

LOCK-IN APPLICATION

Part I. Plan Information

Pension Fund for Hospital and Health Care Employees - Philadelphia and Vicinity
Plan name

Plan Actuary
Role of filer

Brian Hartsell
Name of filer

200 Barr Harbor Drive, Suite 225
Street address of filer

Brian.Hartsell@McKeogh.com
Email address of filer

West Conshohocken, PA 19428
City, State, ZIP Code of filer

484-530-0692
Telephone number of filer

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Board of Trustees
Plan sponsor name

1319 Locust Street
Street address of plan sponsor

ebrooks@1199c-funds.org
Email address of plan sponsor

Philadelphia, PA 19107
City, State, ZIP Code of plan sponsor

215-735-5720
Telephone number of plan sponsor

Brian Hartsell
Plan sponsor's authorized representative's name (if any; if none, then leave these spaces blank)

200 Barr Harbor Drive, Suite 225
Street address of authorized representative

Brian.Hartsell@McKeogh.com
Email address of authorized representative

West Conshohocken, PA 19428
City, State, ZIP Code of authorized representative

484-530-0692
Telephone number of authorized representative

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Part II. Eligibility

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

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

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

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

Part III. Priority Group

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

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

Yes No

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

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

Yes No

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

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

Part IV. Certification

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

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Under penalty of perjury under the laws of the United States of America, I declare that I am an authorized trustee who is a current member of the board of trustees of the: (insert plan name) Pension Fund for Hospital and Health Care Employees - Philadelphia and Vicinity and that I have examined this application, and, to the best of my knowledge and belief, the application contains all the relevant facts relating to the application; all statements of fact contained in the application are true, correct, and not misleading because of omission of any material fact.

John Hundzyski 3-16-23
Signed Date
John Hundzyski TRUSTEE
Printed name of signatory Title

Part V. Statement of Intent

The part must be signed and dated by: (1) a trustee who is a current member of the board of trustees and authorized to sign on behalf of the board of trustees, or (2) another authorized representative of the plan sponsor. Part IV and Part V may but need not be signed by the same individual.

By submitting this lock-in application, I am submitting an initial application for SFA for: (insert plan name) Pension Fund for Hospital and Health Care Employees - Philadelphia and Vicinity with the intent to lock in the plan's base data.

Brian Hartsell 3/28/23
Signed Date
Brian Hartsell Plan Actuary
Printed name of signatory Title

PAPERWORK REDUCTION ACT NOTICE

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

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

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