



Plan Name: _____

EIN/PN: _____

Contact Person: _____



How many

Estimate the total withdrawal liability not



Please fill out th

(1)	(2)	(3)	(4)
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Employer Name	Date of Withdrawal	Employer EIN	Original UVB alloc
Company A	1/1/2006	111111111	\$10,000,000
Company B	1/1/2007	222222222	\$10,000,000
Company C	1/1/2008	333333333	\$10,000,000
Company D	1/1/2008	444444444	\$10,000,000
Total			\$40,000,000

WITHDRAWAL LIABILITY

Contact Inform

Question

Please answer the following questions and fill out the sched

What industry does the plan primarily cover?

If any withdrawal liability has not been assessed, explain why.

How many employers that have withdrawn from the plan in the last ten years were not assessed withdrawal liability?

How many employers that have withdrawn from the plan in the last ten years were not assessed withdrawal liability, if known.

Please enter any additional comments you think may be relevant here.

Withdrawal Liability

Use the following table for all contributing employers that owe withdrawal liability, or over which the plan has withdrawal liability. The first row contains

(5)	(6)	(7)	(8)
-----	-----	-----	-----

Scheduled Years of Payments (max 20) Initial Withdrawal Liability	Mass Withdrawal Date (if any)	Additional Mass Withdrawal Liability	Years of payments after Mass Withdrawal
20.00	1/1/2008	\$12,000,000	infinite
15.00	1/1/2008	\$12,000,000	30
12.50	1/1/2008	\$12,000,000	24
10.25	1/1/2008	\$12,000,000	19

\$48,000,000

KEY INFORMATION

Information

Contact Person Position: _____

Phone Number: _____

E-mail Address: _____

Notes

Use below for specific information about employers.

Examples: Construction exemption / No UVB allocable / Bankruptcy of employer

Settlement Schedule

Record withdrawal liability in the last 10 years (or for a longer period if records are available) as example data.

Settlement Information			
(9)	(10)	(11)	(12)

Statutory Annual Withdrawal Liability Payment (4219(c)(1))	Actual Annual Withdrawal Liability Payment, if different	Amount Settled in a Lump Sum	Lump Sum Settlement Date
\$700,000		N/A	N/A
\$1,100,000		\$5,000,000	10/1/2008
\$1,225,000	\$1,000,000	N/A	N/A
\$1,395,000		\$2,000,000	10/1/2008
\$4,420,000	\$1,000,000	\$7,000,000	



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Payment Plan Information		Payments Received	
(13)	(14)	(15)	(16)

On Payment Plan?	Current on Payments?	Date of Last Payment	Total Payments Received
Yes	Yes	N/A	N/A
Yes	Yes	N/A	N/A
No	No	1/1/2010	\$2,000,000
No	Yes	N/A	N/A
			\$2,000,000