

Plan Name: Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN/PN: 38-6047082/001

SPECIAL FINANCIAL ASSISTANCE APPLICATION
SECTION D – Plan Statements

Item number:

1 – Cover letter, none

2 – Plan Sponsor, plan representative information:

Plan sponsor:

Board of Trustees of Graphic Communications Union Local 2-C Retirement Benefit Plan
11420 East Nine Mile Road
Warren, MI 48089
(586) 755-8041

Plan attorney:

Mr. Jay W. Tower, Esq.
12734 Ludlow Avenue
Huntington Woods, MI 48070
towerlaw@mac.com
(248) 506-8945

Plan actuary:

Mr. Troy Schnabel
Watkins Ross
200 Ottawa Avenue, N.W., Suite 600
Grand Rapids, MI 49503-2426
tschnabel@watkinsross.com
(616) 456-9696

3 – Eligibility criteria: The plan became insolvent after December 16, 2014, and has remained insolvent, and has not terminated under section 4041A of ERISA as of March 11, 2021.

4 – Priority Group 1

5 – To compute the SFA amount:

Assumed future contributions for active participants – 260 shifts/year, \$13.82/shift
Assumed future contributions for delinquent employer - \$1,200 per year
Assumed future withdrawal liability payments, none.

Future contributions are based upon assumptions used in the January 1, 2020 actuarial certification as well as conversations with the contributing employer. There are no outstanding assessments of withdrawal liability, accordingly, no future payments are projected.

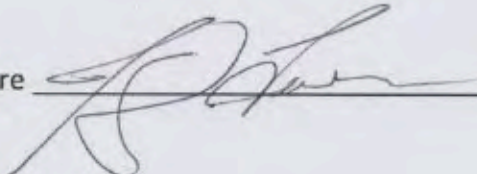
6a – Not applicable

6b – Administrative expense assumption: Increase from \$165,000 (\$162,500 payable at the beginning of the year) increased with 3% inflation rate until 2051, plus PBGC premium costs of anticipated participant count times per-participant premium; the sum is not more than 15% of expected benefit payments for any year. The 3% inflation assumption approximates increases for items, including, but not limited to, office space rental, computers/technology, software leases and network security. This assumption is based on recent historical experience, future market expectations and professional judgement.

Assumption 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 of PBGC’s guidance on Special Financial Assistance Assumptions.

7 – The effective date of reinstatement of benefits previously suspended is July 1, 2021. The reinstatement amount will cover benefits suspended January 1, 2015 through June 30, 2021 (the measurement date for SFA). The total amount of reinstated benefits is \$3,810,683 as of the measurement date. Benefits suspended as a result of application of statutory guarantee level will be made-up in the form of lump-sum payments.

8 – Reconciliation of the fair market value of assets from the date of the most recent plan financial statement to SFA measurement date of June 30, 2021 – filename = “PBGC Applic for SFA Reconciliation GCU 2-C RBP.xlsx”

Date December 20, 2021 Signature 

Statement of Israel Castro
Regarding Facts
Relating to the Special Financial Assistance Application
Of the
Board of Administration of the
Graphic Communications Union Local 2-C
Retirement Benefit Plan

Under penalties 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, and such facts are true, correct, and complete.

Dated: 12-21-2021



Israel Castro
Chair
Board of Administration of the
Graphic Communications Union Local 2-C
Retirement Benefit Plan

SPECIAL FINANCIAL ASSISTANCE APPLICATION
SECTION E – Checklist and certifications, Item 4

Plan Name: Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN/PN: 38-6047082/001

I certify that the requested amount of Special Financial Assistance (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.

This Application for Special Financial Assistance was prepared on behalf of the Board of Administration on the basis of employee data, asset statements and plan documents provided by the plan sponsor or its representatives. We relied upon the data as submitted, without formal audit. However, the data was tested for reasonableness, and we have no reason to believe that any other information which would have had a material effect on the results of this valuation was overlooked.

The actuarial assumptions used for the requested amount of SFA are based on the assumptions used in the January 1, 2019 actuarial valuation. In addition, 1) Special Financial Assistance census data is as of January 1, 2021, 2) administrative expenses are \$165,000 (\$162,500 payable at the beginning of the year) increased with 3% inflation rate until 2051, plus PBGC premium costs of anticipated participant count times per-participant premium; the sum is not more than 15% of expected benefit payments for any year, and 3). The 3% inflation assumption approximates increases for items, including, but not limited to, office space rental, computers/technology, software leases and network security. This assumption is based on recent historical experience, future market expectations and professional judgement.



Troy A. Schnabel, ASA, MAAA
Enrolled actuary #20-06116

12-20-2021

Date

Certification with Respect to Accuracy of the
Amount of the Fair Market Value of the Assets
Of the Graphic Communications Union Local 2-C
Retirement Benefit Plan
As of June 30, 2021 ("SFA Measurement Date")

I, Israel Castro, am the Chair of the Board of Administration of the above referenced Plan. In that capacity, I hereby certify that the books and records of the Comerica Bank, the Plan's custodian, show a market value of the assets of the Plan on June 30, 2021 of \$462,196.97. This Certification relies on the statements of account attached to this Application for Special Financial Assistance.



Israel Castro,
Chair
Board of Administration of the
Graphic Communications Union Local 2-C
Retirement Benefit Plan

Dated: *September 29, 2021*

ACCOUNT STATEMENT

Statement Period
Account Number

06/01/2021 through 06/30/2021

183

MESSAGE PAGE

PRICING

MARKET PRICES SHOWN HAVE BEEN OBTAINED FROM PRICING SERVICES WHICH WE BELIEVE ARE RELIABLE; HOWEVER, WE CANNOT GUARANTEE THEIR ACCURACY OR THAT SECURITIES CAN BE BOUGHT OR SOLD FOR THESE PRICES. SOME UNREGISTERED AND ILLIQUID SECURITIES MAY NOT HAVE INDEPENDENTLY PROVIDED PRICING, AND MAY ONLY HAVE PRICING PROVIDED BY THE ISSUER OF THE SECURITY, WHICH MAY INCLUDE ESTIMATES OR OTHER UNVERIFIED PRICES. WE WILL BE GLAD TO PROVIDE YOU FURTHER DETAILS UPON REQUEST.

FLOAT

COMERICA USES A GENERAL DISBURSEMENT CHECKING ACCOUNT TO PROCESS LUMP SUM AND PERIODIC DISTRIBUTIONS. THIS IS A NON-INTEREST BEARING ACCOUNT FROM WHICH COMERICA MAY RECEIVE FLOAT. FLOAT IS EARNED AT THE FED FUNDS RATE, AS PUBLISHED IN THE WALL STREET JOURNAL OR ON THE FEDERAL RESERVE'S WEB SITE. COMERICA MAY BEGIN EARNING FLOAT ONCE THE FUNDS ARE TRANSFERRED FROM YOUR TRUST ACCOUNT TO THE GENERAL DISBURSEMENT CHECKING ACCOUNT. FOR PERIODIC DISTRIBUTIONS, THE TRANSFER TYPICALLY TAKES PLACE ON THE FIRST BUSINESS DAY OF THE MONTH. FOR LUMP SUM DISTRIBUTIONS, THE TRANSFER TYPICALLY OCCURS ON THE DAY THE CHECK IS ISSUED. COMERICA CONTINUES TO RECEIVE FLOAT ON SUCH FUNDS UNTIL SUCH TIME AS: THE CHECK IS PRESENTED FOR PAYMENT OR THE FUNDS ARE DISPOSED OF PURSUANT TO AN UNCLAIMED FUNDS PROCEDURE. PERIODIC DISTRIBUTIONS PAID BY DIRECT DEPOSIT DO NOT GENERATE FLOAT, AND PROVIDE IMPROVED FUNDS AVAILABILITY FOR RECIPIENTS. IF YOU APPROVE OF THESE ARRANGEMENTS, YOU NEED TO DO NOTHING FURTHER. OTHERWISE, PLEASE CONTACT YOUR RELATIONSHIP MANAGER FOR FURTHER INFORMATION.

CASH EQUIVALENTS

COMERICA CALCULATES SWEEP FEES OR FUND LEVEL FEES ON A 360 DAY BASIS.

FOREIGN TAX RECLAIMS DISCLOSURE

DIVIDENDS FROM AMERICAN DEPOSITARY RECEIPTS (ADRs) AND OTHER FOREIGN INVESTMENTS MAY BE SUBJECT TO TAX WITHHOLDING BY THE ISSUERS' HOME-COUNTRY GOVERNMENTS. COMERICA ENGAGED GLOBE TAX SERVICES, INC., TO PROVIDE CROSS-BORDER WITHHOLDING RECOVERY SERVICES ON BEHALF OF CLIENTS WITH THE APPLICABLE FOREIGN TAX AUTHORITIES. IF YOU WISH TO OPT INTO THIS SERVICE, PLEASE CONTACT YOUR RELATIONSHIP MANAGER.

SERVICING FEE

COMERICA MAY BE PAID BY NON-PROPRIETARY FUNDS FOR PERFORMING SERVICES FOR THE FUNDS.



GRAPHIC COMMUNICATIONS UNION
DETROIT LOCAL 2-C
RETIREMENT BENEFIT PLAN
(RESERVE/LINE ITEM ACCOUNT)

ACCOUNT STATEMENT

Statement Period
Account Number

06/01/2021 through 06/30/2021

183

MESSAGE PAGE

TO ALL HOLDERS OF THE COMERICA SHORT TERM INVESTMENT FUND (STIF)

DETAILED INFORMATION ABOUT THE FUND IS AVAILABLE TO ALL HOLDERS OF THE COMERICA SHORT TERM INVESTMENT FUND (STIF) ON A MONTHLY BASIS INCLUDING: TOTAL ASSETS, SHADOW NAV, AND INDIVIDUAL SECURITY INFORMATION.

THIS INFORMATION WILL BE AVAILABLE AFTER THE 7TH BUSINESS DAY OF THE MONTH AND CAN BE FOUND ON THE 'SPECIAL REPORTS' TAB IN CUSTODY ONLINE, UNDER THE MASTER ACCOUNT NUMBER [REDACTED]. IF YOU ARE NOT A CURRENT USER OF CUSTODY ONLINE, PLEASE CONTACT YOUR RELATIONSHIP MANAGER TO OBTAIN ACCESS OR TO HAVE THIS INFORMATION SENT TO YOU.

CLASS ACTION NOTIFICATIONS:

FOR YOUR REFERENCE, WE HAVE CREATED A SPECIAL LINK (COMERICA.COM/CLASSACTIONS) FOR UPCOMING SECURITY CLASS ACTION FILINGS. THIS LINK WILL OPEN A REGULARLY UPDATED PDF CONTAINING RELEVANT INFORMATION. PLEASE REFER TO THIS SITE FOR NOTIFICATION ABOUT CLASS ACTIONS WHICH MAY AFFECT YOUR ACCOUNT. CONTACT YOUR RELATIONSHIP MANAGER WITH ANY QUESTIONS.

GRAPHIC COMMUNICATIONS UNION
DETROIT LOCAL 2-C
RETIREMENT BENEFIT PLAN
(RESERVE/LINE ITEM ACCOUNT)

ACCOUNT STATEMENT

Statement Period
Account Number

06/01/2021 through 06/30/2021

183

MESSAGE PAGE

ERISA PLAN NOTICE

ERISA PLAN SPONSORS MUST GO TO THE DEPARTMENT OF LABOR'S WEBSITE TO ELECTRONICALLY COMPLETE FORM 5500 REPORTING, AS REQUIRED BY ERISA AND THE INTERNAL REVENUE CODE FOR PLAN YEARS THAT BEGIN AFTER 12/31/2008. YOU CAN REACH THE REPORTING TOOL, FILING REQUIREMENTS AND A LIST OF FREQUENTLY ASKED QUESTIONS AT: WWW.EFAST.DOL.GOV

AS A REMINDER, YOUR ANNUAL STATEMENT, AVAILABLE ON CUSTODY ONLINE*, INCLUDES THE FOLLOWING REPORTS WHICH CAN BE ATTACHED IN .PDF FORMAT TO THE ELECTRONIC 5500 FILING:**

UNREALIZED GAINS AND LOSSES
SCHEDULE H, PART I AND PART II
REPORT OF 5% TRANSACTIONS
5500 STATEMENT OF REALIZED GAIN (LOSS)
INCOME EARNED AND ACCRUED

* IF YOU DO NOT HAVE ACCESS TO CUSTODY ONLINE, OUR FREE INTERNET PRODUCT WHICH PROVIDES ACCESS TO YOUR TRUST ACCOUNT DATA AND STATEMENTS, PLEASE CONTACT YOUR RELATIONSHIP MANAGER TO SIGN UP, OR FOR AN ELECTRONIC FILE OF YOUR ANNUAL STATEMENT.

GRAPHIC COMMUNICATIONS UNION
DETROIT LOCAL 2-C
RETIREMENT BENEFIT PLAN
(RESERVE/LINE ITEM ACCOUNT)

ACCOUNT STATEMENT

Statement Period 06/01/2021 through 06/30/2021
Account Number [REDACTED]

183

Table Of Contents

Changes In Net Assets	1
Summary Of Assets	2
Schedule Of Assets Held	4
Summary Of Cash Transactions	5
Schedule Of Income Earned	6
Schedule Of Cash Receipts	7
Schedule Of Cash Disbursements	8
Schedule Of Asset Acquisitions	9
Schedule Of Asset Dispositions	10

GRAPHIC COMMUNICATIONS UNION
DETROIT LOCAL 2-C
RETIREMENT BENEFIT PLAN
(RESERVE/LINE ITEM ACCOUNT)

ACCOUNT STATEMENT

Statement Period
Account Number

06/01/2021 through 06/30/2021

183

Changes In Net Assets

	COST VALUE	MARKET VALUE
BEGINNING BALANCE AS OF 06/01/2021	214,687.81	214,687.81
EARNINGS		
CASH INCOME	4.49	4.49
LESS PRIOR ACCRUED INCOME	4.49-	4.49-
PLUS CURRENT ACCRUED INCOME	3.85	3.85
REALIZED GAIN/LOSS ON SALE OF ASSETS	0.00	0.00
NET UNREALIZED GAIN OR LOSS	0.00	0.00
TOTAL EARNINGS	3.85	3.85
CONTRIBUTIONS & OTHER INCREASES		
EMPLOYER CONTRIBUTIONS	1,112.12	1,112.12
TRANSFERS	410,700.00	410,700.00
TOTAL CONTRIBUTIONS & OTHER INCREASES	411,812.12	411,812.12
DISTRIBUTIONS & OTHER DECREASES		
BENEFIT PAYMENTS & DISTRIBUTIONS	149,602.68-	149,602.68-
REDEPOSITS	760.27	760.27
FEES & EXPENSES	15,464.40-	15,464.40-
TOTAL DISTRIBUTIONS & OTHER DECREASES	164,306.81-	164,306.81-
ENDING BALANCE AS OF 06/30/2021	462,196.97	462,196.97

ACCOUNT STATEMENT

Statement Period 06/01/2021 through 06/30/2021
 Account Number [REDACTED]

Summary Of Assets

	AS OF 06/01/2021		AS OF 06/30/2021	
	COST VALUE	MARKET VALUE	COST VALUE	MARKET VALUE
A S S E T S				
CASH	0.00	0.00	0.00	0.00
DUE FROM BROKERS	0.00	0.00	0.00	0.00
ACCRUED INCOME	4.49	4.49	3.85	3.85
TOTAL CASH & RECEIVABLES	4.49	4.49	3.85	3.85
SHORT TERM INVESTMENTS				
SHORT TERM INVESTMENTS	214,683.32	214,683.32	462,193.12	462,193.12
TOTAL SHORT TERM INVESTMENTS	214,683.32	214,683.32	462,193.12	462,193.12
TOTAL HOLDINGS	214,683.32	214,683.32	462,193.12	462,193.12
TOTAL ASSETS	214,687.81	214,687.81	462,196.97	462,196.97
L I A B I L I T I E S				
DUE TO BROKERS	0.00	0.00	0.00	0.00
TOTAL LIABILITIES	0.00	0.00	0.00	0.00
TOTAL NET ASSET VALUE	214,687.81	214,687.81	462,196.97	462,196.97

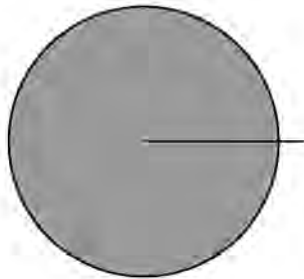
ACCOUNT STATEMENT

Statement Period
Account Number

06/01/2021 through 06/30/2021

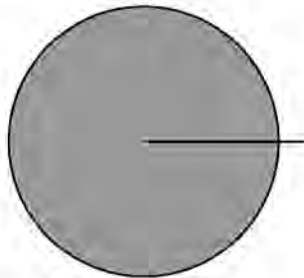
183

Beginning Market Allocation



0.0%	CASH & RECEIVABLES	4.49
100.0%	SHORT TERM INVESTMENTS	214,683.32
100.0%	Total	214,687.81

Ending Market Allocation



0.0%	CASH & RECEIVABLES	3.85
100.0%	SHORT TERM INVESTMENTS	462,193.12
100.0%	Total	462,196.97

ACCOUNT STATEMENT

Statement Period 06/01/2021 through 06/30/2021
 Account Number [REDACTED]

Schedule Of Assets Held Investment Summary

	Cost	Market Value	% of Acct	Estim Ann Inc	Income Yield
SHORT TERM INVESTMENTS	462,196.97	462,196.97	100.00	139	0.03
Total Assets	462,196.97	462,196.97	100.00	139	0.03

Schedule Of Assets Held

UNITS	ASSET DESCRIPTION	COST	UNIT PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	YIELD AT MARKET
	SHORT TERM INVESTMENTS					
	SHORT TERM INVESTMENTS					
462,193.12	GOLDMAN SACHS FINANCIAL SQUARE FUNDS- GOVERNMENT FUND-FS 38141W273	462,193.12	1.00	462,193.12	0.00	0.030
	ACCRUED INCOME	3.85		3.85	0.00	0.000
	TOTAL SHORT TERM INVESTMENTS	462,196.97		462,196.97	0.00	



GRAPHIC COMMUNICATIONS UNION
DETROIT LOCAL 2-C
RETIREMENT BENEFIT PLAN
(RESERVE/LINE ITEM ACCOUNT)

ACCOUNT STATEMENT

Statement Period 06/01/2021 through 06/30/2021
Account Number [REDACTED]

Summary Of Cash Transactions

R E C E I P T S

CASH BALANCE AS OF 06/01/2021		0.00
INCOME RECEIVED		
INTEREST	4.49	
TOTAL INCOME RECEIPTS		4.49
CASH RECEIPTS		
EMPLOYER CONTRIBUTIONS	1,112.12	
TRANSFERS	410,700.00	
TOTAL CASH RECEIPTS		411,812.12
PROCEEDS FROM THE DISPOSITION OF ASSETS		165,067.08
TOTAL RECEIPTS		576,883.69

D I S B U R S E M E N T S

CASH DISBURSEMENTS		
BENEFIT PAYMENTS & DISTRIBUTIONS	149,602.88-	
REDEPOSITS	760.27	
FEES & EXPENSES	15,464.40-	
TOTAL CASH DISBURSEMENTS		164,306.81-
COST OF ACQUISITION OF ASSETS		412,576.88-
TOTAL DISBURSEMENTS		576,883.69-
CASH BALANCE AS OF 06/30/2021		0.00

THE ENDING CASH BALANCE CONSISTS OF:

CASH	0.00
DUE FROM BROKER	0.00
DUE TO BROKER	0.00
TOTAL CASH	0.00

GRAPHIC COMMUNICATIONS UNION
 DETROIT LOCAL 2-C
 RETIREMENT BENEFIT PLAN
 (RESERVE/LINE ITEM ACCOUNT)

ACCOUNT STATEMENT

Statement Period 06/01/2021 through 06/30/2021
 Account Number [REDACTED]

Schedule Of Income Earned

DATE	DESCRIPTION	BEGINNING ACCRUAL / RECEIVABLE	CASH RECEIVED	ENDING ACCRUAL / RECEIVABLE	INCOME EARNED	MARKET / COST BASIS
INTEREST						
SHORT TERM INVESTMENTS						
CUSIP # 38141W273						
GOLDMAN SACHS FINANCIAL SQUARE						
FUNDS- GOVERNMENT FUND-FS						
06/01/2021	DIVIDEND ON GOLDMAN SACHS FINANCIAL SQUARE FUNDS- GOVERNMENT FUND-FS PAYABLE 06/01/2021 FOR 05/01/21 THROUGH 05/31/21		4.49			
	SECURITY TOTAL	4.49 0.00	4.49	3.85 0.00	3.85	
	TOTAL SHORT TERM INVESTMENTS	4.49 0.00	4.49	3.85 0.00	3.85	
	TOTAL INTEREST	4.49 0.00	4.49	3.85 0.00	3.85	
	TOTAL INCOME EARNED	4.49 0.00	4.49	3.85 0.00	3.85	

GRAPHIC COMMUNICATIONS UNION
 DETROIT LOCAL 2-C
 RETIREMENT BENEFIT PLAN
 (RESERVE/LINE ITEM ACCOUNT)

ACCOUNT STATEMENT

Statement Period 06/01/2021 through 06/30/2021
 Account Number [REDACTED]

Schedule Of Cash Receipts

DATE	DESCRIPTION	CASH
EMPLOYER CONTRIBUTIONS		
06/17/2021	REC'D FROM JP MORGAN CHECK#041689 DATED 6/4/2021 GRAPHIC COMM UNION	100.00
06/22/2021	REC'D FROM THE LOCAL CREDIT UNION EMPLOYER CONTRIBUTION CHECK 3974 DATED 6/14/21 MARCH-APRIL-MAY 2021 [REDACTED]	912.12
06/24/2021	REC'D FROM JP MORGAN CHECK#041696 DATED 6/11/2021 GRAPHIC COMM UNION	100.00
TOTAL EMPLOYER CONTRIBUTIONS		1,112.12
TRANSFERS		
06/22/2021	REC'D FROM ITSGOV INT'L SERV SEQ #08645	410,700.00
TOTAL TRANSFERS		410,700.00
TOTAL CASH RECEIPTS		411,812.12



GRAPHIC COMMUNICATIONS UNION
 DETROIT LOCAL 2-C
 RETIREMENT BENEFIT PLAN
 (RESERVE/LINE ITEM ACCOUNT)

ACCOUNT STATEMENT

Statement Period 06/01/2021 through 06/30/2021
 Account Number [REDACTED]

Schedule Of Cash Disbursements

DATE	DESCRIPTION	CASH
	BENEFIT PAYMENTS & DISTRIBUTIONS	
06/25/2021	PENSION BENEFITS PAID TO VARIOUS PARTICIPANTS 379 PAYMENTS MADE	149,602.68-
	TOTAL BENEFIT PAYMENTS & DISTRIBUTIONS	149,602.68-
	REDEPOSITS	
06/10/2021	REC'D FROM [REDACTED] Received for Pension Payment Return 104670	545.64
06/14/2021	REC'D FROM [REDACTED] Received for Pension Payment Return 104670	214.63
	TOTAL REDEPOSITS	760.27
	FEEES & EXPENSES	
06/02/2021	ADMINISTRATIVE EXPENSE PAID TO DISTRICT COUNCIL 3 FOR THE PERIOD DECEMBER 1, 2020 THROUGH MAY 31, 2021	15,464.40-
	TOTAL FEES & EXPENSES	15,464.40-
	TOTAL CASH DISBURSEMENTS	164,306.81-

GRAPHIC COMMUNICATIONS UNION
 DETROIT LOCAL 2-C
 RETIREMENT BENEFIT PLAN
 (RESERVE/LINE ITEM ACCOUNT)

ACCOUNT STATEMENT

Statement Period 06/01/2021 through 06/30/2021
 Account Number [REDACTED]

Schedule Of Asset Acquisitions

TRADE DATE	SETTLMT DATE	DESCRIPTION	UNITS	COST
SHORT TERM INVESTMENTS				
		CUSIP # 38141W273 GOLDMAN SACHS FINANCIAL SQUARE FUNDS- GOVERNMENT FUND-FS		
		TOTAL ACTIVITY FROM 06/01/2021 TO 06/30/2021		
		PURCHASED 412,576.88 GOLDMAN SACHS FINANCIAL SQUARE FUNDS- GOVERNMENT FUND-FS ON 06/30/2021 AT 1.00	412,576.88	412,576.88
		TOTAL	412,576.88	412,576.88
		TOTAL SHORT TERM INVESTMENTS	412,576.88	412,576.88
		TOTAL ASSET ACQUISITIONS	412,576.88	412,576.88

GRAPHIC COMMUNICATIONS UNION
 DETROIT LOCAL 2-C
 RETIREMENT BENEFIT PLAN
 (RESERVE/LINE ITEM ACCOUNT)

ACCOUNT STATEMENT

Statement Period 06/01/2021 through 06/30/2021
 Account Number [REDACTED]

Schedule Of Asset Dispositions

TRADE DATE	SETTLMT DATE	DESCRIPTION	PROCEEDS	MKT / COST BASIS	MKT / COST GAIN / LOSS
SHORT TERM INVESTMENTS					
		CUSIP # 38141W273 GOLDMAN SACHS FINANCIAL SQUARE FUNDS- GOVERNMENT FUND-FS			
		TOTAL ACTIVITY FROM 06/01/2021 TO 06/30/2021			
		SOLD 165,067.08 GOLDMAN SACHS FINANCIAL SQUARE FUNDS- GOVERNMENT FUND-FS ON 06/30/2021 AT 1.00	165,067.08	165,067.08	165,067.08
		TOTAL 165,067.08	165,067.08	165,067.08	165,067.08
		TOTAL SHORT TERM INVESTMENTS	165,067.08	165,067.08	165,067.08
		TOTAL ASSET DISPOSITIONS	165,067.08	165,067.08	165,067.08

ACCOUNT STATEMENT

Statement Period
Account Number

06/01/2021 through 06/30/2021

183

MESSAGE PAGE

SWEEP

COMERICA OFFERS A VAST ARRAY OF MONEY MARKET SWEEP VEHICLE OPTIONS TO OUR CLIENTS, INCLUDING GOVERNMENT, TREASURY AND TAX-EXEMPT FUNDS.

PLEASE CONTACT YOUR RELATIONSHIP MANAGER FOR ADDITIONAL INFORMATION ON SWEEP OPTIONS.

COMERICA DOES NOT GUARANTEE INVESTMENT RESULTS. WHERE NON-DEPOSIT INVESTMENT PRODUCTS ARE USED, SUCH INVESTMENT PRODUCTS ARE NOT INSURED BY THE FDIC; ARE NOT DEPOSITS OF OR OTHER OBLIGATIONS OF COMERICA AND ARE NOT GUARANTEED BY COMERICA; AND ARE SUBJECT TO INVESTMENT RISKS, INCLUDING THE POSSIBLE LOSS OF THE PRINCIPAL INVESTED.

IMPORTANT NEWS REGARDING ACH (DIRECT DEPOSIT) PAYMENTS

THE NATIONAL AUTOMATED CLEARING HOUSE ASSOCIATION (NACHA) REQUIRES THAT ALL PARTIES TO AN ACH TRANSACTION MUST CLASSIFY PAYMENTS TRANSMITTED TO OR RECEIVED FROM, A FINANCIAL AGENCY OUTSIDE THE U.S. AS AN INTERNATIONAL ACH TRANSACTION (IAT). THE FEDERAL BANK SECRECY ACT REQUIRES THAT ADDITIONAL DATA BE SENT WITH AN IAT.

THERE ARE SUBSTANTIAL MONETARY PENALTIES FOR VIOLATION OF THE IAT RULES, SO IT IS IMPORTANT FOR US TO WORK TOGETHER TO ENSURE FULL COMPLIANCE WITH THE RULES.

ADDITIONAL INFORMATION REQUIRED

THE ORIGINATOR OF A TRANSACTION CODED AS AN IAT (WHICH INCLUDES DIRECT DEPOSITS OF PENSION PAYMENTS WHICH ULTIMATELY END UP AT A NON-U.S. FINANCIAL AGENCY) WILL BE REQUIRED TO PROVIDE THE FOLLOWING ADDITIONAL INFORMATION TO COMERICA BANK:

- NAME AND PHYSICAL ADDRESS OF THE ORIGINATOR (PLAN SPONSOR IN THE CASE OF PENSION PAYMENTS)
- NAME AND PHYSICAL ADDRESS OF THE RECEIVER (BENEFICIARY)
- ACCOUNT NUMBER OF THE RECEIVER
- IDENTITY OF THE RECEIVER'S BANK
- CORRESPONDENT BANK'S NAME, BANK ID NUMBER AND BANK BRANCH COUNTRY CODE
- REASON FOR THE PAYMENT

DUE DILIGENCE FOR RETIREMENT PLANS

AS PART OF OUR DUE DILIGENCE EFFORT TO COMPLY WITH THE IAT RULES, COMERICA WILL CONTACT DIRECTLY THOSE RETIREES WHO ARE RECEIVING THEIR PENSION PAYMENTS VIA ACH AND FOR WHOM WE HAVE A FOREIGN ADDRESS. WE NEED YOUR ASSISTANCE, HOWEVER, TO IDENTIFY ANY OTHER RETIREES WHOSE PENSION PAYMENTS MIGHT BE SUBJECT TO THE IAT RULES.

ACCORDING TO NACHA, IN THE CASE OF PENSION PAYMENTS, IT IS THE EMPLOYER'S OBLIGATION TO UNDERSTAND THE LEGAL DOMICILE OF ITS RETIREES AND INQUIRE WHETHER THEY HOLD ACCOUNTS IN U.S. BANKS OR WITH OFFSHORE FINANCIAL INSTITUTIONS. THE EMPLOYER OR PLAN SPONSOR IS CONSIDERED TO BE THE "ORIGINATOR" OF THE PENSION PAYMENTS. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT YOUR RELATIONSHIP MANAGER.



GRAPHIC COMMUNICATIONS UNION
DETROIT LOCAL 2-C
RETIREMENT BENEFIT PLAN
(RESERVE/LINE ITEM ACCOUNT)

ACCOUNT STATEMENT

Statement Period
Account Number

06/01/2021 through 06/30/2021
[REDACTED]

183

MESSAGE PAGE

DECLARATION OF TRUST DOCUMENTS AVAILABLE

COMERICA BANK & TRUST, N.A., THE TRUSTEE OF A VARIETY OF COMMON TRUST AND COLLECTIVE INVESTMENT FUNDS, HAS CLAIMED AN EXEMPTION FROM THE DEFINITION OF THE TERM "COMMODITY POOL OPERATOR" UNDER THE COMMODITY EXCHANGE ACT, AND IS, THEREFORE, NOT SUBJECT TO REGISTRATION UNDER THE ACT RELATIVE TO EACH OF THE FUNDS. FOR A COMPLETE LIST OF THE RELEVANT FUNDS, PLEASE CONTACT YOUR RELATIONSHIP MANAGER.

COMERICA MAY PARTICIPATE IN CLASS ACTION LAWSUITS ON YOUR BEHALF UNLESS OTHERWISE INSTRUCTED. IF A SETTLEMENT IS RECEIVED, COMERICA MAY CHARGE A FEE OF \$10 WHEN THE PROCEEDS ARE POSTED TO THE ACCOUNT.

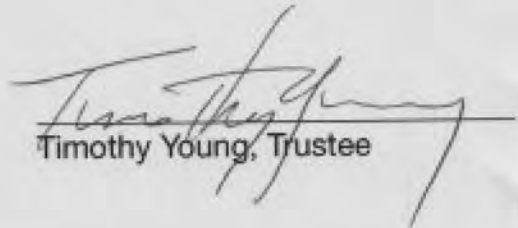
RABBI TRUST

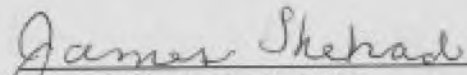
"FOR NON-QUALIFIED RABBI TRUST CLIENTS, THE ANNUAL STATEMENT CONTAINS THE INFORMATION NEEDED TO ASSIST PLAN SPONSORS IN COMPUTING TAXABLE INCOME AND FULFILLING THEIR TAX REPORTING REQUIREMENTS."

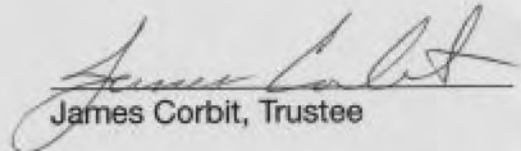
**CERTIFICATION THAT PLAN AMENDMENT
TO REINSTATE SUSPENDED BENEFITS WILL BE TIMELY ADOPTED**

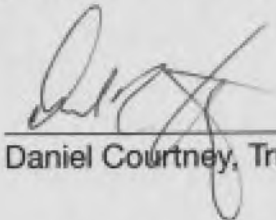
As required by 29 C.F.R. 4262.7(e)(2) for the application for special financial assistance for the Graphic Communications Union Local 2-C Retirement Benefit Plan (the "Application" for the "Plan"), we, the members of the Board of Administration of the Plan hereby certify that the proposed amendment to the Graphic Communications Union Local 2-C Retirement Benefit Plan (restated February 2002) 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.


Israel Castro, Chair and Trustee


Timothy Young, Trustee


James Shehadi, Trustee


James Corbit, Trustee


Daniel Courtney, Trustee

12-20-2021
Date

**AMENDMENT TO THE
GRAPHIC COMMUNICATIONS UNION
LOCAL 2-C RETIREMENT BENEFIT PLAN
(RESTATED FEBRUARY 2002)**

Compliance with ERISA section 4262 and 29 C.F.R. 4262

The Board of Administration of the Graphic Communications Union Local 2-C Retirement Benefit Plan has applied to the Pension Benefit Guaranty Corporation ("PBGC") under section 4262 of the Employee Retirement Income Security Act of 1974, as amended ("ERISA"), and 29 C.F.R. 4262 for special financial assistance for the Graphic Communications Unions Local 2-C Retirement Benefit Plan (the "Plan")

29 C.F.R. 4262.6(e)(1) requires that the plan sponsor of a plan applying for special financial assistance amend the plan to require that the plan be administered in accordance with the restrictions and conditions specified in section 4262 of ERISA and 29 C.F.R. part 4262 and that the amendment be contingent upon approval by PBGC of the plan's application for special financial assistance.

Under the terms of Section 10.1 of the Graphic Communications Union Local 2-C Retirement Benefit Plan (as restated February 2002), the Board has the power to amend the Plan Document.

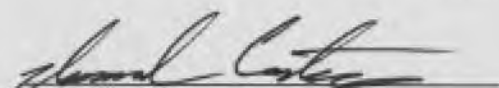
Pursuant to the terms of Section 10.1 of the Retirement Benefit Plan, it is resolved that the Retirement Benefit Plan is amended as follows:

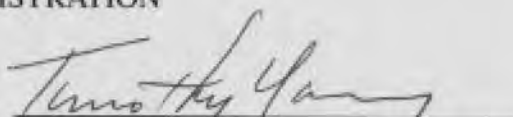
Section 12.6 is added to read:

"12.6. The following provisions apply notwithstanding anything to the contrary in this or any other document governing the Plan. Beginning with the SFA measurement date selected by the Plan in the Plan's application for special financial assistance, the Plan shall be administered in accordance with the restrictions and conditions specified in section 4262 of ERISA and 29 C.F.R. part 4262. This amendment is contingent upon approval by PBGC of the Plan's application for special financial assistance."


The Board of Administration adopts the above amendment on *December 20*, 2021.


BOARD OF ADMINISTRATION


Israel Castro, Chair and Trustee


Timothy Young, Trustee


James Shehadi, Trustee


James Corbit, Trustee


Daniel Courtney, Trustee

AGENCY AGREEMENT

This Agreement made this 7th day of November, 1976 between the Board of Administration (collectively, the "Board") of Graphic Communications Union Local 2-C Retirement Benefit Plan (the "Plan") created under an agreement dated March 3, 1976, (the "Trust Agreement") and Comerica Bank, a Michigan banking corporation of Detroit, Michigan (the "Agent").

WITNESSETH:

WHEREAS, Board has certain powers and duties in the operation and administration of the assets of the Plan (the "Fund") including the duty to collect, hold, manage, conserve, invest and reinvest the Fund, the income therefrom and contributions thereto, and from time to time to pay out monies of the Fund in accordance with the terms of the Plan and the Trust Agreement, and

WHEREAS, Board has the authority under the Trust Agreement, and has deemed it advisable to designate an agent to act as depository to the Board under such Trust Agreement, as to all property deposited with it hereunder, and Agent has agreed to act in such capacity.

NOW, THEREFORE, IT IS AGREED as follows:

1. Board may from time to time deposit with Agent cash and property belonging to the Fund, to be held by Agent in its capacity as agent and administered pursuant to the terms of this Agreement, including such amendments as may from time to time be agreed upon by the parties hereto or their successors.
2. The Agent shall maintain such portion of the Fund as Board may from time to time deposit with it without distinction between principal and income. The Agent shall comply with all investment directions received from the Board or its investment adviser duly designated in writing and shall have no liability for any results of such compliance. The Agent is authorized to invest accumulated cash in a variety of short-term funds, including but not limited to savings deposits with the Agent, pending further direction of the Board or its investment adviser. Investments in savings deposits will be subject to such banking regulations as may be in effect from time to time. The Agent shall not be liable for interest on any cash not so invested or held by it awaiting investment or distribution instructions from the Board or its investment adviser. The Agent is authorized to employ its automatic cash management procedures for agency accounts.
3. The Board may elect to direct the investments under the Plan in any of the collective investment funds maintained by Agent as may be agreed upon by Board and Agent from time to time, provided, however, that all such investments shall comply with any regulatory or statutory investment restrictions and with the terms of the Plan. The portion of the Fund so invested may be commingled with the funds of other trusts, to the extent allowed by law. The portion of the Fund so invested shall be subject to all of the provisions of the declaration(s) of trust creating said collective investment fund(s), as amended from time to time. Such declaration(s) of trust, as amended, are hereby (or shall be) incorporated by reference into and made a part of the Plan and this Agreement. The Board intends to maintain the qualification of the Plan under Sections 401(a), 404, and 501(a) of the Internal Revenue Code or their respective counterparts as hereafter in effect. Until advised to the contrary, the Agent may assume that the Plan is so qualified and that the Fund is exempt from federal income tax.

4. Withdrawals or payments of assets or cash held by Agent hereunder shall be made only upon the written instructions of the undersigned Board, or its qualified successor, or its duly appointed agent or agents, and it agrees to indemnify Agent and hold it harmless as to any action reasonably taken to comply with or implement any such written instructions.

5. Agent shall maintain such records as are reasonably necessary to report to the Board monthly all its transactions, receipts and disbursements as agent hereunder. Unless written objection is made to each statement within sixty (60) days from receipt thereof, it shall be considered approved as an account stated with reference to the actions shown therein.

6. As to any property or securities held pursuant to this Agreement, Agent may hold and register the same in its own name, or in the name of a nominee, or by electronic book entry, provided that the records of the Agent shall at all times reflect the interest of Board in all property so held. All proxies will be forwarded to the Board or its investment adviser for voting.

7. The Agent utilizes various standard industry pricing services and brokerage contacts to provide current pricing information for active publicly traded securities. Assets not publicly traded may reflect the initial acquisition value or cost and not a current market value. Many fixed income securities are priced on a matrix system, resulting in a mathematical approximation of price derived by computer. Although Agent attempts to provide accurate pricing, in some instances prices may not reflect the most accurate pricing readily available or the true value of the asset. The Agent shall have no liability for such an occurrence.

8. The Agent subscribes to various standard industry notification services pertaining to capital actions including puts, calls, tenders, mergers, conversions, stock distributions and other activities. The Agent agrees to process assets in accordance with the Board's or its investment adviser's instructions, provided the Agent receives the Board's or investment adviser's timely written authorization. In no event shall the Agent be liable for failure to respond to a capital action if proper notification and authorization have not been provided to the Agent from the Board or its investment adviser within the required time frames as specified in the capital action notice. The Agent shall attempt to notify the Board or its investment adviser if it becomes aware of a voluntary action or provision which may affect an asset. Further, the Agent shall have no responsibility and no obligation with respect to any asset to take any action which shall pertain to stock dividends, warrants, rights to subscribe, offers to purchase, exercising of options, plans of reorganization, plans of exchange of securities, claims or settlements pertaining thereto, other than that which is directly authorized by the Board or its investment adviser by written instruction received by the Agent within required time frames.

9. The Agent shall have no obligation or liability with respect to the receipt, distribution, or reporting of an event of bond default or a filing of a bankruptcy, and shall have no obligation or liability for the filing of any related report or claim other than that which is directly authorized by the Board or its investment adviser by written instruction received by the Agent within required time frames.

10. The Agent shall not be liable for any loss resulting from the physical presence of any property in a foreign country including, but not limited to, losses resulting from nationalization, expropriation, exchange controls or acts of war or terrorism.

11. Board, by notice in writing to Agent, may designate any one or more of the parties constituting the membership of the Board to give directions to the Agent on behalf of the Board, or may designate any other person to act for it in giving instructions to the Agent. In the absence of such notice, which shall be signed by all of the parties constituting the membership of the Board, any written notice or direction to the Agent under any term or provision of this Agreement shall be signed by all of the parties then constituting the membership of the

Board then holding office. Agent shall be entitled to treat the signatories of this Agreement as the Board until it shall receive written notice in form acceptable to it of any change in the membership of the Board.

12. Board may remove the Agent by written notice of such removal mailed to the Agent or by delivery of written notice to the Agent. Such removal shall take effect sixty (60) days following the date of mailing or delivery of such notice. The Agent may resign upon giving like notice.


13. In consideration of Agent acting as agent under this Agreement, Board agrees to pay such fees and expenses of the Agent as are mutually agreeable between the Board and the Agent, and Agent shall have a lien on property held hereunder for such fees and expenses. If any expenses, taxes or other such payments are requested of the Agent other than through directions of the Board, or its agent, Agent shall notify the Board and take such action as directed by Board, or its appointed agent, provided that Agent shall not be required to prosecute or defend any legal proceedings involving the Fund or any property or interest in property held hereunder, or to take any other such step unless it shall be first indemnified to its satisfaction in respect to such proposed action.

14. The Agent is a party to this Agreement solely for the purposes set forth and no obligation or duty shall be expected or required of it except as expressly stated. This Agreement embodies the entire agreement of the parties, superseding any and all prior agreements, proposals, and understandings, whether written or oral.

BOARD OF ADMINISTRATION

By: 
Its: **CHAIRMAN**

COMERICA BANK

By: 
Its: **AL KROL**
VICE PRESIDENT

**Proposed AMENDMENT TO THE
GRAPHIC COMMUNICATIONS UNION
LOCAL 2-C RETIREMENT BENEFIT PLAN
(RESTATED FEBRUARY 2002)**

Reinstatement and Make-up of Benefits suspended due to Insolvency and PBGC Guarantee

The Board of Administration of the Graphic Communications Union Local 2-C Retirement Benefit Plan has applied to the Pension Benefit Guaranty Corporation ("PBGC") under section 4262 of the Employee Retirement Income Security Act of 1974, as amended ("ERISA"), and 29 C.F.R. 4262 for special financial assistance for the Graphic Communications Unions Local 2-C Retirement Benefit Plan (the "Plan")

29 C.F.R. 4262.6(e)(2) and 4262.15(a) require that the plan sponsor of a plan that is applying for special financial assistance and that suspended benefits under section 305(e)(9) or 4245(a) of ERISA amend 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).

29 C.F.R. 4262.7(e)(2) requires that an application for special financial assistance 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 4262.6(e)(2) and certification by the plan sponsor that the plan amendment will be timely adopted.

Benefits under the Plan have been suspended under section 4245(a) of ERISA due to plan insolvency.

Under the terms of Section 10.1 of the Graphic Communications Union Local 2-C Retirement Benefit Plan (as restated February 2002), the Board has the power to amend the Plan Document.

Pursuant to the terms of Section 10.1 of the Retirement Benefit Plan, it is resolved that the Retirement Benefit Plan is amended as follows:

Section 12.7 is added to read:

"12.7. 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 section 305(e)(9) of 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.”

The Board of Administration adopts the above amendment on

, 2021.

BOARD OF ADMINISTRATION

Israel Castro, Chair and Trustee

Timothy Young, Trustee

James Shehadi, Trustee

James Corbit, Trustee

Daniel Courtney, Trustee

Comerica wire and ACH instructions

Wiring Instructions are:

Comerica Bank
ABA 072000096
Institutional Trust/Client Administration
GL 21585-98547
FBO Graphic Communication Local 2-C
FCC [REDACTED]

ACH Instructions are:

Comerica Bank
ABA 072000096
Account [REDACTED]
FC Graphic Communications Local 2-C
FCC [REDACTED]

Comerica requires 2 day advance notice of ACH deposits

**ACH VENDOR/MISCELLANEOUS PAYMENT
ENROLLMENT FORM**

OMB No. 1530-0069

This form is used for Automated Clearing House (ACH) payments with an addendum record that contains payment-related information processed through the Vendor Express Program. Recipients of these payments should bring this information to the attention of their financial institution when presenting this form for completion. See reverse for additional instructions.

PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data, by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

AGENCY INFORMATION

FEDERAL PROGRAM AGENCY		
AGENCY IDENTIFIER:	AGENCY LOCATION CODE (ALC):	ACH FORMAT: <input type="checkbox"/> CCD+ <input type="checkbox"/> CTX
ADDRESS:		
CONTACT PERSON NAME:	TELEPHONE NUMBER: ()	
ADDITIONAL INFORMATION:		

PAYEE/COMPANY INFORMATION

NAME	SSN NO. OR TAXPAYER ID NO.
ADDRESS	
CONTACT PERSON NAME:	TELEPHONE NUMBER: ()

FINANCIAL INSTITUTION INFORMATION

NAME: Comerica Bank	
ADDRESS: 411 West Lafayette, Detroit MI 48226	
ACH COORDINATOR NAME: NA	TELEPHONE NUMBER: ()
NINE-DIGIT ROUTING TRANSIT NUMBER: <u> 0 </u> <u> 7 </u> <u> 2 </u> <u> 0 </u> <u> 0 </u> <u> 0 </u> <u> 0 </u> <u> 9 </u> <u> 6 </u>	
DEPOSITOR ACCOUNT TITLE: Graphic Communications 2C	
DEPOSITOR ACCOUNT NUMBER: [REDACTED] further credit to [REDACTED]	LOCKBOX NUMBER:
TYPE OF ACCOUNT: <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> LOCKBOX <input checked="" type="checkbox"/> DDA account X	
SIGNATURE AND TITLE OF AUTHORIZED OFFICIAL: (Could be the same as ACH Coordinator) <i>Carolina Morgan</i>	TELEPHONE NUMBER: (313) 222-3290

AUTHORIZED FOR LOCAL REPRODUCTION

SF 3881 (Rev. 2/2003)
Prescribed by Department of Treasury
31 U S C 3322; 31 CFR 210

Instructions for Completing SF 3881 Form

Make three copies of form after completing. Copy 1 is the Agency Copy; copy 2 is the Payee/Company Copy; and copy 3 is the Financial Institution Copy.

1. **Agency Information Section** - Federal agency prints or types the name and address of the Federal program agency originating the vendor/miscellaneous payment, agency identifier, agency location code, contact person name and telephone number of the agency. Also, the appropriate box for ACH format is checked.
2. **Payee/Company Information Section** - Payee prints or types the name of the payee/company and address that will receive ACH vendor/miscellaneous payments, social security or taxpayer ID number, and contact person name and telephone number of the payee/company. Payee also verifies depositor account number, account title, and type of account entered by your financial institution in the Financial Institution Information Section.
3. **Financial Institution Information Section** - Financial institution prints or types the name and address of the payee/company's financial institution who will receive the ACH payment, ACH coordinator name and telephone number, nine-digit routing transit number, depositor (payee/company) account title and account number. Also, the box for type of account is checked, and the signature, title, and telephone number of the appropriate financial institution official are included.

Burden Estimate Statement

The estimated average burden associated with this collection of information is 15 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Bureau of the Fiscal Service, Forms Management Officer, Parkersburg, WV 26106-1328. THIS ADDRESS SHOULD ONLY BE USED FOR COMMENTS AND/OR SUGGESTIONS CONCERNING THE AMOUNT OF TIME SPENT COLLECTING THE DATA. DO NOT SEND THE COMPLETED PAPERWORK TO THE ADDRESS ABOVE FOR PROCESSING.

Application Checklist


v20210708p

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

The Application for Approval of Special Financial Assistance Checklist ("Application Checklist" or "Checklist") identifies all information required to be filed with the application.

The information in this Application Checklist, and the Application Checklist itself, are uploaded in PBGC's e-Filing Portal by logging into the e-Filing Portal, going to the Multiemployer Events section and clicking on "Create New ME Filing," and then under "Select a Filing Type," selecting "Application for Financial Assistance – Special." Note, if you go to the e-Filing Portal and do not see the option "Application for Financial Assistance – Special," this means that the portal is currently closed and PBGC is not accepting applications at this time, unless the plan is eligible to make an emergency filing under § 4262.10(f). PBGC's website at www.pbgc.gov will be updated when the e-Filing Portal reopens for applications. PBGC maintains information on its website at www.pbgc.gov to inform prospective applicants about the current status of the e-Filing portal, as well as to provide advance notice of when PBGC expects to open or temporarily close the e-Filing Portal.

General instructions for completing the Application Checklist:

Complete all items that are shaded: 

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

If a revised application is filed after a denial was received but the application was not withdrawn, the revised application must differ from the denied application only to the extent necessary to address the reasons provided by PBGC for the denial. For the revised application, the filer may, but is not required to, submit an entire application. A revised application for SFA must use the same SFA measurement date, participant census data, and interest rate assumption as were used in the plan's initial 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**.

If a revised application is filed after an application was withdrawn, the revised application must use the same SFA measurement date, participant census data, and interest rate assumption from the initial application. Upload only the information that changed from the initial application. For all Application Checklist Items that were previously filed that are not being changed, include a statement in the Plan Comments section of the Application Checklist to indicate that the 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.

Application Checklist

v20210708p

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

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 any Checklist Item where only a portion of the submitted document is responsive, identify the page numbers in the identified document that are responsive.

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.

Supplemental 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.

Requested File Naming (if applicable): For certain Checklist Items, a specified format for naming the file is requested.

SFA Regulation Reference: Identifies the applicable section of PBGC's regulation.

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 #47 on the Application Checklist.** If there has been a plan merger as described in § 4262.4(f)(1)(ii), you also must provide responses for Checklist Items #48 through #60 on the Application Checklist. If you are required to provide responses for Checklist Items #48 through #60, your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #48 through #60 on the Application Checklist. All other plans should not provide responses for Items #48 through #60 of the Application Checklist.

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 required for the three initial questions concerning whether or not this application is a submission of a revised application, or whether the plan has been terminated.

Application Checklist

v20210708p

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

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

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

Application to PBGC for Special Financial Assistance (SFA)

v20210708p

APPLICATION CHECKLIST

Plan name:	Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Amount Requested:	\$41,171,818.00
Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #47.	

-----Filers provide responses here for each Checklist Item:-----
 Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #	Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	Upload as Document Type	Requested File Naming (if applicable)	SFA Regulation Reference	SFA Filing Instructions Reference
Plan Information, Checklist, and Certifications									
	Is this application a revised application submitted after the denial of a previously filed application for SFA?	Yes No	No						
	Is this application a revised application submitted after a plan has withdrawn its application for SFA?	Yes No	Yes						
	Has this plan been terminated?	Yes No	No		If terminated, provide date of plan termination.				
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	Checklist GCU 2-C Retirement Benefit Plan REV.xlsx			Special Financial Assistance Checklist	Checklist Pension Plan Name, where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.6(a) Section E, Item 1
2.	Does the application include an SFA request cover letter (optional)? Enter N/A if no letter is provided.	Yes N/A	N/A				Financial Assistance Request Letter		Section D, Item 1
3.	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?	Yes No	Yes	GCU 2-C Retirement Benefit Plan SEC D Plan Stmts REV.pdf	2		Financial Assistance Application	§ 4262.6(b)(1)	Section D
4.	Does the application include the required penalties of perjury statement signed by an authorized trustee who is a current member of the board of trustees?	Yes No	Yes	GCU 2-C Retirement Benefit Plan SEC E certs REV.pdf	1		Financial Assistance Application	§ 4262.6(b)(2)	Section E, Item 6
5.	Does the application include the name, address, email, and telephone number of the plan sponsor? Does it also include the same contact information for the plan sponsor's duly authorized representatives, including legal counsel and enrolled actuary?	Yes No	Yes	GCU 2-C Retirement Benefit Plan SEC D Plan Stmts REV.pdf	1		Financial Assistance Application	§ 4262.7(a)	Section D, Item 2
6.	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 instructions?	Yes No	Yes	GCU 2-C Retirement Benefit Plan SEC D Plan Stmts REV.pdf	1		Financial Assistance Application	§ 4262.3 § 4262.7(b)	Section D, Item 3
7a.	If the plan claims SFA eligibility under section 4262(b)(1)(C) of ERISA, does the application include a certification from the plan's enrolled actuary that the plan is eligible for SFA which specifically notes the specified year for each component of eligibility (certification of plan status, modified funding percentage, and participant ratio), the detailed derivation of the modified funding percentage, and the derivation of the participant ratio?	Yes No N/A	N/A				Financial Assistance Application	§ 4262.6(c) § 4262.7(b)	Section E, Item 2
7b.	Does the certification in Checklist Item #7a also identify all assumptions and methods (including supporting rationale and, where applicable, reliance on the plan sponsor) used to develop the current value of withdrawal liability that is utilized in the calculation of the modified funded percentage?	Yes No N/A	N/A				Financial Assistance Application	§ 4262.6(c) § 4262.7(b)	Section E, Item 2
8a.	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))?	Yes No N/A	Yes	GCU 2-C Retirement Benefit Plan SEC D Plan Stmts REV.pdf	1	Priority group 1, insolvent January 1, 2015	Financial Assistance Application	§ 4262.7(c) § 4262.10(d)(2)	Section D, Item 4

Application to PBGC for Special Financial Assistance (SFA)

v20210708p

APPLICATION CHECKLIST

Plan name:	Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Amount Requested:	\$41,171,818.00
Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #47.	

-----Filers provide responses here for each Checklist Item:-----
 Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	Upload as Document Type	Requested File Naming (if applicable)	SFA Regulation Reference	SFA Filing Instructions Reference
8b.	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?	Yes No N/A	N/A				Financial Assistance Application		§ 4262.10(f)	Section D, Item 4
9.	If the plan's application is submitted on or prior to March 11, 2023, does the application include a certification from the plan's enrolled actuary that the plan is eligible for priority status, with specific identification of the applicable priority group? This item is not required if the plan is insolvent, has implemented a MPRA suspension as of 3/11/2021, is in critical and declining status and had 350,000+ participants, or is listed on PBGC's website at www.pbgc.gov as being in priority group 6. See § 4262.10(d).	Yes No N/A	N/A				Financial Assistance Application		§ 4262.6(c) § 4262.7(c) § 4262.10(d)(2)	Section E, Item 3
10.	Does the application include the information used to determine the amount of requested SFA for the plan based on a deterministic projection and using the actuarial assumptions as described in § 4262.4? Does the application include the following? a. Interest rate used, including supporting details (such as, if applicable, the month selected by plan sponsor to determine the third segment rate used to calculate the interest rate limit) on how it was determined? b. Fair market value of assets on the SFA measurement date? c. For each plan year in the SFA coverage period: i. Separately identify the projected amount of contributions, projected withdrawal liability payments, and other payments expected to be made to the plan (excluding the amount of financial assistance under section 4261 of ERISA and the SFA to be received by the plan)? ii. Separately identify benefit payments described in § 4262.4(b)(1) (excluding the payments in (iii) below), for current retirees and beneficiaries, terminated vested participants not currently receiving benefits, currently active participants, and new entrants? iii. Separately identify benefit 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? iv. Separately identify administrative expenses expected to be paid using plan assets, excluding the amount owed PBGC under section 4261 of ERISA? d. For each plan year in the SFA coverage period, the projected investment income based on the interest rate in (a) above, and the projected fair market value of assets at the end of each plan year? e. The present value (using the interest rate identified in (a) above) as of the SFA measurement date of each of the separate items provided in (c)(i)-(iv) above? f. SFA amount determined as a lump sum as of the SFA measurement date?	Yes No	Yes	Template 4 GCU 2-C Retirement Benefit Plan REV.xlsx			Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 4 Pension Plan Name where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.4 § 4262.8(a)(4)	Section C, Item 4
11.	Does the application include the plan's enrolled actuary's certification 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, including identification of all assumptions and methods used, sources of participant data and census data, and other relevant information? This certification should be calculated reflecting any events and any mergers identified in § 4262.4(f).	Yes No	Yes	GCU 2-C Retirement Benefit Plan SEC E certs REV.pdf	2		Financial Assistance Application		§ 4262.4 § 4262.6(c) § 4262.8(a)(4)	Section E, Item 4
12.	Does the application include a detailed narrative description of the development of the assumed future contributions and assumed future withdrawal liability payments used to calculate the requested SFA amount?	Yes No	Yes	GCU 2-C Retirement Benefit Plan SEC D Plan Stmt REV.pdf	1	Future contributions are based upon assumptions used in the January 1, 2020 actuarial certification as well as	Financial Assistance Application		§ 4262.8(a)(6)	Section D, Item 5

Application to PBGC for Special Financial Assistance (SFA)

v20210708p

APPLICATION CHECKLIST

Plan name:	Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Amount Requested:	\$41,171,818.00
Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #47.	

-----Filers provide responses here for each Checklist Item:-----
 Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	Upload as Document Type	Requested File Naming (if applicable)	SFA Regulation Reference	SFA Filing Instructions Reference
13.	For plans eligible for SFA under § 4262.3(a)(1) or § 4262.3(a)(3), does the application identify which assumptions (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 changes, does the application include detailed explanations and supporting rationale and information as to why using the identified assumptions is no longer reasonable and why the changed assumptions 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				Financial Assistance Application		§ 4262.5 § 4262.8(b)(1)	Section D, Item 6.a.
14a.	Does the application identify which assumptions (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 (except for the interest rate, which is determined as required by § 4262.4(3)(1))? If there are any assumption changes, does the application include detailed explanations and supporting rationale and information as to why using the identified original assumptions is no longer reasonable and why the changed assumptions 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 guidance on Special Financial Assistance Assumptions?	Yes No	Yes	GCU 2-C Retirement Benefit Plan SEC D Plan Stmt REV.pdf	2		Financial Assistance Application		§ 4262.5 § 4262.8(b)(1)	Section D, Item 6.b.
14b.	If a plan-specific mortality table is used for Checklist Item #14a, 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?	Yes No N/A	N/A				Financial Assistance Application		§ 4262.5 § 4262.8(b)(1)	Section D, Item 6.b.
15a.	Does the application include a certification from the plan sponsor with respect to the accuracy of the amount of the fair market value of assets as of the SFA measurement date? Does the certification reference and include information that substantiates the asset value and any projection of the assets to the SFA measurement date?	Yes No	Yes	GCU 2-C Retirement Benefit Plan SEC E certs REV.pdf	3		Financial Assistance Application		§ 4262.8(a)(4)(ii)	Section E, Item 5
15b.	Does the certification in Checklist Item #15a reference and include information that substantiates the asset value and any projection of the assets to the SFA measurement date?	Yes No	Yes	GCU 2-C Retirement Benefit Plan SEC E certs REV.pdf	3		Financial Assistance Application		§ 4262.8(a)(4)(ii)	Section E, Item 5
16a.	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	GCU 2-C Retirement Benefit Plan SEC D Plan Stmt REV.pdf	2	Benefits suspended as a result of application of statutory guarantee level will be made-up in the form of lump-sum payments.	Financial Assistance Application		§ 4262.7(d) § 4262.15	Section D, Item 7 Section C, Item 4(c)(iii)
16b.	If Yes was entered for Checklist Item #16a, 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 #16a.	Yes No N/A	Yes	GCU 2-C Retirement Benefit Plan SEC D Plan Stmt REV.pdf	2	Benefits suspended as a result of application of statutory guarantee level will be made-up in the form of lump-sum payments.	Financial Assistance Application		§ 4262.7(d) § 4262.15	Section D, Item 7 Section C, Item 4(c)(iii)

Application to PBGC for Special Financial Assistance (SFA)

v20210708p

APPLICATION CHECKLIST

Plan name:	Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Amount Requested:	\$41,171,818.00
Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #47.	

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

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

Checklist Item #		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	Upload as Document Type	Requested File Naming (if applicable)	SFA Regulation Reference	SFA Filing Instructions Reference
16c.	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 #16a and #16b.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.7(d) § 4262.15	Section D, Item 7 Section C, Item 4(c)(iii)
17.	If the SFA measurement date is later than the end of the plan year for the most recent plan financial statements, does the application include a reconciliation of the fair market value of assets from the date of the most recent plan financial statements to the SFA measurement date, showing beginning and ending fair market value of assets, contributions, withdrawal liability payments, benefits paid, administrative expenses, and investment income? Enter N/A if the SFA measurement date is not later than the end of the plan year for the most recent plan financial statements.	Yes No N/A	Yes	PBGC Applic for SFA reconciliation GCU 2-C RBP.xlsx		Previously provided.	Financial Assistance Application		§ 4262.8(a)(4)(ii)	Section D, Item 8
18.	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			Filed with PBGC on 10/19/2018	Pension plan documents, all versions available, and all amendments signed and dated		§ 4262.7(e)(1)	Section B, Item 1(a)
19.	Does the application include a copy of the executed plan amendment required by section 4262.6(e)(1) of PBGC's special financial assistance regulation?	Yes No	Yes	GCU 2-C Retirement Benefit Plan SEC B Plan Documents REV.pdf	1		Pension plan documents, all versions available, and all amendments signed and dated		§ 4262.7(e)(1) § 4262.6(e)(1)	Section B, Item 1(c)
20.	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	GCU 2C Trust March 3 1976 (pages 1-19).pdf, GCU 2C Trust March 3 1976 (pages 20-end)		Previously provided 11/7/2014 and 12/7/2021	Pension plan documents, all versions available, and all amendments signed and dated		§ 4262.7(e)(3)	Section B, Item 1(b)
21.	In the case of a plan that suspended benefits under section 305(e)(9) or section 4245 of ERISA, does the application include a copy of the proposed plan amendment required by § 4262.6(e)(2) and a certification from the plan sponsor that it will be timely executed? Enter N/A if there was no suspension of benefits.	Yes No N/A	Yes	GCU 2-C Retirement Benefit Plan SEC B Plan Documents REV.pdf	5		Pension plan documents, all versions available, and all amendments signed and dated		§ 4262.7(e)(2) § 4262.6(e)(2)	Section B, Item 1(d)
22.	In the case of a plan that was partitioned under section 4233 of ERISA, does the application include a statement that the plan was partitioned under section 4233 of ERISA and a copy of the amendment required by § 4262.9(c)(2)? Enter N/A if the plan was not partitioned.	Yes No N/A	N/A				Pension plan documents, all versions available, and all amendments signed and dated		§ 4262.7(e)(1) § 4262.9(b)(2)	Section B, Item 1(e)
23.	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	GCU 2-C Retirement Benefit Plan Determination Letter.pdf		Previously provided.	Pension plan documents, all versions available, and all amendments signed and dated		§ 4262.7(e)(3)	Section B, Item 1(f)
24.	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	Yes	2018AVR GCU 2-C Retirement Benefit Plan.pdf, 2019AVR GCU 2-C Retirement Benefit Plan.PDF		Two (2) AVA reports are provided. Previously provided.	Most recent actuarial valuation for the plan	YYYYAVR Pension Plan Name, where "YYYY" is plan year and "Pension Plan Name" is abbreviated version of the plan name	§ 4262.7(e)(5)	Section B, Item 2
25a.	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 N/A	Yes	GCU 2-C Retirement Benefit Plan Rehabilitation.pdf		Previously provided.	Rehabilitation plan (or funding improvement plan, if applicable)		§ 4262.7(e)(6)	Section B, Item 3
25b.	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 a supplemental document with these details?	Yes No N/A	N/A				Rehabilitation plan (or funding improvement plan, if applicable)		§ 4262.7(e)(6)	Section B, Item 3

Application to PBGC for Special Financial Assistance (SFA)

v20210708p

APPLICATION CHECKLIST

Plan name:	Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Amount Requested:	\$41,171,818.00
Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #47.	

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

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

Checklist Item #		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	Upload as Document Type	Requested File Naming (if applicable)	SFA Regulation Reference	SFA Filing Instructions Reference
26.	Does the application include the plan's most recent Form 5500 (Annual Return/Report of Employee Benefit Plan) and all schedules and attachments (including the audited financial statement)?	Yes No	Yes	2018Form5500 GCU 2-C Retirement Benefit Plan.pdf, 2019Form5500 GCU 2-C Retirement Benefit Plan.pdf		Two (2) Form 5500 filings. Previously provided.	Latest annual return/report of employee benefit plan (Form 5500)	YYYYForm5500 Pension Plan Name , where "YYYY" is the plan year and "Pension Plan Name" is abbreviated version of the plan name.	§ 4262.7(e)(7)	Section B, Item 4
27a.	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 application filing date? Enter N/A if the plan does not have to provide certifications for any requested plan year.	Yes No N/A	Yes	2018Zone20180329 GCU 2-C Retirement Benefit Plan.pdf, 2019Zone20180330 GCU 2-C Retirement Benefit Plan.pdf, 2020Zone20180330 GCU 2-C Retirement Benefit Plan.pdf, 2021Zone20180331 GCU 2-C Retirement Benefit Plan.pdf		Four (4) zone certifications are provided. Previously provided.	Zone certification	YYYYZoneYYYYMMDD Pension Plan Name, where the first "YYYY" is the applicable plan year, and "YYYYMMDD" is the date the certification was prepared. "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.7(e)(8)	Section B, Item 5
27b.	Does the application include documentation for all certifications that clearly identifies all assumptions used including the interest rate used for funding standard account purposes? Enter N/A if the plan entered N/A for Checklist Item #27a.	Yes No N/A	Yes				Zone certification		§ 4262.7(e)(8)	Section B, Item 5
27c.	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? Enter N/A if the plan entered N/A for Checklist Item #27a or if the application does not include a certification of critical and declining status.	Yes No N/A	Yes			Insolvent January 1, 2015	Zone certification		§ 4262.7(e)(8)	Section B, Item 5
28.	Does the application include the most recent account statements for all 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	N/A			Recently filed with PBGC in 9/21	Bank/Asset statements for all cash and investment accounts		§ 4262.7(e)(9)	Section B, Item 6
29.	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	N/A				Plan's most recent financial statement (audited, or unaudited if audited not available)		§ 4262.7(e)(10)	Section B, Item 7
30.	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?	Yes No N/A	Yes			Article XI of Graphic Communications Union Local 2-C Retirement Benefit Plan (Filed with PBGC on 10/19/2018)	Pension plan documents, all versions available, and all amendments signed and dated		§ 4262.7(e)(12)	Section B, Item 8
31.	Does the application include information required to enable the plan to receive electronic transfer of funds, if the SFA application is approved? See SFA Instructions, Section B, Item 9.	Yes No N/A	Yes	GCU 2-C Retirement Benefit Plan SEC B Plan Documents REV.pdf	6		Other		§ 4262.7(e)(11)	Section B, Item 9
32.	Does the application include the plan's projection of expected benefit payments as reported 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 before the application submission date? 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.	Yes No N/A	Yes	Template 1 GCU 2-C Retirement Benefit Plan.xlsx		Previously provided.	Financial assistance spreadsheet (template)	Template 1 Pension Plan Name , where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.8(a)(1)	Section C, Item 1

Application to PBGC for Special Financial Assistance (SFA)

v20210708p

APPLICATION CHECKLIST

Plan name:	Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Amount Requested:	\$41,171,818.00
Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #47.	

-----Filers provide responses here for each Checklist Item:-----
 Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	Upload as Document Type	Requested File Naming (if applicable)	SFA Regulation Reference	SFA Filing Instructions Reference
33.	If the plan was required to enter 10,000 or more participants on line 6f of the most recently filed Form 5500, 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 (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.	Yes No N/A	N/A				Contributing employers	Template 2 Pension Plan Name , where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.8(a)(2)	Section C, Item 2
34.	Does the application include for each of the most recent 10 plan years immediately preceding the application filing date, the history of 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? Does the history separately show for each of the most recent 10 plan years immediately preceding the application filing date 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.	Yes No	Yes	Template 3 GCU 2-C Retirement Benefit Plan.xlsx		Previously provided.	Historical Plan Financial Information (CBUs, contribution rates, contribution amounts, withdrawal liability payments)	Template 3 Pension Plan Name , where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.8(a)(3)	Section C, Item 3
35.	Does the application include a separate deterministic projection ("Baseline") in the same format as Checklist Item #10 that shows the amount of SFA that would be determined if the assumptions 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 interest rate which should be the same as used for determining the SFA amount and excluding the CBU assumption and administrative expenses assumption which should reflect the changed assumptions consistent with 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)? Enter N/A if this item is not required because all assumptions used (except the interest rate, CBU assumption and administrative expenses assumption) to determine the requested SFA amount are identical to those used in the pre-2021 certification of plan status and if the changed assumptions for CBUs and administrative expenses are consistent with 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. https://www.pbgc.gov/sites/default/files/sfa/SFA-Assumptions-Guidance.pdf See Template 5.	Yes No N/A	Yes	Template 5 GCU 2-C Retirement Benefit Plan REV.xlsx			Financial assistance spreadsheet (template)	Template 5 Pension Plan Name , where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.8(b)(2)	Section C, Item 5
36.	Does the application include a reconciliation of the change in the total amount of requested SFA due to each change in assumption from the Baseline to the requested SFA amount? Does the application include a deterministic projection and other information for each assumption change, in the same format as for Checklist Item #10? Enter N/A if this item is not required because all assumptions used (except the interest rate, CBU assumption and administrative expenses assumption) to determine the requested SFA amount are identical to those used in the pre-2021 certification of plan status and if the changed assumptions for CBUs and administrative expenses are consistent with 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, or if the requested SFA amount in Checklist Item #10 is the same as the amount shown in the Baseline details of Checklist Item #32. See Template 6.	Yes No N/A	N/A				Financial assistance spreadsheet (template)	Template 6 Pension Plan Name , where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.8(b)(3)	Section C, Item 6

Application to PBGC for Special Financial Assistance (SFA)

v20210708p

APPLICATION CHECKLIST

Plan name:	Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Amount Requested:	\$41,171,818.00
Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #47.	

-----Filers provide responses here for each Checklist Item:-----
 Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	Upload as Document Type	Requested File Naming (if applicable)	SFA Regulation Reference	SFA Filing Instructions Reference
37a.	For plans eligible for SFA under § 4262.3(a)(1) or § 4262.3(a)(3), does the application include a table identifying which assumptions used in determining the plan's eligibility for SFA differ from those used in the pre-2021 certification of plan status? 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.	Yes No N/A	N/A				Financial assistance spreadsheet (template)	Template 7 Pension Plan Name, where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.8(b)(1)	Section C, Item 7(a)
37b.	Does Checklist Item #37a include brief explanations as to why using those assumptions is no longer reasonable and why the changed assumptions are reasonable? This should be an abbreviated version of information provided in Checklist Item #13. Enter N/A if the plan entered N/A for Checklist Item #37a. See Template 7.	Yes No N/A	N/A				Financial assistance spreadsheet (template)	Template 7 Pension Plan Name, where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.8(b)(1)	Section C, Item 7(a)
38.	Does the application include a table identifying which assumptions differ from those used in the pre-2021 certification of plan status (except the interest rate used to determine SFA)? Does this item include brief explanations as to why using those original assumptions is no longer reasonable and why the changed assumptions 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 guidance on Special Financial Assistance Assumptions? This should be an abbreviated version of information provided in Checklist Items #14a-b. See Template 7.	Yes No N/A	Yes	Template 7 GCU 2-C Retirement Benefit Plan REV.xlsx			Financial assistance spreadsheet (template)	Template 7 Pension Plan Name, where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.8(b)(1)	Section C, Item 7(b)
39a.	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 GCU 2-C Retirement Benefit Plan.xlsx		Previously provided.	Financial assistance spreadsheet (template)	Template 8 Pension Plan Name, where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.8(a)(5)	Section C, Item 8
39b.	Does the application separately show the amounts of projected withdrawal liability payments for employers that are currently withdrawn at the application filing date, 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	Template 8 GCU 2-C Retirement Benefit Plan.xlsx		Previously provided.	Financial assistance spreadsheet (template)	Template 8 Pension Plan Name, where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.8(a)(5)	Section C, Item 8
39c.	Does the application also provide the projected number of active participants at the beginning of each plan year? See Template 8.	Yes No	Yes	Template 8 GCU 2-C Retirement Benefit Plan.xlsx		Previously provided.	Financial assistance spreadsheet (template)	Template 8 Pension Plan Name, where "Pension Plan Name" is an abbreviated version of the plan name.	§ 4262.8(a)(5)	Section C, Item 8
Supplemental 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)										
40a.	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? Enter N/A if the plan has not experienced an event or merger.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section D
40b.	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? Enter N/A if the plan has not experienced a transfer or merger event.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section D

Application to PBGC for Special Financial Assistance (SFA)

v20210708p

APPLICATION CHECKLIST

Plan name:	Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Amount Requested:	\$41,171,818.00
Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #47.	

-----Filers provide responses here for each Checklist Item:-----
 Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	Upload as Document Type	Requested File Naming (if applicable)	SFA Regulation Reference	SFA Filing Instructions Reference
41a.	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 provided in Checklist Item #1 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? Enter N/A if the plan has not experienced any event.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section D
41b.	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 plan entered N/A for Checklist Item #41a. Enter N/A if the event described in Checklist Item #41a was not a merger.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section D
42a.	Does the application include a supplemental version of Checklist Item #6 that shows the determination of SFA eligibility as if any events had not occurred? Enter N/A if the plan has not experienced any event.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section D
42b.	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 plan entered N/A for Checklist Item #42a. Enter N/A if the event described in Checklist Item #42a was not a merger.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section D
43a.	Does the application include a supplemental certification from the plan's enrolled actuary with respect to the plan's SFA eligibility (see Checklist Item #7), but with eligibility determined as if any events had not occurred? Enter N/A if the plan has not experienced any event.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section E
43b.	For any merger, does the application include supplemental 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)? Enter N/A if the plan entered N/A for Checklist Item #43a. Also enter N/A if the event described in Checklist Item #43a was not a merger.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section E
44a.	Does the application include a supplemental version of Checklist Item #10 that shows the determination of the SFA amount as if any events had not occurred? See Template 4. Enter N/A if the plan has not experienced any events.	Yes No N/A	N/A				Projections for special financial assistance (estimated income, benefit payments and expenses)	For supplemental submission due to any event: <i>Template 4 Pension Plan Name Supp</i> where "Pension Plan Name" is an abbreviated version of the plan name. For a supplemental submission due to a merger, <i>Template 4 Pension Plan Name Merged</i> , where "Pension Plan Name Merged" is an abbreviated version of the plan name for the separate plan involved in the merger.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section C

Application to PBGC for Special Financial Assistance (SFA)

v20210708p

APPLICATION CHECKLIST

Plan name:	Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Amount Requested:	\$41,171,818.00
Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #47.	

-----Filers provide responses here for each Checklist Item:-----
 Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	Upload as Document Type	Requested File Naming (if applicable)	SFA Regulation Reference	SFA Filing Instructions Reference
44b.	For any merger, does the application show the SFA determination for this plan and for each plan merged into this plan (each of these determined as if they were still separate plans)? See Template 4. Enter N/A if the plan entered N/A for Checklist Item #44a. Also enter N/A if the event described in Checklist Item #44a was not a merger.	Yes No N/A	N/A				Projections for special financial assistance (estimated income, benefit payments and expenses)	For a supplemental submission due to a merger, <i>Template 4 Pension Plan Name Merged</i> , where "Pension Plan Name Merged" is an abbreviated version of the plan name for the separate plan involved in the merger.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section C
45a.	Does the application include a supplemental certification from the plan's enrolled actuary with respect to the plan's SFA amount (see Checklist Item #11), but with the SFA amount determined as if any events had not occurred? Enter N/A if the plan has not experienced any events.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section E
45b.	Does this certification clearly identify all assumptions and methods used, sources of participant data and census data, and other relevant information? Enter N/A if the plan entered N/A for Checklist Item #45a.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section E
45c.	For any merger, does the application include supplemental 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 plan entered N/A for Checklist Item #45a. Also enter N/A if the event described in Checklist Item #45a was not a merger.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section E
45d.	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 plan entered N/A for Checklist Item #45a. Enter N/A if the event described in Checklist Item #45a was not a merger.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section E
46a.	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				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section D
46b.	Does this demonstration 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 #46a.	Yes No N/A	N/A				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section D

Application to PBGC for Special Financial Assistance (SFA)

v20210708p

APPLICATION CHECKLIST

Plan name:	Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Amount Requested:	\$41,171,818.00
Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #47.	

-----Filers provide responses here for each Checklist Item:-----
 Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	Upload as Document Type	Requested File Naming (if applicable)	SFA Regulation Reference	SFA Filing Instructions Reference
47a.	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		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section E
47b.	Does this demonstration 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				Financial Assistance Application		§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section E

Supplemental 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 #48 through #60. If you are required to complete Checklist Items #48 through #60, your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #48 through #60. All other plans should not provide any responses for Checklist Items #48 through #60.

48.	In addition to the information provided with Checklist Item #18, 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	Use same naming convention as for Checklist Item #18 but with abbreviated plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section B
49.	In addition to the information provided with Checklist Item #20, 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	Use same naming convention as for Checklist Item #20 but with abbreviated plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section B
50.	In addition to the information provided with Checklist Item #23, 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					Pension plan documents, all versions available, and all amendments signed and dated	Use same naming convention as for Checklist Item #23 but with abbreviated plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section B
51.	In addition to the information provided with Checklist Item #24, 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 Pension Plan Name Merged, where "YYYY" is plan year and "Pension Plan Name Merged" is abbreviated version of the plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section B
52.	In addition to the information provided with Checklist Item #25, 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)	Use same naming convention as for Checklist Item #25 but with abbreviated plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section B

Application to PBGC for Special Financial Assistance (SFA)

v20210708p

APPLICATION CHECKLIST

Plan name:	Graphic Communications Union Local 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Amount Requested:	\$41,171,818.00
Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #47.	

-----Filers provide responses here for each Checklist Item:-----
 Explain all N/A responses. Provide comments where noted. Also add any other optional explanatory comments.

Checklist Item #		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	Upload as Document Type	Requested File Naming (if applicable)	SFA Regulation Reference	SFA Filing Instructions Reference
53.	In addition to the information provided with Checklist Item #26, 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 Pension Plan Name Merged, where "YYYY" is the plan year and "Pension Plan Name Merged" is abbreviated version of the plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section B
54.	In addition to the information provided with Checklist Item #27, 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 Pension Plan Name Merged, where the first "YYYY" is the applicable plan year, and "YYYYMMDD" is the date the certification was prepared. "Pension Plan Name Merged" is an abbreviated version of the plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section B
55.	In addition to the information provided with Checklist Item #28, 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	Use same naming convention as for Checklist Item #28 but with abbreviated plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section B
56.	In addition to the information provided with Checklist Item #29, 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)	Use same naming convention as for Checklist Item #29 but with abbreviated plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section B
57.	In addition to the information provided with Checklist Item #30, 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)?	Yes No N/A					Pension plan documents, all versions available, and all amendments signed and dated	Use same naming convention as for Checklist Item #30 but with abbreviated plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section B
58.	In addition to the information provided with Checklist Item #32, does the application include the same information in the format of Template 1 for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)? Enter N/A if each plan that fully merged into this plan is not required to respond Yes to line 8b(1) on the most recently filed Form 5500 Schedule MB.	Yes No N/A					Financial assistance spreadsheet (template)	Template 1 Pension Plan Name Merged, where "Pension Plan Name Merged" is an abbreviated version of the plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section C
59.	In addition to the information provided with Checklist Item #33, does the application include the same information in the format of Template 2 (if required based on the participant threshold) for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)(ii)? Enter N/A if each plan that merged into this plan has less than 10,000 participants on line 6f of the most recently filed Form 5500.	Yes No N/A					Contributing employers	Template 2 Pension Plan Name Merged, where "Pension Plan Name Merged" is an abbreviated version of the plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section C
60.	In addition to the information provided with Checklist Item #34, does the application include similar information in the format of Template 3 for each plan that merged into this plan due to a merger described in § 4262.4(f)(1)?	Yes No					Historical Plan Financial Information (CBUs, contribution rates, contribution amounts, withdrawal liability payments)	Template 3 Pension Plan Name Merged, where "Pension Plan Name Merged" is an abbreviated version of the plan name for the plan merged into this plan.	§ 4262.4(f) § 4262.8(c)	Addendum A for Certain Events, Section C

TEMPLATE 4
SFA Determination

v20210706p

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

For supplemental submission due to a merger under § 4262.4(f)(1)(ii): *Template 4 Pension Plan Name Merged* , where "Pension Plan Name Merged" is an abbreviated version of the plan name for the separate plan involved in the merger.

For supplemental submission due to certain events with limitations under § 4262.4(f)(1)(i): *Template 4 Pension Plan Name Supp* , where "Pension 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:

Provide information used to determine the amount of requested SFA for the plan based on a deterministic projection and using the actuarial assumptions as described in § 4262.4 of PBGC's special financial assistance regulation. The information to be provided is:

NOTE: All items below are provided on sheet '4-3 SFA Details' unless otherwise noted.

- a. Interest rate used (the "SFA interest rate"), including supporting details on how it was determined. If such interest rate is the limit described in section 4262(e)(3) of ERISA, identify the month selected by the plan to determine the third segment rate used to calculate the limit. [*Sheet: 4-1 SFA Interest Rate*]
- b. Fair market value of assets on the last day of the calendar quarter immediately preceding the date the application is filed (the "SFA measurement date").
- c. 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, 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. Separately identify benefit payments described in § 4262.4(b)(1) of PBGC's special assistance regulation (excluding the payments in (c)(iii) below) for current retirees and beneficiaries, terminated vested participants not currently receiving benefits, currently active participants and new entrants. [*Sheet: 4-2 SFA Ben Pmts*]
 - iii. Separately identify payments described in § 4262.4(b)(1) of PBGC's special financial assistance regulation 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(c)(iii) of the SFA instructions.]
 - iv. Separately identify administrative expenses expected to be paid using plan assets, excluding the amount owed PBGC under section 4261 of ERISA.
- d. For each plan year in the SFA coverage period, the projected investment income based on the interest rate in (a) above, and the projected fair market value of plan assets at the end of each plan year.
- e. The present value (using the interest rate identified in (a) above) as of the SFA measurement date of each of the separately provided items in (c)(i)-(iv) above.
- f. SFA amount determined as a lump sum as of the SFA measurement date. As described in § 4262.4(a) of PBGC's special financial assistance regulation, this amount equals the excess (if any) of the SFA-eligible plan obligations (the present value of the items in (c)(ii) through (c)(iv)) over the SFA-eligible plan resources (item (b) plus the present value of the items in (c)(i)).

Additional instructions for each individual worksheet:

Sheet

4-1 SFA Determination - SFA Interest Rate

See instructions on 4-1 SFA Interest Rate.

4-2 SFA Determination - SFA Benefit Payments

On this sheet, you will provide:

- Basic plan information (plan name, EIN/PN, SFA measurement date, SFA interest rate),
- Year-by-year deterministic projection of benefit payments, and
- Present values as of the SFA measurement date, using the SFA interest rate.

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"), separately identify benefit payments described in § 4262.4(b)(1) of PBGC's special assistance regulation for current retirees and beneficiaries, terminated vested participants not currently receiving benefits, currently active participants and new entrants. On this Sheet 4-2, show all benefit payments as positive amounts.

If the plan has suspended benefit payments under sections 305(e)(9) or 4245 of ERISA, the benefit payments in this Sheet 4-2 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 4-2 should reflect fully restored prospective benefits.

Benefit payments to be paid to participants to restore previously suspended benefits should not be included on this Sheet 4-2, and are separately shown on Sheet 4-3 in the Column (7). All reinstatement of benefits should be shown assuming such reinstatements are paid beginning as of the SFA measurement date (or on the SFA measurement date, for lump sum reinstatement of prior suspended benefits).

Provide the present value as of the SFA measurement date of each separate set of benefit payments, using the limited SFA interest rate from Sheet 4-1. On this sheet, show the present values as positive amounts.

Except for the first row in the projection exhibit below, each row must include the full plan year of the indicated information up to the plan year ending in 2051. This first row may be less than a full plan year of information. 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.

4-3 SFA Determination - SFA Details

On this sheet, you will provide:

--Basic plan information (plan name, EIN/PN, SFA measurement date, SFA interest rate),

--Year-by-year deterministic projection, and

--Present values as of the SFA measurement date, using the SFA interest rate.

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 (10). 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 of ERISA, Column (7) should show the benefit payments to be made to restore the past benefits that have been suspended. These amounts should be determined as if such reinstatements 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 decides to make payments 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 reinstatement is 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 (6); Column (7) is only for reinstatement of past benefits that were suspended.

Provide the present values as of the SFA measurement date of each of the projections in Columns (3) through (8), using the limited SFA interest rate from Sheet 4-1. Show the present values as the same sign (positive or negative) as the projected amounts (e.g., benefit payments are negative on this Sheet 4-3, and the present value of benefit payments should also be negative).

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. This first row may be less than a full plan year of information. 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.

TEMPLATE 4 - Sheet 4-1
SFA Determination - Interest Rate

v20210706p

Provide the SFA interest rate used, including supporting details on how it was determined.

PLAN INFORMATION

Abbreviated Plan Name:	GCU 2-C Retirement Benefit Plan	
EIN:	38-6047082	
PN:	001	
Application Submission Date:	12/21/2021	
SFA measurement date:	06/30/2021	
Last day of first plan year ending after the measurement date:	12/31/2021	

Last day of the calendar quarter immediately preceding the application submission date.

SFA Interest Rate Used	3.10%
------------------------	-------

Input amount used in determination of SFA.

Development of interest rate limit:

Plan Interest Rate:	3.10%
Month used for interest rate (<i>month in which application is filed or the 3 preceding months</i>):	June
3rd Segment Rate as of applicable date (<i>Section 303(h)(2)(C)(iii) - disregarding modifications made under clause (iv) of such section</i>):	3.32%
Interest Rate Limit (<i>3rd Segment rate plus 200 basis points</i>):	5.32%

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

Month is selected by the plan sponsor.

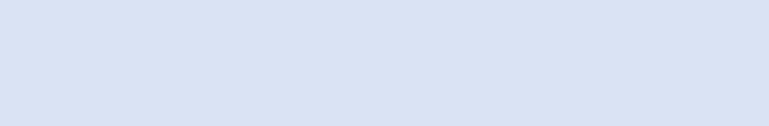
<https://www.irs.gov/retirement-plans/minimum-present-value-segment-rates>

This amount is calculated based on the other information entered.

SFA Interest Rate Calculation (<i>Lesser of Plan Interest Rate and Interest Rate Limit</i>):	3.10%
SFA Interest Rate Match Check:	Match

This amount is calculated based on the other information entered.

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



TEMPLATE 4 - Sheet 4-2

v20210706p

SFA Determination - Benefit Payments

See Supplemental Instructions for Sheet 4-2 on Template 4 Instructions.

PLAN INFORMATION

Abbreviated Plan Name:	GCU 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Measurement Date:	06/30/2021
SFA Interest Rate:	3.10%

On this Sheet 4-2, show all benefit payment amounts and present values as positive amounts.

PRESENT VALUE as of the Measurement Date of Projected Benefit Payments for:

Current Retirees and Beneficiaries in Pay Status	Current Terminated Vested Participants	Current Active Participants	New Entrants	Total
\$26,257,432	\$7,831,328	\$23,729	\$0	\$34,112,489

PROJECTED BENEFIT PAYMENTS for:

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
06/30/2021	12/31/2021	\$1,224,684	\$69,088	\$10	\$0	\$1,293,782
01/01/2022	12/31/2022	\$2,375,387	\$136,521	\$24	\$0	\$2,511,932
01/01/2023	12/31/2023	\$2,296,111	\$170,442	\$29	\$0	\$2,466,582
01/01/2024	12/31/2024	\$2,212,113	\$197,367	\$35	\$0	\$2,409,515
01/01/2025	12/31/2025	\$2,123,965	\$266,556	\$42	\$0	\$2,390,563
01/01/2026	12/31/2026	\$2,032,223	\$309,929	\$27,527	\$0	\$2,369,679
01/01/2027	12/31/2027	\$1,964,845	\$341,969	\$0	\$0	\$2,306,814
01/01/2028	12/31/2028	\$1,867,382	\$391,657	\$0	\$0	\$2,259,039
01/01/2029	12/31/2029	\$1,767,861	\$435,198	\$0	\$0	\$2,203,059
01/01/2030	12/31/2030	\$1,666,791	\$495,887	\$0	\$0	\$2,162,678
01/01/2031	12/31/2031	\$1,564,713	\$483,382	\$0	\$0	\$2,048,095
01/01/2032	12/31/2032	\$1,462,212	\$513,826	\$0	\$0	\$1,976,038
01/01/2033	12/31/2033	\$1,359,906	\$531,975	\$0	\$0	\$1,891,881
01/01/2034	12/31/2034	\$1,258,441	\$545,623	\$0	\$0	\$1,804,064
01/01/2035	12/31/2035	\$1,158,442	\$571,041	\$0	\$0	\$1,729,483
01/01/2036	12/31/2036	\$1,060,516	\$567,135	\$0	\$0	\$1,627,651
01/01/2037	12/31/2037	\$965,267	\$549,355	\$0	\$0	\$1,514,622
01/01/2038	12/31/2038	\$873,292	\$531,029	\$0	\$0	\$1,404,321
01/01/2039	12/31/2039	\$785,159	\$531,482	\$0	\$0	\$1,316,641
01/01/2040	12/31/2040	\$701,389	\$511,688	\$0	\$0	\$1,213,077
01/01/2041	12/31/2041	\$622,433	\$491,302	\$0	\$0	\$1,113,735
01/01/2042	12/31/2042	\$548,640	\$477,567	\$0	\$0	\$1,026,207
01/01/2043	12/31/2043	\$480,272	\$455,874	\$0	\$0	\$936,146
01/01/2044	12/31/2044	\$417,494	\$433,619	\$0	\$0	\$851,113
01/01/2045	12/31/2045	\$360,353	\$418,802	\$0	\$0	\$779,155
01/01/2046	12/31/2046	\$308,800	\$395,384	\$0	\$0	\$704,184
01/01/2047	12/31/2047	\$262,695	\$371,537	\$0	\$0	\$634,232
01/01/2048	12/31/2048	\$221,815	\$353,273	\$0	\$0	\$575,088
01/01/2049	12/31/2049	\$185,869	\$328,732	\$0	\$0	\$514,601
01/01/2050	12/31/2050	\$154,523	\$304,091	\$0	\$0	\$458,614
01/01/2051	12/31/2051	\$116,793	\$256,228	\$0	\$0	\$373,021

TEMPLATE 4 - Sheet 4-3

v20210706p

SFA Determination - Details

See Supplemental Instructions for Sheet 4-3 on Template 4 Instructions.

PLAN INFORMATION

Abbreviated Plan Name:	GCU 2-C Retirement Benefit Plan	
EIN:	38-6047082	
PN:	001	
SFA Measurement Date:	06/30/2021	
SFA Interest Rate:	3.10%	

PRESENT VALUE as of the SFA Measurement Date of Projected Amounts for:									
(1)	(2)	PV of (3)	PV of (4)	PV of (5)	PV of (6)	PV of (7)	PV of (8)		
Fair Market Value as of the SFA Measurement Date	SFA Amount as of the SFA Measurement Date	Contributions	Withdrawal Liability Payments	Other Payments to Plan (excluding financial assistance and SFA)	Benefit Payments (should match total from Sheet 4-2)	Benefit Payments Attributable to Reinstatement of Benefits Suspended through the SFA Measurement Date	Administrative Expenses (excluding amount owed PBGC under 4261 of ERISA)	(1)+(2)+Sum of PV of (3) through PV of (8) [NOTE: This amount should be \$0]	
\$462,197	\$41,171,818	\$14,998	\$0	\$23,815	(\$34,112,489)	(\$3,810,683)	(\$3,749,656)	(\$0)	

Show payments INTO the plan as positive, and payments OUT of the plan as negative, so that the sum of (1) through (9) equals (10).

Plan Year Start Date	Plan Year End Date	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
		Fair Market Value of Assets at Beginning of Plan Year	SFA Amount as of the SFA Measurement Date	Contributions	Withdrawal Liability Payments	Other Payments to Plan (excluding financial assistance and SFA)	Benefit Payments (should match total from Sheet 4-2)	Benefit Payments Attributable to Reinstatement of Benefits Suspended through the SFA Measurement Date	Administrative Expenses (excluding amount owed PBGC under 4261 of ERISA)	Investment Income Based on SFA Interest Rate	Fair Market Value of Assets at End of Plan Year
06/30/2021	12/31/2021	\$462,197	\$41,171,818	\$1,797	\$0	\$600	-\$1,293,782	-\$3,810,683	-\$97,959	\$572,800	\$37,006,788
01/01/2022	12/31/2022	\$37,006,788		\$3,582	\$0	\$1,200	-\$2,511,932	\$0	-\$184,079	\$1,109,057	\$35,424,616
01/01/2023	12/31/2023	\$35,424,616		\$3,570	\$0	\$1,200	-\$2,466,582	\$0	-\$189,061	\$1,060,572	\$33,834,315
01/01/2024	12/31/2024	\$33,834,315		\$3,557	\$0	\$1,200	-\$2,409,515	\$0	-\$194,092	\$1,011,999	\$32,247,464
01/01/2025	12/31/2025	\$32,247,464		\$3,543	\$0	\$1,200	-\$2,390,563	\$0	-\$199,240	\$962,995	\$30,625,399
01/01/2026	12/31/2026	\$30,625,399		\$0	\$0	\$1,200	-\$2,369,679	\$0	-\$204,474	\$912,870	\$28,965,316
01/01/2027	12/31/2027	\$28,965,316		\$0	\$0	\$1,200	-\$2,306,814	\$0	-\$209,869	\$862,210	\$27,312,043
01/01/2028	12/31/2028	\$27,312,043		\$0	\$0	\$1,200	-\$2,259,039	\$0	-\$215,728	\$811,542	\$25,650,017
01/01/2029	12/31/2029	\$25,650,017		\$0	\$0	\$1,200	-\$2,203,059	\$0	-\$221,330	\$760,721	\$23,987,550
01/01/2030	12/31/2030	\$23,987,550		\$0	\$0	\$1,200	-\$2,162,678	\$0	-\$227,073	\$709,666	\$22,308,664
01/01/2031	12/31/2031	\$22,308,664		\$0	\$0	\$1,200	-\$2,048,095	\$0	-\$236,378	\$659,092	\$20,684,483
01/01/2032	12/31/2032	\$20,684,483		\$0	\$0	\$1,200	-\$1,976,038	\$0	-\$242,542	\$609,663	\$19,076,766
01/01/2033	12/31/2033	\$19,076,766		\$0	\$0	\$1,200	-\$1,891,881	\$0	-\$248,516	\$560,917	\$17,498,486
01/01/2034	12/31/2034	\$17,498,486		\$0	\$0	\$1,200	-\$1,804,064	\$0	-\$254,996	\$513,128	\$15,953,754
01/01/2035	12/31/2035	\$15,953,754		\$0	\$0	\$1,200	-\$1,729,483	\$0	-\$259,422	\$466,225	\$14,432,274
01/01/2036	12/31/2036	\$14,432,274		\$0	\$0	\$1,200	-\$1,627,651	\$0	-\$244,148	\$420,728	\$12,982,403
01/01/2037	12/31/2037	\$12,982,403		\$0	\$0	\$1,200	-\$1,514,622	\$0	-\$227,193	\$377,636	\$11,619,424
01/01/2038	12/31/2038	\$11,619,424		\$0	\$0	\$1,200	-\$1,404,321	\$0	-\$210,648	\$337,192	\$10,342,847
01/01/2039	12/31/2039	\$10,342,847		\$0	\$0	\$1,200	-\$1,316,641	\$0	-\$197,496	\$299,056	\$9,128,967
01/01/2040	12/31/2040	\$9,128,967		\$0	\$0	\$1,200	-\$1,213,077	\$0	-\$181,962	\$263,124	\$7,998,252
01/01/2041	12/31/2041	\$7,998,252		\$0	\$0	\$1,200	-\$1,113,735	\$0	-\$167,060	\$229,701	\$6,948,358
01/01/2042	12/31/2042	\$6,948,358		\$0	\$0	\$1,200	-\$1,026,207	\$0	-\$153,931	\$198,590	\$5,968,010
01/01/2043	12/31/2043	\$5,968,010		\$0	\$0	\$1,200	-\$936,146	\$0	-\$140,422	\$169,676	\$5,062,317
01/01/2044	12/31/2044	\$5,062,317		\$0	\$0	\$1,200	-\$851,113	\$0	-\$127,667	\$142,994	\$4,227,731
01/01/2045	12/31/2045	\$4,227,731		\$0	\$0	\$1,200	-\$779,155	\$0	-\$116,873	\$118,301	\$3,451,204
01/01/2046	12/31/2046	\$3,451,204		\$0	\$0	\$1,200	-\$704,184	\$0	-\$105,628	\$95,458	\$2,738,051
01/01/2047	12/31/2047	\$2,738,051		\$0	\$0	\$1,200	-\$634,232	\$0	-\$95,135	\$74,498	\$2,084,381
01/01/2048	12/31/2048	\$2,084,381		\$0	\$0	\$1,200	-\$575,088	\$0	-\$86,263	\$55,204	\$1,479,434
01/01/2049	12/31/2049	\$1,479,434		\$0	\$0	\$1,200	-\$514,601	\$0	-\$77,190	\$37,442	\$926,286
01/01/2050	12/31/2050	\$926,286		\$0	\$0	\$1,200	-\$458,614	\$0	-\$68,792	\$21,213	\$421,293
01/01/2051	12/31/2051	\$421,293		\$0	\$0	\$1,200	-\$373,021	\$0	-\$55,953	\$6,480	-\$1

TEMPLATE 5

v20210706p

Baseline

File name: *Template 5 Pension Plan Name*, where "Pension 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 5 is not required if all assumptions used (except the interest rate, Contribution Base Unit (CBU) assumption and administrative expenses assumption) 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") and if the changed assumptions for CBUs and administrative expenses are consistent with 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.

Provide a separate deterministic projection ("Baseline") in the same format as Template 4 (Sheets 4-2 and 4-3 only) that shows the amount of SFA that would be determined if all underlying assumptions used in the projection were the same as those used in the pre-2021 certification of plan status, excluding the plan's interest rate which should be the same as used in Template 4 (see sheet 4-1) and excluding the CBU assumption and administrative expenses assumption which should reflect the changed assumptions consistent with 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..

For purposes of this Template 5, any assumption change made in accordance with Section III, Acceptable Assumption Changes, of PBGC's guidance on Special Financial Assistance Assumptions should be reflected in this Baseline calculation of the SFA amount and supporting projection information. See examples in the SFA instructions for Section C, Item 5.

Additional instructions for each individual worksheet:

Sheet

5-1 Baseline - Benefit Payments

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

5-2 Baseline - Details

See Template 4 instructions for Sheet 4-3, except provide the projections and present value information used to determine the Baseline SFA amount.

TEMPLATE 5 - Sheet 5-1

v20210706p

Baseline - Benefit Payments

See Supplemental Instructions for Sheet 4-2 on Template 4 Instructions.

PLAN INFORMATION

Abbreviated Plan Name:	GCU 2-C Retirement Benefit Plan
EIN:	38-6047082
PN:	001
SFA Measurement Date:	06/30/2021
SFA Interest Rate:	3.10%

On this Sheet 5-1, show all benefit payment amounts and present values as positive amounts.				
PRESENT VALUE as of the Measurement Date of Projected Benefit Payments for:				
Current Retirees and Beneficiaries in Pay Status	Current Terminated Vested Participants	Current Active Participants	New Entrants	Total
\$26,257,432	\$7,831,328	\$23,729	\$0	\$34,112,489

		PROJECTED BENEFIT PAYMENTS for:				
		Current Retirees and Beneficiaries in Pay Status	Current Terminated Vested Participants	Current Active Participants	New Entrants	Total
Plan Year Start Date	Plan Year End Date					
06/30/2021	12/31/2021	\$1,224,684	\$69,088	\$10	\$0	\$1,293,782
01/01/2022	12/31/2022	\$2,375,387	\$136,521	\$24	\$0	\$2,511,932
01/01/2023	12/31/2023	\$2,296,111	\$170,442	\$29	\$0	\$2,466,582
01/01/2024	12/31/2024	\$2,212,113	\$197,367	\$35	\$0	\$2,409,515
01/01/2025	12/31/2025	\$2,123,965	\$266,556	\$42	\$0	\$2,390,563
01/01/2026	12/31/2026	\$2,032,223	\$309,929	\$27,527	\$0	\$2,369,679
01/01/2027	12/31/2027	\$1,964,845	\$341,969	\$0	\$0	\$2,306,814
01/01/2028	12/31/2028	\$1,867,382	\$391,657	\$0	\$0	\$2,259,039
01/01/2029	12/31/2029	\$1,767,861	\$435,198	\$0	\$0	\$2,203,059
01/01/2030	12/31/2030	\$1,666,791	\$495,887	\$0	\$0	\$2,162,678
01/01/2031	12/31/2031	\$1,564,713	\$483,382	\$0	\$0	\$2,048,095
01/01/2032	12/31/2032	\$1,462,212	\$513,826	\$0	\$0	\$1,976,038
01/01/2033	12/31/2033	\$1,359,906	\$531,975	\$0	\$0	\$1,891,881
01/01/2034	12/31/2034	\$1,258,441	\$545,623	\$0	\$0	\$1,804,064
01/01/2035	12/31/2035	\$1,158,442	\$571,041	\$0	\$0	\$1,729,483
01/01/2036	12/31/2036	\$1,060,516	\$567,135	\$0	\$0	\$1,627,651
01/01/2037	12/31/2037	\$965,267	\$549,355	\$0	\$0	\$1,514,622
01/01/2038	12/31/2038	\$873,292	\$531,029	\$0	\$0	\$1,404,321
01/01/2039	12/31/2039	\$785,159	\$531,482	\$0	\$0	\$1,316,641
01/01/2040	12/31/2040	\$701,389	\$511,688	\$0	\$0	\$1,213,077
01/01/2041	12/31/2041	\$622,433	\$491,302	\$0	\$0	\$1,113,735
01/01/2042	12/31/2042	\$548,640	\$477,567	\$0	\$0	\$1,026,207
01/01/2043	12/31/2043	\$480,272	\$455,874	\$0	\$0	\$936,146
01/01/2044	12/31/2044	\$417,494	\$433,619	\$0	\$0	\$851,113
01/01/2045	12/31/2045	\$360,353	\$418,802	\$0	\$0	\$779,155
01/01/2046	12/31/2046	\$308,800	\$395,384	\$0	\$0	\$704,184
01/01/2047	12/31/2047	\$262,695	\$371,537	\$0	\$0	\$634,232
01/01/2048	12/31/2048	\$221,815	\$353,273	\$0	\$0	\$575,088
01/01/2049	12/31/2049	\$185,869	\$328,732	\$0	\$0	\$514,601
01/01/2050	12/31/2050	\$154,523	\$304,091	\$0	\$0	\$458,614
01/01/2051	12/31/2051	\$116,793	\$256,228	\$0	\$0	\$373,021

Baseline - Details

See Supplemental Instructions for Sheet 4-3 on Template 4 Instructions.

PLAN INFORMATION

Abbreviated Plan Name:	GCU 2-C Retirement Benefit Plan	
EIN:	38-6047082	
PN:	001	
SFA Measurement Date:	06/30/2021	
SFA Interest Rate:	3.10%	

PRESENT VALUE as of the SFA Measurement Date of Projected Amounts for:								
(1)	(2)	PV of (3)	PV of (4)	PV of (5)	PV of (6)	PV of (7)	PV of (8)	
Fair Market Value as of the SFA Measurement Date	Baseline SFA Amount as of the SFA Measurement Date	Contributions	Withdrawal Liability Payments	Other Payments to Plan (excluding financial assistance and SFA)	Benefit Payments (should match total from Sheet 4-2)	Benefit Payments Attributable to Reinstatement of Benefits Suspended through the SFA Measurement Date	Administrative Expenses (excluding amount owed PBGC under 4261 of ERISA)	(1)+(2)+Sum of PV of (3) through PV of (8) [NOTE: This amount should be \$0]
\$462,197	\$41,171,818	\$14,998	\$0	\$23,815	(\$34,112,489)	(\$3,810,683)	(\$3,749,656)	(\$0)

Show payments INTO the plan as positive, and payments OUT of the plan as negative, so that the sum of (1) through (9) equals (10).

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)		
Plan Year Start Date	Plan Year End Date	Fair Market Value of Assets at Beginning of Plan Year	Baseline SFA Amount as of the SFA Measurement Date	Contributions	Withdrawal Liability Payments	Other Payments to Plan (excluding financial assistance and SFA)	Benefit Payments (should match total from Sheet 4-2)	Benefit Payments Attributable to Reinstatement of Benefits Suspended through the SFA Measurement Date	Administrative Expenses (excluding amount owed PBGC under 4261 of ERISA)	Investment Income Based on SFA Interest Rate	Fair Market Value of Assets at End of Plan Year
06/30/2021	12/31/2021	\$462,197	\$41,171,818	\$1,797	\$0	\$600	-\$1,293,782	-\$3,810,683	-\$97,959	\$572,800	\$37,006,788
01/01/2022	12/31/2022	\$37,006,788		\$3,582	\$0	\$1,200	-\$2,511,932	\$0	-\$184,079	\$1,109,057	\$35,424,616
01/01/2023	12/31/2023	\$35,424,616		\$3,570	\$0	\$1,200	-\$2,466,582	\$0	-\$189,061	\$1,060,572	\$33,834,315
01/01/2024	12/31/2024	\$33,834,315		\$3,557	\$0	\$1,200	-\$2,409,515	\$0	-\$194,092	\$1,011,999	\$32,247,464
01/01/2025	12/31/2025	\$32,247,464		\$3,543	\$0	\$1,200	-\$2,390,563	\$0	-\$199,240	\$962,995	\$30,625,399
01/01/2026	12/31/2026	\$30,625,399		\$0	\$0	\$1,200	-\$2,369,679	\$0	-\$204,474	\$912,870	\$28,965,316
01/01/2027	12/31/2027	\$28,965,316		\$0	\$0	\$1,200	-\$2,306,814	\$0	-\$209,869	\$862,210	\$27,312,043
01/01/2028	12/31/2028	\$27,312,043		\$0	\$0	\$1,200	-\$2,259,039	\$0	-\$215,728	\$811,542	\$25,650,017
01/01/2029	12/31/2029	\$25,650,017		\$0	\$0	\$1,200	-\$2,203,059	\$0	-\$221,330	\$760,721	\$23,987,550
01/01/2030	12/31/2030	\$23,987,550		\$0	\$0	\$1,200	-\$2,162,678	\$0	-\$227,073	\$709,666	\$22,308,664
01/01/2031	12/31/2031	\$22,308,664		\$0	\$0	\$1,200	-\$2,048,095	\$0	-\$236,378	\$659,092	\$20,684,483
01/01/2032	12/31/2032	\$20,684,483		\$0	\$0	\$1,200	-\$1,976,038	\$0	-\$242,542	\$609,663	\$19,076,766
01/01/2033	12/31/2033	\$19,076,766		\$0	\$0	\$1,200	-\$1,891,881	\$0	-\$248,516	\$560,917	\$17,498,486
01/01/2034	12/31/2034	\$17,498,486		\$0	\$0	\$1,200	-\$1,804,064	\$0	-\$254,996	\$513,128	\$15,953,754
01/01/2035	12/31/2035	\$15,953,754		\$0	\$0	\$1,200	-\$1,729,483	\$0	-\$259,422	\$466,225	\$14,432,274
01/01/2036	12/31/2036	\$14,432,274		\$0	\$0	\$1,200	-\$1,627,651	\$0	-\$244,148	\$420,728	\$12,982,403
01/01/2037	12/31/2037	\$12,982,403		\$0	\$0	\$1,200	-\$1,514,622	\$0	-\$227,193	\$377,636	\$11,619,424
01/01/2038	12/31/2038	\$11,619,424		\$0	\$0	\$1,200	-\$1,404,321	\$0	-\$210,648	\$337,192	\$10,342,847
01/01/2039	12/31/2039	\$10,342,847		\$0	\$0	\$1,200	-\$1,316,641	\$0	-\$197,496	\$299,056	\$9,128,967
01/01/2040	12/31/2040	\$9,128,967		\$0	\$0	\$1,200	-\$1,213,077	\$0	-\$181,962	\$263,124	\$7,998,252
01/01/2041	12/31/2041	\$7,998,252		\$0	\$0	\$1,200	-\$1,113,735	\$0	-\$167,060	\$229,701	\$6,948,358
01/01/2042	12/31/2042	\$6,948,358		\$0	\$0	\$1,200	-\$1,026,207	\$0	-\$153,931	\$198,590	\$5,968,010
01/01/2043	12/31/2043	\$5,968,010		\$0	\$0	\$1,200	-\$936,146	\$0	-\$140,422	\$169,676	\$5,062,317
01/01/2044	12/31/2044	\$5,062,317		\$0	\$0	\$1,200	-\$851,113	\$0	-\$127,667	\$142,994	\$4,227,731
01/01/2045	12/31/2045	\$4,227,731		\$0	\$0	\$1,200	-\$779,155	\$0	-\$116,873	\$118,301	\$3,451,204
01/01/2046	12/31/2046	\$3,451,204		\$0	\$0	\$1,200	-\$704,184	\$0	-\$105,628	\$95,458	\$2,738,051
01/01/2047	12/31/2047	\$2,738,051		\$0	\$0	\$1,200	-\$634,232	\$0	-\$95,135	\$74,498	\$2,084,381
01/01/2048	12/31/2048	\$2,084,381		\$0	\$0	\$1,200	-\$575,088	\$0	-\$86,263	\$55,204	\$1,479,434
01/01/2049	12/31/2049	\$1,479,434		\$0	\$0	\$1,200	-\$514,601	\$0	-\$77,190	\$37,442	\$926,286
01/01/2050	12/31/2050	\$926,286		\$0	\$0	\$1,200	-\$458,614	\$0	-\$68,792	\$21,213	\$421,293
01/01/2051	12/31/2051	\$421,293		\$0	\$0	\$1,200	-\$373,021	\$0	-\$55,953	\$6,480	-\$1

TEMPLATE 7

v20210706p

7a - Assumption Changes for SFA Eligibility

File name: *Template 7 Pension Plan Name*, where "Pension 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 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 is no longer reasonable and why the changed assumptions are reasonable.

This table should reflect all identified assumptions (including those that are included in the Baseline provided in Template 5) 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 That Has Changed From Assumption Used in Most Recent Certification of Plan Status Completed Prior to 1/1/2021	Brief description of assumption used in the most recent certification of plan status completed prior to 1/1/2021	Brief description of assumption used in showing the plan's eligibility for SFA (if different).	Brief explanation on why the assumption in (A) is no longer reasonable and why the assumption 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 that has changed from the assumption 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 has changed is preferred.

TEMPLATE 7

v20210706p

7b - Assumption Changes for SFA Amount

File name: *Template 7 Pension Plan Name*, where "Pension 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 assumption differ from those used in the pre-2021 certification of plan status (except the interest rate used in calculating the amount of SFA) and brief explanations as to why using those original assumptions is no longer reasonable and why the changed assumptions 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 except for the interest rate (reflecting those that are included in the Baseline provided in Template 5) 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 That Has Changed From Assumption Used in Most Recent Certification of Plan Status Completed Prior to 1/1/2021	Brief description of assumption used in the most recent certification of plan status completed prior to 1/1/2021	Brief description of assumption used to determine the requested SFA amount (if different)	Brief explanation on why the assumption in (A) is no longer reasonable and why the assumption 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 That Has Changed From Assumption Used in Most Recent Certification of Plan Status Completed Prior to 1/1/2021	Brief description of assumption used in the most recent certification of plan status completed prior to 1/1/2021	Brief description of assumption used to determine the requested SFA amount (if different)	Brief explanation on why the assumption in (A) is no longer reasonable and why the assumption 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 that has changed from the assumption 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 has changed is preferred.

