815,254	\$536,955	\$8,759,993
11/01/2048	10/31/2049	\$90,000	\$0	\$0	-\$3,056,731	\$0	-\$458,510	-\$2,598,221	\$0	\$0	-\$3,515,241	\$373,922	\$5,708,673
11/01/2049	10/31/2050	\$90,000	\$0	\$0	-\$2,804,266	\$0	-\$420,640	-\$2,383,626	\$0	\$0	-\$3,224,906	\$217,984	\$2,791,751
11/01/2050	10/31/2051	\$90,000	\$0	\$0	-\$2,565,717	\$0	-\$384,858	-\$2,178,769	\$0	\$0	-\$2,950,575	\$68,824	\$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:	BD 550 PF
EIN:	13-6626195
PN:	001
SFA Measurement Date:	06/30/2022

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
06/30/2022	10/31/2022	\$3,245,141	\$102,448			\$3,347,589
11/01/2022	10/31/2023	\$9,391,599	\$478,270			\$9,869,869
11/01/2023	10/31/2024	\$9,039,710	\$663,182			\$9,702,892
11/01/2024	10/31/2025	\$8,680,935	\$878,636			\$9,559,571
11/01/2025	10/31/2026	\$8,316,498	\$1,051,292			\$9,367,790
11/01/2026	10/31/2027	\$7,947,611	\$1,236,415			\$9,184,026
11/01/2027	10/31/2028	\$7,575,442	\$1,391,541			\$8,966,983
11/01/2028	10/31/2029	\$7,201,108	\$1,541,636			\$8,742,744
11/01/2029	10/31/2030	\$6,825,668	\$1,664,959			\$8,490,627
11/01/2030	10/31/2031	\$6,450,168	\$1,800,474			\$8,250,642
11/01/2031	10/31/2032	\$6,075,703	\$1,975,121			\$8,050,824
11/01/2032	10/31/2033	\$5,703,443	\$2,073,609			\$7,777,052
11/01/2033	10/31/2034	\$5,334,672	\$2,140,300			\$7,474,971
11/01/2034	10/31/2035	\$4,970,811	\$2,235,202			\$7,206,013
11/01/2035	10/31/2036	\$4,613,336	\$2,278,098			\$6,891,434
11/01/2036	10/31/2037	\$4,263,733	\$2,370,368			\$6,634,101
11/01/2037	10/31/2038	\$3,923,439	\$2,418,915			\$6,342,354
11/01/2038	10/31/2039	\$3,593,787	\$2,448,368			\$6,042,154
11/01/2039	10/31/2040	\$3,275,981	\$2,468,889			\$5,744,870
11/01/2040	10/31/2041	\$2,971,116	\$2,451,172			\$5,422,288
11/01/2041	10/31/2042	\$2,680,155	\$2,423,054			\$5,103,210
11/01/2042	10/31/2043	\$2,403,961	\$2,374,749			\$4,778,710
11/01/2043	10/31/2044	\$2,143,314	\$2,329,539			\$4,472,853
11/01/2044	10/31/2045	\$1,898,903	\$2,261,631			\$4,160,535
11/01/2045	10/31/2046	\$1,671,324	\$2,197,472			\$3,868,796
11/01/2046	10/31/2047	\$1,461,039	\$2,119,903			\$3,580,942
11/01/2047	10/31/2048	\$1,268,321	\$2,042,220			\$3,310,541
11/01/2048	10/31/2049	\$1,093,184	\$1,959,793			\$3,052,977
11/01/2049	10/31/2050	\$935,354	\$1,868,166			\$2,803,520
11/01/2050	10/31/2051	\$794,296	\$1,772,501			\$2,566,796

**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:	BD 550 PF
EIN:	13-6626195
PN:	001
SFA Measurement Date:	06/30/2022

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

SFA Measurement Date / Plan Year Start Date		Plan Year End Date	Total Participant Count at Beginning of Plan Year	PROJECTED ADMINISTRATIVE EXPENSES for:		
				PBGC Premiums	Other	Total
06/30/2022	10/31/2022	N/A		\$35,072	\$41,507	\$76,579
11/01/2022	10/31/2023	1062		\$33,984	\$200,348	\$234,332
11/01/2023	10/31/2024	1029		\$36,015	\$203,004	\$239,019
11/01/2024	10/31/2025	994		\$35,784	\$208,015	\$243,799
11/01/2025	10/31/2026	960		\$34,560	\$214,115	\$248,675
11/01/2026	10/31/2027	926		\$34,262	\$219,386	\$253,648
11/01/2027	10/31/2028	892		\$33,896	\$224,825	\$258,721
11/01/2028	10/31/2029	858		\$33,462	\$230,434	\$263,896
11/01/2029	10/31/2030	824		\$32,136	\$237,038	\$269,174
11/01/2030	10/31/2031	791		\$31,640	\$242,917	\$274,557
11/01/2031	10/31/2032	759		\$39,468	\$248,929	\$288,397
11/01/2032	10/31/2033	728		\$38,584	\$255,581	\$294,165
11/01/2033	10/31/2034	697		\$37,638	\$262,410	\$300,048
11/01/2034	10/31/2035	666		\$36,630	\$269,419	\$306,049
11/01/2035	10/31/2036	637		\$35,672	\$276,498	\$312,170
11/01/2036	10/31/2037	608		\$34,656	\$283,757	\$318,413
11/01/2037	10/31/2038	579		\$34,161	\$290,620	\$324,781
11/01/2038	10/31/2039	552		\$33,120	\$298,157	\$331,277
11/01/2039	10/31/2040	525		\$32,025	\$305,878	\$337,903
11/01/2040	10/31/2041	499		\$30,938	\$313,723	\$344,661
11/01/2041	10/31/2042	473		\$29,799	\$321,755	\$351,554
11/01/2042	10/31/2043	448		\$29,120	\$329,465	\$358,585
11/01/2043	10/31/2044	424		\$27,984	\$337,773	\$365,757
11/01/2044	10/31/2045	401		\$26,867	\$346,205	\$373,072
11/01/2045	10/31/2046	378		\$26,082	\$354,451	\$380,533
11/01/2046	10/31/2047	357		\$24,990	\$363,154	\$388,144
11/01/2047	10/31/2048	335		\$23,785	\$372,122	\$395,907
11/01/2048	10/31/2049	315		\$22,995	\$343,362	\$366,357
11/01/2049	10/31/2050	295		\$21,830	\$314,592	\$336,422
11/01/2050	10/31/2051	276		\$20,976	\$287,040	\$308,016

TEMPLATE 5A - Sheet 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

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:	BD 550 PF
EIN:	13-6626195
PN:	001
MPRA Plan?	No
If a MPRA Plan, which method yields the greatest amount of SFA?	N/A
SFA Measurement Date:	06/30/2022
Fair Market Value of Assets as of the SFA Measurement Date:	\$12,019,545
SFA Amount as of the SFA Measurement Date under the method calculated in this Sheet:	\$123,572,401
Non-SFA Interest Rate:	5.38%
SFA Interest Rate:	3.07%

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))
06/30/2022	10/31/2022	\$0	\$0	\$0	-\$3,347,589	\$0	-\$76,579	-\$3,424,168	\$1,230,374	\$121,378,608	\$0	\$211,797	\$12,231,342
11/01/2022	10/31/2023	\$0	\$0	\$0	-\$9,869,869	\$0	-\$234,332	-\$10,104,201	\$3,559,675	\$114,834,081	\$0	\$658,046	\$12,889,388
11/01/2023	10/31/2024	\$0	\$0	\$0	-\$9,702,892	\$0	-\$239,019	-\$9,941,911	\$3,361,456	\$108,253,627	\$0	\$693,449	\$13,582,837
11/01/2024	10/31/2025	\$0	\$0	\$0	-\$9,559,571	\$0	-\$243,799	-\$9,803,370	\$3,161,741	\$101,611,998	\$0	\$730,757	\$14,313,593
11/01/2025	10/31/2026	\$0	\$0	\$0	-\$9,367,790	\$0	-\$248,675	-\$9,616,465	\$2,960,949	\$94,956,483	\$0	\$770,071	\$15,083,665
11/01/2026	10/31/2027	\$0	\$0	\$0	-\$9,184,026	\$0	-\$253,648	-\$9,437,674	\$2,759,597	\$88,278,406	\$0	\$811,501	\$15,895,166
11/01/2027	10/31/2028	\$0	\$0	\$0	-\$8,966,983	\$0	-\$258,721	-\$9,225,704	\$2,558,102	\$81,610,803	\$0	\$855,160	\$16,750,326
11/01/2028	10/31/2029	\$0	\$0	\$0	-\$8,742,744	\$0	-\$263,896	-\$9,006,640	\$2,357,046	\$74,961,209	\$0	\$901,168	\$17,651,493
11/01/2029	10/31/2030	\$0	\$0	\$0	-\$8,490,627	\$0	-\$269,174	-\$8,759,801	\$2,157,003	\$68,358,411	\$0	\$949,650	\$18,601,144
11/01/2030	10/31/2031	\$0	\$0	\$0	-\$8,250,642	\$0	-\$274,557	-\$8,525,199	\$1,958,194	\$61,791,405	\$0	\$1,000,742	\$19,601,885
11/01/2031	10/31/2032	\$0	\$0	\$0	-\$8,050,824	\$0	-\$288,397	-\$8,339,221	\$1,759,700	\$55,211,884	\$0	\$1,054,581	\$20,656,467
11/01/2032	10/31/2033	\$0	\$0	\$0	-\$7,777,052	\$0	-\$294,165	-\$8,071,217	\$1,562,160	\$48,702,827	\$0	\$1,111,318	\$21,767,784
11/01/2033	10/31/2034	\$0	\$0	\$0	-\$7,474,971	\$0	-\$300,048	-\$7,775,019	\$1,367,250	\$42,295,058	\$0	\$1,171,107	\$22,938,891
11/01/2034	10/31/2035	\$0	\$0	\$0	-\$7,206,013	\$0	-\$306,049	-\$7,512,062	\$1,174,899	\$35,957,895	\$0	\$1,234,112	\$24,173,004
11/01/2035	10/31/2036	\$0	\$0	\$0	-\$6,891,434	\$0	-\$312,170	-\$7,203,604	\$985,469	\$29,739,760	\$0	\$1,300,508	\$25,473,511
11/01/2036	10/31/2037	\$0	\$0	\$0	-\$6,634,101	\$0	-\$318,413	-\$6,952,514	\$798,745	\$23,585,991	\$0	\$1,370,475	\$26,843,986
11/01/2037	10/31/2038	\$0	\$0	\$0	-\$6,342,354	\$0	-\$324,781	-\$6,667,135	\$614,564	\$17,533,420	\$0	\$1,444,206	\$28,288,193
11/01/2038	10/31/2039	\$0	\$0	\$0	-\$6,042,154	\$0	-\$331,277	-\$6,373,431	\$433,628	\$11,593,618	\$0	\$1,521,905	\$29,810,097
11/01/2039	10/31/2040	\$0	\$0	\$0	-\$5,744,870	\$0	-\$337,903	-\$6,082,773	\$256,104	\$5,766,949	\$0	\$1,603,783	\$31,413,881
11/01/2040	10/31/2041	\$0	\$0	\$0	-\$5,422,288	\$0	-\$344,661	-\$5,766,949	\$82,471	\$82,471	\$0	\$1,690,067	\$33,103,947
11/01/2041	10/31/2042	\$0	\$0	\$0	-\$5,103,210	\$0	-\$351,554	-\$5,474,764	\$0	\$0	-\$5,372,293	\$1,627,240	\$29,358,894
11/01/2042	10/31/2043	\$0	\$0	\$0	-\$4,778,710	\$0	-\$358,585	-\$5,137,295	\$0	\$0	\$1,432,605	\$1,432,605	\$25,654,205
11/01/2043	10/31/2044	\$0	\$0	\$0	-\$4,472,853	\$0	-\$365,757	-\$4,838,610	\$0	\$0	\$1,241,960	\$1,241,960	\$22,057,554
11/01/2044	10/31/2045	\$0	\$0	\$0	-\$4,160,535	\$0	-\$373,072	-\$4,533,607	\$0	\$0	\$1,057,310	\$1,057,310	\$18,581,257
11/01/2045	10/31/2046	\$0	\$0	\$0	-\$3,868,796	\$0	-\$380,533	-\$4,249,329	\$0	\$0	\$878,537	\$878,537	\$15,210,465
11/01/2046	10/31/2047	\$0	\$0	\$0	-\$3,580,942	\$0	-\$388,144	-\$3,969,086	\$0	\$0	\$705,323	\$705,323	\$11,946,702
11/01/2047	10/31/2048	\$0	\$0	\$0	-\$3,310,541	\$0	-\$395,907	-\$3,706,448	\$0	\$0	\$537,360	\$537,360	\$8,777,614
11/01/2048	10/31/2049	\$0	\$0	\$0	-\$3,052,977	\$0	-\$403,357	-\$3,419,334	\$0	\$0	\$375,031	\$375,031	\$5,733,311
11/01/2049	10/31/2050	\$0	\$0	\$0	-\$2,803,520	\$0	-\$411,422	-\$3,139,942	\$0	\$0	\$219,190	\$219,190	\$2,812,559
11/01/2050	10/31/2051	\$0	\$0	\$0	-\$2,566,796	\$0	-\$420,016	-\$2,874,812	\$0	\$0	\$69,590	\$69,590	\$7,337



## 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**

**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:	BD 550 PF
EIN:	13-6626195
PN:	001
MPRA Plan?	No
If a MPRA Plan, which method yields the greatest amount of SFA?	N/A

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	\$123,572,401
2	New entrants	(\$1,655,601)	\$121,916,800
3	Form of payment election	\$241,250	\$122,158,050
4	Administrative expenses	\$4,002,241	\$126,160,291
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

Item Description (from 6A-1):

New entrants

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:	BD 550 PF
EIN:	13-6626195
PN:	001
MPRA Plan?	No
If a MPRA Plan, which method yields the greatest amount of SFA?	N/A
SFA Measurement Date:	06/30/2022
Fair Market Value of Assets as of the SFA Measurement Date:	\$12,019,545
SFA Amount as of the SFA Measurement Date under the method calculated in this Sheet:	\$121,916,800
Non-SFA Interest Rate:	5.38%
SFA Interest Rate:	3.07%

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))
06/30/2022	10/31/2022	\$16,200	\$0	\$0	-\$3,347,589	\$0	-\$76,579	-\$3,424,168	\$1,213,603	\$119,706,235	\$0	\$211,833	\$12,247,578
11/01/2022	10/31/2023	\$90,000	\$0	\$0	-\$9,869,869	\$0	-\$234,332	-\$10,104,201	\$3,508,333	\$113,110,367	\$0	\$661,118	\$12,998,696
11/01/2023	10/31/2024	\$90,000	\$0	\$0	-\$9,702,892	\$0	-\$239,019	-\$9,941,911	\$3,308,538	\$106,476,994	\$0	\$701,528	\$13,790,224
11/01/2024	10/31/2025	\$90,000	\$0	\$0	-\$9,559,571	\$0	-\$243,799	-\$9,803,370	\$3,107,199	\$99,780,823	\$0	\$744,112	\$14,624,336
11/01/2025	10/31/2026	\$90,000	\$0	\$0	-\$9,367,790	\$0	-\$248,675	-\$9,616,465	\$2,904,732	\$93,069,090	\$0	\$788,988	\$15,503,324
11/01/2026	10/31/2027	\$90,000	\$0	\$0	-\$9,184,026	\$0	-\$253,648	-\$9,437,674	\$2,701,654	\$86,333,070	\$0	\$836,277	\$16,429,601
11/01/2027	10/31/2028	\$90,000	\$0	\$0	-\$8,969,439	\$0	-\$258,721	-\$9,228,160	\$2,498,339	\$79,603,249	\$0	\$886,111	\$17,405,712
11/01/2028	10/31/2029	\$90,000	\$0	\$0	-\$8,748,132	\$0	-\$263,896	-\$9,012,028	\$2,295,325	\$72,886,546	\$0	\$938,626	\$18,434,337
11/01/2029	10/31/2030	\$90,000	\$0	\$0	-\$8,496,234	\$0	-\$269,174	-\$8,765,408	\$2,093,218	\$66,214,356	\$0	\$993,966	\$19,518,303
11/01/2030	10/31/2031	\$90,000	\$0	\$0	-\$8,260,235	\$0	-\$274,557	-\$8,534,792	\$1,892,212	\$59,571,776	\$0	\$1,052,283	\$20,660,586
11/01/2031	10/31/2032	\$90,000	\$0	\$0	-\$8,060,918	\$0	-\$288,661	-\$8,349,579	\$1,691,387	\$52,913,584	\$0	\$1,113,738	\$21,864,323
11/01/2032	10/31/2033	\$90,000	\$0	\$0	-\$7,788,056	\$0	-\$294,435	-\$8,082,491	\$1,491,416	\$46,322,509	\$0	\$1,178,499	\$23,132,822
11/01/2033	10/31/2034	\$90,000	\$0	\$0	-\$7,486,947	\$0	-\$300,324	-\$7,787,271	\$1,293,972	\$39,829,210	\$0	\$1,246,744	\$24,469,566
11/01/2034	10/31/2035	\$90,000	\$0	\$0	-\$7,218,916	\$0	-\$306,330	-\$7,525,246	\$1,098,980	\$33,402,944	\$0	\$1,318,661	\$25,878,227
11/01/2035	10/31/2036	\$90,000	\$0	\$0	-\$6,905,268	\$0	-\$312,457	-\$7,217,725	\$906,799	\$27,092,018	\$0	\$1,394,447	\$27,362,674
11/01/2036	10/31/2037	\$90,000	\$0	\$0	-\$6,648,942	\$0	-\$318,706	-\$6,967,648	\$717,209	\$20,841,579	\$0	\$1,474,310	\$28,926,984
11/01/2037	10/31/2038	\$90,000	\$0	\$0	-\$6,363,432	\$0	-\$325,080	-\$6,688,512	\$529,958	\$14,683,025	\$0	\$1,558,470	\$30,575,454
11/01/2038	10/31/2039	\$90,000	\$0	\$0	-\$6,065,256	\$0	-\$331,582	-\$6,396,838	\$345,734	\$8,631,922	\$0	\$1,647,158	\$32,312,612
11/01/2039	10/31/2040	\$90,000	\$0	\$0	-\$5,770,157	\$0	-\$338,214	-\$6,108,371	\$164,757	\$2,688,308	\$0	\$1,740,617	\$34,143,229
11/01/2040	10/31/2041	\$90,000	\$0	\$0	-\$5,449,842	\$0	-\$344,978	-\$5,833,348	\$0	\$0	-\$3,106,512	\$1,750,129	\$32,876,845
11/01/2041	10/31/2042	\$90,000	\$0	\$0	-\$5,135,916	\$0	-\$351,878	-\$5,543,794	\$0	\$0	-\$5,487,794	\$1,613,907	\$29,092,958
11/01/2042	10/31/2043	\$90,000	\$0	\$0	-\$4,813,914	\$0	-\$358,916	-\$5,244,710	\$0	\$0	-\$5,172,830	\$1,419,470	\$25,429,599
11/01/2043	10/31/2044	\$90,000	\$0	\$0	-\$4,511,067	\$0	-\$366,094	-\$4,937,626	\$0	\$0	-\$4,877,161	\$1,230,961	\$21,873,399
11/01/2044	10/31/2045	\$90,000	\$0	\$0	-\$4,204,365	\$0	-\$373,416	-\$4,634,181	\$0	\$0	-\$4,577,781	\$1,048,325	\$18,433,943
11/01/2045	10/31/2046	\$90,000	\$0	\$0	-\$3,918,173	\$0	-\$380,884	-\$4,333,065	\$0	\$0	-\$4,299,057	\$871,373	\$15,096,259
11/01/2046	10/31/2047	\$90,000	\$0	\$0	-\$3,635,227	\$0	-\$388,502	-\$4,034,569	\$0	\$0	-\$4,023,729	\$699,799	\$11,862,330
11/01/2047	10/31/2048	\$90,000	\$0	\$0	-\$3,367,609	\$0	-\$396,272	-\$3,737,881	\$0	\$0	-\$3,763,881	\$533,361	\$8,721,809
11/01/2048	10/31/2049	\$90,000	\$0	\$0	-\$3,113,651	\$0	-\$373,638	-\$3,447,289	\$0	\$0	-\$3,487,289	\$372,295	\$5,696,815
11/01/2049	10/31/2050	\$90,000	\$0	\$0	-\$2,867,646	\$0	-\$344,118	-\$3,153,764	\$0	\$0	-\$3,211,764	\$217,383	\$2,792,434
11/01/2050	10/31/2051	\$90,000	\$0	\$0	-\$2,634,799	\$0	-\$316,176	-\$2,838,623	\$0	\$0	-\$2,950,975	\$68,541	\$0

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:	BD 550 PF
EIN:	13-6626195
PN:	001
MPRA Plan?	No
If a MPRA Plan, which method yields the greatest amount of SFA?	N/A
SFA Measurement Date:	06/30/2022
Fair Market Value of Assets as of the SFA Measurement Date:	\$12,019,545
SFA Amount as of the SFA Measurement Date under the method calculated in this Sheet:	\$122,158,050
Non-SFA Interest Rate:	5.38%
SFA Interest Rate:	3.07%

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))
06/30/2022	10/31/2022	\$16,200	\$0	\$0	-\$3,350,724	\$0	-\$76,579	-\$3,427,303	\$1,216,027	\$119,946,774	\$0	\$211,833	\$12,247,578
11/01/2022	10/31/2023	\$90,000	\$0	\$0	-\$9,883,528	\$0	-\$234,332	-\$10,117,860	\$3,515,491	\$113,344,405	\$0	\$661,118	\$12,998,696
11/01/2023	10/31/2024	\$90,000	\$0	\$0	-\$9,721,491	\$0	-\$239,019	-\$9,960,510	\$3,315,415	\$106,699,310	\$0	\$701,528	\$13,790,224
11/01/2024	10/31/2025	\$90,000	\$0	\$0	-\$9,583,683	\$0	-\$243,799	-\$9,827,482	\$3,113,625	\$99,985,453	\$0	\$744,112	\$14,624,336
11/01/2025	10/31/2026	\$90,000	\$0	\$0	-\$9,395,545	\$0	-\$248,675	-\$9,644,220	\$2,910,555	\$93,251,788	\$0	\$788,988	\$15,503,324
11/01/2026	10/31/2027	\$90,000	\$0	\$0	-\$9,215,619	\$0	-\$253,648	-\$9,469,267	\$2,706,740	\$86,489,261	\$0	\$836,277	\$16,429,601
11/01/2027	10/31/2028	\$90,000	\$0	\$0	-\$9,003,623	\$0	-\$258,721	-\$9,262,344	\$2,502,569	\$79,729,486	\$0	\$886,111	\$17,405,712
11/01/2028	10/31/2029	\$90,000	\$0	\$0	-\$8,784,315	\$0	-\$263,896	-\$9,048,211	\$2,298,601	\$72,979,876	\$0	\$938,626	\$18,434,337
11/01/2029	10/31/2030	\$90,000	\$0	\$0	-\$8,533,144	\$0	-\$269,174	-\$8,802,318	\$2,095,472	\$66,273,030	\$0	\$993,966	\$19,518,303
11/01/2030	10/31/2031	\$90,000	\$0	\$0	-\$8,297,848	\$0	-\$274,557	-\$8,572,405	\$1,893,391	\$59,594,016	\$0	\$1,052,283	\$20,660,586
11/01/2031	10/31/2032	\$90,000	\$0	\$0	-\$8,100,093	\$0	-\$288,628	-\$8,388,721	\$1,691,422	\$52,896,717	\$0	\$1,113,738	\$21,864,323
11/01/2032	10/31/2033	\$90,000	\$0	\$0	-\$7,826,017	\$0	-\$294,401	-\$8,120,418	\$1,490,270	\$46,266,569	\$0	\$1,178,499	\$23,132,822
11/01/2033	10/31/2034	\$90,000	\$0	\$0	-\$7,522,337	\$0	-\$300,289	-\$7,822,626	\$1,291,669	\$39,735,612	\$0	\$1,246,744	\$24,469,566
11/01/2034	10/31/2035	\$90,000	\$0	\$0	-\$7,252,356	\$0	-\$306,295	-\$7,558,651	\$1,095,553	\$33,272,515	\$0	\$1,318,661	\$25,878,227
11/01/2035	10/31/2036	\$90,000	\$0	\$0	-\$6,934,743	\$0	-\$312,421	-\$7,247,164	\$902,308	\$26,927,658	\$0	\$1,394,447	\$27,362,674
11/01/2036	10/31/2037	\$90,000	\$0	\$0	-\$6,675,768	\$0	-\$318,669	-\$6,994,437	\$711,720	\$20,644,941	\$0	\$1,474,310	\$28,926,984
11/01/2037	10/31/2038	\$90,000	\$0	\$0	-\$6,386,043	\$0	-\$325,042	-\$6,711,085	\$523,547	\$14,457,404	\$0	\$1,558,470	\$30,575,454
11/01/2038	10/31/2039	\$90,000	\$0	\$0	-\$6,082,663	\$0	-\$331,543	-\$6,414,206	\$338,520	\$8,381,718	\$0	\$1,647,158	\$32,312,612
11/01/2039	10/31/2040	\$90,000	\$0	\$0	-\$5,781,885	\$0	-\$338,174	-\$6,120,059	\$156,883	\$2,418,541	\$0	\$1,740,617	\$34,143,229
11/01/2040	10/31/2041	\$90,000	\$0	\$0	-\$5,454,521	\$0	-\$344,937	-\$5,818,541	\$0	\$0	-\$3,380,917	\$1,742,269	\$32,594,581
11/01/2041	10/31/2042	\$90,000	\$0	\$0	-\$5,133,259	\$0	-\$351,836	-\$5,511,836	\$0	\$0	-\$5,485,095	\$1,598,799	\$28,798,285
11/01/2042	10/31/2043	\$90,000	\$0	\$0	-\$4,803,208	\$0	-\$358,873	-\$5,211,873	\$0	\$0	-\$5,162,081	\$1,403,928	\$25,130,131
11/01/2043	10/31/2044	\$90,000	\$0	\$0	-\$4,492,539	\$0	-\$366,050	-\$4,922,539	\$0	\$0	-\$4,858,589	\$1,215,387	\$21,576,929
11/01/2044	10/31/2045	\$90,000	\$0	\$0	-\$4,177,563	\$0	-\$373,371	-\$4,644,563	\$0	\$0	-\$4,550,934	\$1,033,151	\$18,149,146
11/01/2045	10/31/2046	\$90,000	\$0	\$0	-\$3,883,519	\$0	-\$380,838	-\$4,366,519	\$0	\$0	-\$4,264,357	\$857,054	\$14,831,843
11/01/2046	10/31/2047	\$90,000	\$0	\$0	-\$3,592,673	\$0	-\$388,455	-\$4,084,673	\$0	\$0	-\$3,981,128	\$686,805	\$11,627,520
11/01/2047	10/31/2048	\$90,000	\$0	\$0	-\$3,317,612	\$0	-\$396,224	-\$3,811,612	\$0	\$0	-\$3,713,836	\$522,174	\$8,525,858
11/01/2048	10/31/2049	\$90,000	\$0	\$0	-\$3,056,731	\$0	-\$404,808	-\$3,541,731	\$0	\$0	-\$3,423,539	\$363,565	\$5,555,884
11/01/2049	10/31/2050	\$90,000	\$0	\$0	-\$2,804,266	\$0	-\$413,512	-\$3,271,778	\$0	\$0	-\$3,140,778	\$211,819	\$2,716,925
11/01/2050	10/31/2051	\$90,000	\$0	\$0	-\$2,565,717	\$0	-\$422,266	-\$3,009,983	\$0	\$0	-\$2,873,603	\$66,678	\$0



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.

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))



**Version Updates**

v20220701p

Version

Date updated

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.



## 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**  
**Assumption/Method Changes - SFA Amount**

v20220701p

**PLAN INFORMATION**

Abbreviated Plan Name:	BD 550 PF	
EIN:	13-6626195	
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
Mortality (Healthy/Disabled)	Adjusted RP-2014(BC)/RP-2014 Disability mortality tables with Scale MP-2014	Pri-2012(BC)/Pri-2012 Disability mortality tables with Scale MP-2021	Original assumption is outdated. New assumption reflects more recently published experience for blue collar workers.
CBU assumption	Zero through plan year ending October 31, 2025	Zero through August 31, 2022 and then 900 weeks per year through plan year ending October 31, 2051	Original assumption does not address years after original projected insolvency in 2025, and did not reflect new bargaining group effective September 1, 2022. The proposed assumption reflects anticipated future employment level.
Withdrawal Liability	Zero through plan year ending October 31, 2025	Zero through plan year ending October 31, 2051	Original assumption does not address years after original projected insolvency in 2025. Proposed assumption uses acceptable extension methodology.
Form of benefit	80% elect 50% J&S and 20% elect single life annuity	35% elect 50% J&S, 12% elect 75% J&S, and 53% elect single life annuity	The prior election percentages did not accurately reflect plan experience and are therefore unreasonable. The revised rates are based on actual plan experience and are therefore reasonable.
Administrative expenses	\$208,080 for the plan year beginning November 1, 2016, increasing 2% per year through the plan year ending October 31, 2025	\$316,449 for the plan year ended October 31, 2021, plus an assumed increase of 2% per year, plus an increase for assumed allocated and professional expenses, plus an increase for 2031 PBGC premium increase, limited to 15% of benefit payments	The prior assumption significantly understated actual plan expenses. The revised assumption reflects actual anticipated plan expenses.

**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:	BD 550 PF
EIN:	13-6626195
PN:	001

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

All Other Sources of Non-Investment Income

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	Projected Number of Active Participants (Including New Entrants) at the Beginning of the Plan Year
06/30/2022	10/31/2022	\$16,200	162	\$100.00				\$0	\$0	-
11/01/2022	10/31/2023	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2023	10/31/2024	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2024	10/31/2025	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2025	10/31/2026	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2026	10/31/2027	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2027	10/31/2028	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2028	10/31/2029	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2029	10/31/2030	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2030	10/31/2031	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2031	10/31/2032	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2032	10/31/2033	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2033	10/31/2034	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2034	10/31/2035	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2035	10/31/2036	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2036	10/31/2037	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2037	10/31/2038	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2038	10/31/2039	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2039	10/31/2040	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2040	10/31/2041	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2041	10/31/2042	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2042	10/31/2043	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2043	10/31/2044	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2044	10/31/2045	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2045	10/31/2046	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2046	10/31/2047	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2047	10/31/2048	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2048	10/31/2049	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2049	10/31/2050	\$90,000	900	\$100.00				\$0	\$0	18
11/01/2050	10/31/2051	\$90,000	900	\$100.00				\$0	\$0	18

\* 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**

v20230727

Version

Date updated

v20230727

07/27/2023

**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 border="1" style="font-size: small;"> <thead> <tr> <th>Age</th> <th>Actives</th> </tr> </thead> <tbody> <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> </tbody> </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**

**PLAN INFORMATION**

Abbreviated Plan Name:	BD 550 PF
EIN:	13-6626195
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 <a href="#">SFA Assumption Guidance</a>
SFA Measurement Date	N/A	N/A	06/30/2022	06/30/2022	N/A
Census Data as of	N/A	N/A	10/31/2020	10/31/2020	N/A

**DEMOGRAPHIC ASSUMPTIONS**

Base Mortality - Healthy	2021Zone20220906 BD 550 PF.pdf p. 25	110% of RP-2014 (BC) Healthy Annuitant Mortality Table	Pri-2012 (BC) Mortality Table	Same as baseline	Acceptable Change		
Mortality Improvement - Healthy	2021Zone20220906 BD 550 PF.pdf p. 25	MP-2014	MP-2021	Same as baseline	Acceptable Change		
Base Mortality - Disabled	2021Zone20220906 BD 550 PF.pdf p. 25	RP-2014 Disabled Retiree Mortality Table	Pri-2012 (BC) Disabled Retiree Mortality Table	Same as baseline	Acceptable Change		
Mortality Improvement - Disabled	2021Zone20220906 BD 550 PF.pdf p. 25	MP-2014	MP-2021	Same as baseline	Acceptable Change		
Retirement - Actives	2021Zone20220906 BD 550 PF.pdf p. 27	<b>Pension Credits</b>				Same as Pre-2021 Zone Cert	
		Age	Under 25	25 – 29	30 – 34		35 & over
		55 – 60	3%	3%	3%		3%
		61	3	3	40		60
		62	20	30	40		60
		63 – 64	20	30	40		60
Retirement - TVs	2021Zone20220906 BD 550 PF.pdf p. 27	<b>Age</b>		<b>Annual Retirement Rates</b>		Same as Pre-2021 Zone Cert	
		55 – 60	61	62	63 – 64		65 and over
		10%	10	20	5		100
Turnover	2021Zone20220906 BD 550 PF.pdf p. 26	Sarason T-9 (Pure Withdrawal)	Same as Pre-2021 Zone Cert	Same as baseline	No Change		
Disability	2021Zone20220906 BD 550 PF.pdf p. 26	RRB	Same as Pre-2021 Zone Cert	Same as baseline	No Change		
Optional Form Elections - Actives	2021Zone20220906 BD 550 PF.pdf p. 28	80% of participants (all those assumed to be married) elect the 50% Joint and Survivor Annuity and 20% of participants (all those assumed to be unmarried) elect the Single Life Annuity	Same as Pre-2021 Zone Cert	35% elect the 50% Joint and Survivor Annuity, 12% elect the 75% Joint and Survivor Annuity, and 53% elect the Single Life Annuity	Other Change		
Optional Form Elections - TVs	2021Zone20220906 BD 550 PF.pdf p. 28	80% of participants (all those assumed to be married) elect the 50% Joint and Survivor Annuity and 20% of participants (all those assumed to be unmarried) elect the Single Life Annuity	Same as Pre-2021 Zone Cert	35% elect the 50% Joint and Survivor Annuity, 12% elect the 75% Joint and Survivor Annuity, and 53% elect the Single Life Annuity	Other Change		
Marital Status	2021Zone20220906 BD 550 PF.pdf p. 28	80% married	Same as Pre-2021 Zone Cert	Same as baseline	No Change		
Spouse Age Difference	2021Zone20220906 BD 550 PF.pdf p. 28	Females 3 years younger than males, if actual age is unknown	Same as Pre-2021 Zone Cert	Same as baseline	No Change		

Template 10

v20230727

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

PLAN INFORMATION

Abbreviated Plan Name:	BD 550 PF
EIN:	13-6626195
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 <a href="#">SFA Assumption Guidance</a>
Active Participant Count	2021Zone20220906 BD 550 PF.pdf p. 23	The number of active participants is assumed to decrease to 140 until plan termination on December 17, 2016, and 0 thereafter	Same as Pre-2021 Zone Cert	0 until September 1, 2022, when a bargaining unit with 18 active employees joined the plan. The active participant count is assumed to remain level at 18 after that date.	Other Change
New Entrant Profile	N/A	None	Same as Pre-2021 Zone Cert	The assumption for new entrants as of September 1, 2022 is based on the demographic information for the actual group of new entrants on that date. New entrants after September 1, 2022 are based on the demographics and hire dates of that same group of participants. One-year age banding was used and new entrants are assumed to start with zero service at age of hire.	Other Change
Missing or Incomplete Data	2021Zone20220906 BD 550 PF.pdf p. 28	Same as those exhibited by participants with similar known characteristics. If not specified, participants are assumed to be male.	Same as Pre-2021 Zone Cert	Same as baseline	No Change
"Missing" Terminated Vested Participant Assumption	N/A	None	Same as Pre-2021 Zone Cert	Same as baseline	No Change
Treatment of Participants Working Past Retirement Date	2021Zone20220906 BD 550 PF.pdf p. 28	Active participants assumed to work enough hours each month to not qualify for delayed retirement adjustment. Inactive vested participants who are assumed to commence receipt of benefits after attaining normal retirement age qualify for delayed retirement increases.	Same as Pre-2021 Zone Cert	Same as baseline	No Change
Assumptions Related to Reciprocity	2021Zone20220906 BD 550 PF.pdf p. 28	It is assumed that active employees eligible for a service pension have sufficient pension credit from a related plan to qualify for the "next higher" level of service pension. It is also assumed that 25% of inactive vested participants are eligible to receive the current active benefit level due to service in a related plan.	Same as Pre-2021 Zone Cert	Same as baseline	No Change
Other Demographic Assumption 1	2021Zone20220906 BD 550 PF.pdf p. 27	One pension credit per year	Same as Pre-2021 Zone Cert	Same as baseline	No Change
Other Demographic Assumption 2	N/A	N/A	N/A	N/A	No Change
Other Demographic Assumption 3	N/A	N/A	N/A	N/A	No Change

NON-DEMOGRAPHIC ASSUMPTIONS

Contribution Base Units	2021Zone20220906 BD 550 PF.pdf p. 23	Weeks are projected to be 0 after December 17, 2016	Same as Pre-2021 Zone Cert	Weeks are projected to be 0 prior to September 1, 2022. After September 1, 2022, weeks are projected to be 900 per year.	Other Change
Contribution Rate	N/A	None	Same as Pre-2021 Zone Cert	\$100.00 per week	Other Change

**Template 10**

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

**PLAN INFORMATION**

Abbreviated Plan Name:	BD 550 PF
EIN:	13-6626195
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 <a href="#">SFA Assumption Guidance</a>	Comments
Administrative Expenses	2021Zone20220906 BD 550 PF.pdf p. 23	\$208,080 per year, payable monthly, (\$200,130 as of the beginning of the year) for the Plan year beginning November 1, 2016. Administrative expenses are assumed to increase with inflation of 2.0% per year for each year after November 1, 2016 through the projected date of insolvency.	The administrative expenses are projected to continue to increase by the assumed inflation rate of 2.0% per year from the projected date of insolvency through October 31, 2051. In addition, the administrative expenses are projected to increase by \$8,349 in the year beginning November 1, 2031 based on 759 projected participants and a projected \$11 increase (from \$41 to \$52) in the PBGC premium. The projected expenses were limited to 12% of the expected benefit payments in each year.	The administrative expense assumption is based on the actual administrative expenses of \$316,449 for the full plan year ended October 31, 2021. This amount (and the adjustments discussed below) are projected to increase by the assumed inflation rate of 2.0% per year through October 31, 2051. This projection then has the following additional adjustments: 1) Similar to the Baseline projection, there is a \$8,580 increase in the year beginning November 1, 2031 based on 780 projected participants and a projected \$11 increase (from \$41 to \$52) in the PBGC premium. 2) There is an adjustment for a one-time expense of \$600,000 for the plan year ending October 31, 2023 due to professional fees related to the initial and revised filings of the SFA application. 3) There is an assumed \$60,387 increase in ongoing administrative expenses in the plan year beginning November 1, 2022 and ending October 31, 2023. The projected expenses were limited to 15% of the expected benefit payments in each year. Note that the expenses for the four-month period ending October 31, 2022 were set equal to the actual expenses paid during that period.	Other Change	The \$208,000 shown on page 23 is a typo. It should read \$208,080.
Assumed Withdrawal Payments - Currently Withdrawn Employers	N/A	None	Same as Pre-2021 Zone Cert	Same as baseline	No Change	
Assumed Withdrawal Payments -Future Withdrawals	N/A	None	Same as Pre-2021 Zone Cert	Same as baseline	No Change	
Other Assumption 1	N/A	N/A	N/A	N/A	No Change	
Other Assumption 2	N/A	N/A	N/A	N/A	No Change	
Other Assumption 3	N/A	N/A	N/A	N/A	No Change	

**CASH FLOW TIMING ASSUMPTIONS**

Benefit Payment Timing	N/A	Monthly at the beginning of the month	Same as Pre-2021 Zone Cert	Same as baseline	No Change	
Contribution Timing	N/A	Monthly at the end of the month	Same as Pre-2021 Zone Cert	Same as baseline	No Change	
Withdrawal Payment Timing	N/A	None	Same as Pre-2021 Zone Cert	Same as baseline	No Change	
Administrative Expense Timing	N/A	Monthly at the end of the month	Same as Pre-2021 Zone Cert	Same as baseline	No Change	
Other Payment Timing	N/A	N/A	N/A	N/A	No Change	

Create additional rows as needed.