

## Application Checklist - Supplemented

v20220802p

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

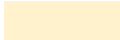
The Supplemented Application to PBGC for Approval of Special Financial Assistance Checklist ("Application Checklist - Supplemented") identifies all information required to be filed with a supplemented application if the plan is requesting additional SFA. For a plan not requesting additional SFA, no checklist is required. For other SFA applications, use the SFA Application Checklist.

For a plan required to submit additional information described in Addendum A of the SFA Filing Instructions, also complete and submit the Additional Information for Certain Events section of the SFA Application Checklist.

Supplemented applications (including this Application Checklist - Supplemented), must be submitted to PBGC electronically through PBGC's e-Filing Portal, (<https://efilingportal.pbgc.gov/site/>). After logging into the e-Filing Portal, go to the Multiemployer Events section and click "Create New ME Filing." Under "Select a filing type," select "Application for Financial Assistance – Special." Note: a new supplemented application submitted after the denial or withdrawal of a previously filed supplemented application must also be submitted by selecting "Create New ME Filing."

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

General instructions for completing the Application Checklist - Supplemented:

Complete all items that are shaded: 

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

For a new supplemented application submitted after the denial or withdrawal of a previously filed supplemented application, the filer may, but is not required to, submit an entire application. For all Application Checklist - Supplemented 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 - Supplemented to indicate that the other information was previously provided as part of the initial application. For each, enter N/A as the **Plan Response**.

Instructions for specific columns:

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

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

**Page Number Reference(s):** For Checklist Items #10 to #10b, submit all information in a single document and identify here the relevant page numbers for each such Checklist Item.

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

Additional guidance is provided in the following columns:

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

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

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

You must select N/A if a Checklist Item # is not applicable to your application. **Your application will be considered incomplete if No is entered as a Plan Response for any of Checklist Items #1 through #16 on the Application Checklist.** If there has been a plan merger as described in § 4262.4(f)(1)(ii), you also must provide the separate Application Checklist - Certain Events.

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

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

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

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

**Version Updates (newest version at top)**

Version	Date updated	
v20220802p	8/2/2022	Fixed the formatting of the SFA Amount Approved Under Interim Final Rule
v20220706p	7/6/2022	

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

v20220802p

APPLICATION CHECKLIST - SUPPLEMENTED

Plan name:	
EIN:	
PN:	
SFA Amount Approved Under Interim Final Rule:	
SFA Amount Requested Under Final Rule:	
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This Application Checklist - Supplemented is only used for a supplemented application. See Application Checklist for all other applications.

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

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

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

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
a.		Is this application a new supplemented application, submitted after the denial of a previously filed supplemented application for SFA?	Yes No		N/A	N/A		N/A	N/A
b.		Is this application a new supplemented application, submitted after a plan has withdrawn its previously filed supplemented application for SFA?	Yes No		N/A	N/A		N/A	N/A
c.		Is this plan a MPRA plan as defined under § 4262.4(a)(3) of PBGC's SFA regulation?	Yes No		N/A	N/A		N/A	N/A
1.	Section B, Item (10)	Does the application include information required to enable the plan to receive electronic transfer of funds if the SFA application is approved, including (if applicable) a notarized payment form? See SFA Instructions, Section B, Item (10).	Yes No			N/A		Other	N/A
2.	Section C, Items (4)a., (4)e., and (4)f. (Also See Addendum C, Section C, Item (4))	Does the application include the information used to determine the amount of SFA for the plan using the <u>basic method</u> described in § 4262.4(a)(1) based on a deterministic projection and using the actuarial assumptions as described in § 4262.4(e)? See Template 4A, 4A-4 SFA Details .4(a)(1) sheet, Section C, Item (4) of the SFA Filing Instructions and Addendum C for more details on these requirements.  Does the uploaded file use the required filenaming convention?	Yes No			N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 4A Supp Plan Name
3.a.	Addendum C Section G, Item (1)	If the plan is a MPRA plan, does the application also include the information used to determine the amount of SFA for the plan using the <u>increasing assets method</u> described in § 4262.4(a)(2)(i) based on a deterministic projection and using the actuarial assumptions as described in § 4262.4(e)? See Template 4A, 4A-5 SFA Details .4(a)(2)(i) sheet and Addendum D for more details on these requirements.  Enter N/A if the plan is not a MPRA Plan.	Yes No N/A		N/A - included as part of Template 4A Plan Name	N/A		N/A	Template 4A Supp Plan Name
3.b.	Addendum C Section G, Item (1)	If the plan is a MPRA plan for which the requested amount of SFA is determined using the <u>increasing assets method</u> described in § 4262.4(a)(2)(i), does the application also explicitly identify the projected SFA exhaustion year based on the <u>increasing assets method</u> ? See Template 4A, 4A-5 SFA Details .4(a)(2)(i) sheet and Addendum D.  Enter N/A if the plan is not a MPRA Plan or if the requested amount of SFA is determined based on the present value method.	Yes No N/A		N/A - included as part of Template 4A Plan Name	N/A		N/A	Template 4A Supp Plan Name

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Unless otherwise specified:  
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 Plan Name = abbreviated plan name

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

Checklist Item #	SFA Filing Instructions Reference		Response Options	Plan Response	Name of File(s) Uploaded	Page Number Reference(s)	Plan Comments	In the e-Filing Portal, upload as Document Type	Use this Filenaming Convention
4.	Addendum C Section H, Item (1)	If the plan is a MPRA plan for which the requested amount of SFA is determined using the <u>present value method</u> described in § 4262.4(a)(2)(ii), does the application also include the information for such plans as shown in Template 4B, including 4B-1 SFA Ben Pmts sheet, 4B-2 SFA Details 4(a)(2)(ii) sheet, and 4B-3 SFA Exhaustion sheet? See Addendum D and Template 4B.  Enter N/A if the plan is not a MPRA Plan or if the requested amount of SFA is determined based on the increasing assets method.	Yes No N/A			N/A		N/A	Template 4B Supp Plan Name
5.	Section C, Items (4)b. and (4)c.	Does the application include identification of the Non-SFA interest rate and the SFA interest, including details on how each was determined? See Template 4A, 4A-1 Interest Rates sheet.	Yes No		N/A - included as part of Template 4A Plan Name	N/A		N/A	N/A - included in Template 4A Plan Name
6.	Addendum C Section C, Item (4)e.ii.	For each year in the SFA coverage period, does the application include the projected benefit payments (excluding make-up payments, if applicable), separately for current retirees and beneficiaries, current terminated vested participants not yet in pay status, current active participants, and new entrants? See Template 4A, 4A-2 SFA Ben Pmts sheet.  Enter N/A if the total projected benefit payments are the same as those used in the application approved under the interim final rule.	Yes No N/A		N/A - included as part of Template 4A Plan Name	N/A		N/A	N/A - included in Template 4A Plan Name
7.	Section D	Was the application signed and dated by an authorized trustee who is a current member of the board of trustees or another authorized representative of the plan sponsor and include the printed name and title of the signer?	Yes No				Identify here the name of the single document that includes all information requested in Section D of the SFA Filing Instructions (Checklist Items #7 through #10.b.).	Financial Assistance Application	SFA App Supp Plan Name
8.a.	Addendum C Section D, Item (1)	Does the application include a cover letter identifying the date the plan's application was approved under the interim final rule, as well as the approved SFA amount under the interim final rule as of the SFA measurement date?	Yes No		N/A - included as part of SFA App Plan Name			N/A	N/A - included as part of SFA App Plan Name
8.b.		For a plan that is a MPRA plan, does the application include a cover letter? Does the cover letter identify the calculation method (basic method, increasing assets method, or present value method) that provides the greatest amount of SFA?  Enter N/A if the plan is not a MPRA plan.	Yes No N/A		N/A - included as part of SFA App Plan Name			N/A	N/A - included as part of SFA App Plan Name
9.	Section D, Item (2)	Does the application include the name, address, email, and telephone number of the plan sponsor, the plan sponsor's authorized representative, and any other authorized representatives?	Yes No		N/A - included as part of SFA App Plan Name			N/A	N/A - included as part of SFA App Plan Name

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10.a.	Addendum C Section D, Item (5)a.	If the projected employer contributions are different from those assumed in the application approved under the interim final rule, does the application include a detailed narrative description of the assumed future contributions (including assumed contribution rates) used to calculate the requested SFA amount under the final rule?  Enter N/A if the projected employer contributions are unchanged from those assumed in the application approved under the interim final rule.	Yes No N/A		N/A - included as part of SFA App Plan Name			N/A	N/A - included as part of SFA App Plan Name
10.b.	Addendum C Section D, Item (5)b.	If the Plan Response to Checklist Item #10.a. is Yes, does the application include documentation described in § 4262.4(c)(3) of PBGC's SFA regulation that substantiates that the contributing rate increases that are excluded were agreed to on or after July 9, 2021?  Enter N/A if the response to Checklist Item #10.a. is N/A.	Yes No N/A		N/A - included as part of SFA App Plan Name		Briefly describe the documentation included.	N/A	N/A - included as part of SFA App Plan Name
11.a.	Section E, Item (1)	Does the application include a fully completed Application Checklist - Supplemented, including the required information at the top of the Application Checklist (plan name, employer identification number (EIN), 3-digit plan number (PN), SFA amount approved under the interim final rule, and SFA amount requested under the final rule)?	Yes No			N/A		Special Financial Assistance Checklist	App Checklist Supp Plan Name
11.b.	Section E, Item (1) - Addendum A	If the plan is required to provide information required by Addendum A of the SFA Filing Instructions (for "certain events"), does the application include the fully completed Additional Information for Certain Events section of the general Application Checklist?  Enter N/A if the plan is not required to submit the additional information described in Addendum A.	Yes No N/A			N/A		Special Financial Assistance Checklist	App Checklist Certain Events Plan Name
12.a.	Addendum C Section E, Item (5)	Does the application include the certification by the plan's enrolled actuary that the requested amount of SFA is the amount to which the plan is entitled under section 4262(j)(1) of ERISA and § 4262.4 of PBGC's SFA regulation? Does this certification include: (i) plan actuary's certification that identifies the requested amount of SFA under the final rule (without any offset for SFA already paid to the plan under the interim final rule) and certifies that this is the amount to which the plan is entitled? (ii) confirmation that all assumptions and methods used, sources of participant data and census data, SFA measurement date, and other relevant information are the same as in the application that was approved under the interim final rule with the exception of the non-SFA and SFA interest rates, the application of the new calculation methodology under the final rule and a change to the plan's employer contribution assumption to exclude contribution rate increases agreed to on or after July 9, 2021 (if applicable)? (iii) a statement that the actuary is qualified to render the actuarial opinion?  Is the information in Checklist #12a combined with #12b (if applicable) as a single document, and uploaded using the required filenaming convention?	Yes No			N/A		Financial Assistance Application	SFA Amount Cert Supp Plan Name

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12.b.		If the plan is a MPRA plan, does the certification by the plan's enrolled actuary identify the amount of SFA determined under the basic method described in § 4262.4(a)(1) and the amount determined under the increasing assets method in § 4262.4(a)(2)(i)?  If the amount of SFA determined under the "present value method" described in § 4262.4(a)(2)(ii) is not the greatest amount of SFA under § 4262.4(a)(2), does the certification state as such?  If the amount of SFA determined under the "present value method" described in § 4262.4(a)(2)(ii) is the greatest amount of SFA under § 4262.4(a)(2), does the certification identify that amount?  Enter N/A if the plan is not a MPRA plan.	Yes No N/A		N/A - included with SFA Amount Cert Plan Name	N/A		N/A - included in SFA Amount Cert Plan Name	N/A - included in SFA Amount Cert Plan Name
13.	Section E, Item (10)	Does the application include one or more copies of the penalties of perjury statement (see Section E, Item (10) of the SFA Filing Instructions) that (a) are signed by an authorized trustee who is a current member of the board of trustees, and (b) includes the trustee's printed name and title.  Is all such information included in a single document and uploaded using the required filenaming convention?	Yes No			N/A		Financial Assistance Application	<i>Penalty Plan Name</i>
14.	Addendum C Section F, Item (1)	If the plan is not a MPRA plan, does the application include a reconciliation of the change in the total amount of SFA under the final rule from the total amount of SFA approved under the interim final rule, each as of the SFA measurement date? See Template 9 and its instructions for details on the reconciliation and information to be provided.  Enter N/A if the plan is a MPRA plan.  Does the uploaded document use the required filenaming convention?	Yes No N/A			N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	<i>Template 9 Plan Name</i>
15.	Addendum C Section G, Item (2)	If the plan is a MPRA plan for which the requested amount of SFA is based on the <u>increasing assets method</u> , does the application include a reconciliation of the change in the requested amount of SFA under the final rule from the total amount of SFA approved under the interim final rule, each as of the SFA measurement date? See Template 9 and its instructions for details on the reconciliation and information to be provided.  Enter N/A if the plan is a not a MPRA plan or if the plan is a MPRA plan using the present value method.  Does the uploaded document use the required filenaming convention?	Yes No N/A			N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	<i>Template 9 Plan Name</i>

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16.	Addendum C Section H, Item (2)	If the plan is a MPRA plan for which the requested amount of SFA is based on the <u>present value method</u> , does the application include a reconciliation of the change in the requested amount of SFA under the final rule from the total amount of SFA approved under the interim final rule, each as of the SFA measurement date? See Template 9 and its instructions for details on the reconciliation and information to be provided.  Enter N/A if the plan is a not a MPRA plan or if the plan is a MPRA plan using the increasing assets method.  Does the uploaded document use the required filenaming convention?	Yes No N/A			N/A		Projections for special financial assistance (estimated income, benefit payments and expenses)	Template 9 Plan Name