

LOCAL 697

I.B.E.W. & ELECTRICAL INDUSTRY PENSION FUND

PENSION APPLICATION INFORMATION

YOUR PENSION PACKAGE INCLUDES THE FOLLOWING APPLICATION FORMS:

1. Proof of Age Instructions
2. Letter of Intent
3. Application for Retirement Benefits
4. Retirement Declaration
5. Form W-4P Withholding Certificate for Pension Payments (Federal)
Unless you state differently, we will withhold the normal amounts as outlined by the government. Please note: You will receive a Form W-4P each year. It is a combination form that allows you to change the amounts of your Federal and Indiana State Income Tax Withholdings. You may also contact our office to request this form at any time or download it from our website: www.ibew697benefits.com.
6. Form WH-4P State of Indiana Annuitant's Request for State and County Income Tax Withholding
7. Direct Deposit Authorization Form
8. Pension Application for Lump Sum Readjustment Allowance
(Please note: Lump Sum not available for vested pensions)
9. Application for Plan P Benefits (if applicable)

YOU ARE REQUIRED TO SUBMIT THE FOLLOWING DOCUMENTS (copies are acceptable):

1. Copy of applicant's birth certificate and social security card
AND (if applicable):
2. Copy of spouse's birth certificate and social security card
3. Certified copy of marriage certificate with seal (not the church certificate). It can be obtained from the county where you were married.
4. Divorce decree **and** property settlements for any divorces during years of electrical service
5. Military DD-214 for any military service during years of electrical service

PENSION APPLICATION PROCESSING TIME

Your application forms and documents are due two (2) months prior to retirement. Call Mary Kay at (219) 845-4433 or (219) 940-6181 or email her at mcole@ibew697benefits.org to make an appointment to return these forms to the Benefits Office located at:

7200 Mississippi Street, Suite 300
Merrillville, IN 46410

PENSION PAYMENT INFORMATION

Pension benefits are issued on the on the first (1st) business day of the month.

LOCAL 697

I.B.E.W. & ELECTRICAL INDUSTRY PENSION FUND

ACCEPTABLE FORMS OF PROOF OF AGE OTHER THAN BIRTH CERTIFICATE

In order to be eligible for retirement benefits, you must furnish proof of your age. The following list shows the type of documents which may serve as proof of your age. Some of the documents are better proof than others. This list is arranged starting with the best type of proof and continues down to the less desirable types of documents.

You are required to furnish the best type of proof which is available. It is recognized that, in certain instances, a birth certificate may or may not be available, particularly for those born outside of the United States. In such cases, you should secure the next best type of proof. Additional proof may be required if the document you submit is not convincing proof. Photostat copies of the document are acceptable.

FORMS OF PROOF

1. A birth certificate
2. A baptismal certificate or a statement as to the date of birth shown by a church record, certified by the custodian of such record
3. Notification of registration of birth in a public registry of vital statistics
4. Hospital birth record, certified by custodian of such record
5. A foreign church or government record
6. A signed statement by the physician or midwife who was in attendance at birth, as to the date of birth shown on their records
7. Naturalization papers
8. Immigration papers
9. Military records
10. Passport
11. School record, certified by the custodian of such record
12. Vaccination record, certified by the custodian of such record
13. Insurance policy which has been in force ten years and shows age or date of birth
14. Marriage records showing date of birth
15. Other evidence such as signed statements from person who has knowledge of date of birth, tax receipts, voting records, etc.

LOCAL 697
I.B.E.W. & ELECTRICAL INDUSTRY PENSION FUND

LETTER OF INTENT APPLICATION

This is to notify the Local 697, I.B.E.W. & Electrical Industry Pension Fund that

I, _____, intend to retire as of
(applicant's name)

(Anticipated month and year of retirement. If applying for disability- write in "Pending Disability").

My age at that time will be _____.

Signature of applicant

Date of submission

Note for disability applications:

If this is a disability application, please indicate the date you applied for

Social Security Disability: _____.

LOCAL 697
I.B.E.W. & ELECTRICAL INDUSTRY PENSION FUND

RETIREMENT DECLARATION FOR PENDING APPLICANTS

Applicant's Name: _____

Social Security Number: _____

In retiring on a pension from the Local 697, I.B.E.W. & Electrical Industry Pension Plan, I declare that I will be bound by all the rules and regulations of the Pension Trust and shall cease being employed or engaging in:

- I. Employment in any work regularly performed by electrical workers, by any building trades craftsman or employment in the same or related business as any employer.

A. Before normal retirement age

To be considered retired, a pensioner may not be employed as a building trades craftsman nor engaged in any form of construction business before he has attained his normal retirement age.

B. After normal retirement age

To be deemed retired, after his attainment of the normal retirement age, a participant must cease and refrain from employment or self-employment for 40 hours or more in a month as an electrician in the construction industry in the geographic jurisdiction of the union.

2. Self-employment in the same or related business as any employer.
3. Employment or self-employment in any work which is or may be under the jurisdiction of the union.

I understand that, if I perform work in violation of the Rules and Regulations of the Pension Fund and this retirement declaration:

A. I must notify the trustees within 30 days by obtaining the appropriate forms in the Fund Office.

B. My pension benefits will stop for the months in which I work.

I declare that the signature appearing below will be used as endorsement on all pension benefits and related matters.

Applicant's Signature: _____

Date of Application: _____

<p>NOTE: Any questions pertaining to this document, need to be personally discussed with the Pension Fund Manager and/or the Local 697 Business Manager.</p>

Withholding Certificate for Pension or Annuity Payments

OMB No. 1545-0074

2019

Future developments. For the latest information about any future developments related to Form W-4P, such as legislation enacted after it was published, go to www.irs.gov/FormW4P.

Purpose. Form W-4P is for U.S. citizens, resident aliens, or their estates who are recipients of pensions, annuities (including commercial annuities), and certain other deferred compensation. Use Form W-4P to tell payers the correct amount of federal income tax to withhold from your payment(s). You also may use Form W-4P to choose (a) not to have any federal income tax withheld from the payment (except for eligible rollover distributions or for payments to U.S. citizens to be delivered outside the United States or its possessions) or (b) to have an additional amount of tax withheld.

Your options depend on whether the payment is periodic, nonperiodic, or an eligible rollover distribution, as explained on pages 2 and 3. Your previously filed Form W-4P will remain in effect if you don't file a Form W-4P for 2019.

General Instructions

Section references are to the Internal Revenue Code.

Follow these instructions to determine the number of withholding allowances you should claim for pension or annuity payment withholding for 2019 and any additional amount of tax to have withheld. Complete the worksheet(s) using the taxable amount of the payments.

If you don't want any federal income tax withheld (see *Purpose*, earlier), you can skip the worksheets and go directly to the Form W-4P below.

Sign this form. Form W-4P is not valid unless you sign it.

You can also use the calculator at www.irs.gov/W4App to determine your tax withholding more accurately. Consider using this calculator if you have a more complicated tax situation, such as if you have more than one pension or annuity, a working spouse, or a large amount of income outside of your pensions. After your Form W-4P takes effect, you can also use this calculator to see how the amount of tax you're having withheld compares to your projected total tax for 2019. If you use the calculator, you don't need to complete any of the worksheets for Form W-4P.

Note that if you have too much tax withheld, you will receive a refund when you file your tax return. If you have too little tax

withheld, you will owe tax when you file your tax return, and you might owe a penalty.

Filers with multiple pensions or more than one income. If you have more than one source of income subject to withholding (such as more than one pension or a pension and a job, or you're married filing jointly and your spouse is working), read all of the instructions, including the instructions for the Multiple Pensions/More-Than-One-Income Worksheet, before beginning.

Other income. If you have a large amount of income from other sources not subject to withholding (such as interest, dividends, or capital gains), consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you might owe additional tax. See Pub. 505, Tax Withholding and Estimated Tax, for more information. Get Form 1040-ES and Pub. 505 at www.irs.gov/FormsPubs. Or, you can use the Deductions, Adjustments, and Additional Income Worksheet on page 5 or the calculator at www.irs.gov/W4App to make sure you have enough tax withheld from your payments. If you have income from wages, see Pub. 505 or use the calculator at www.irs.gov/W4App to find out if you should adjust your withholding on Form W-4 or Form W-4P.

Note: Social security and railroad retirement payments may be includible in income. See Form W-4V, Voluntary Withholding Request, for information on voluntary withholding from these payments.

Withholding From Pensions and Annuities

Generally, federal income tax withholding applies to the taxable part of payments made from pension, profit-sharing, stock bonus, annuity, and certain deferred compensation plans; from individual retirement arrangements (IRAs); and from commercial annuities. The method and rate of withholding depend on (a) the kind of payment you receive; (b) whether the payments are to be delivered outside the United States or its possessions; and (c) whether the recipient is a nonresident alien individual, a nonresident alien beneficiary, or a foreign estate. Qualified distributions from a Roth IRA are nontaxable and, therefore, not subject to withholding. See page 3 for special withholding rules that apply to payments to be delivered outside the United States and payments to foreign persons.

----- Separate here and give Form W-4P to the payer of your pension or annuity. Keep the worksheet(s) for your records. -----

Withholding Certificate for Pension or Annuity Payments

OMB No. 1545-0074

2019

► For Privacy Act and Paperwork Reduction Act Notice, see page 6.

Your first name and middle initial	Last name	Your social security number
Home address (number and street or rural route)		Claim or identification number (if any) of your pension or annuity contract
City or town, state, and ZIP code		

Complete the following applicable lines.

- Check here if you **do not want any** federal income tax withheld from your pension or annuity. (Don't complete line 2 or 3.) ► ☐
- Total number of allowances and marital status you're claiming for withholding from each **periodic** pension or annuity payment. (You also may designate an additional dollar amount on line 3.) ►
Marital status: ☐ Single ☐ Married ☐ Married, but withhold at higher Single rate. (Enter number of allowances.)
- Additional amount, if any, you want withheld from each pension or annuity payment. (**Note:** For periodic payments, you can't enter an amount here without entering the number (including zero) of allowances on line 2.) ► \$

Your signature ►

Date ►

Because your tax situation may change from year to year, you may want to refigure your withholding each year. You can change the amount to be withheld by using lines 2 and 3 of Form W-4P.

Choosing not to have income tax withheld. You (or in the event of death, your beneficiary or estate) can choose not to have federal income tax withheld from your payments by using line 1 of Form W-4P. For an estate, the election to have no income tax withheld may be made by the executor or personal representative of the decedent. Enter the estate's employer identification number (EIN) in the area reserved for "Your social security number" on Form W-4P.

You may not make this choice for eligible rollover distributions. See *Eligible rollover distribution—20% withholding* below.

Caution: There are penalties for not paying enough federal income tax during the year, either through withholding or estimated tax payments. New retirees, especially, should see Pub. 505. It explains your estimated tax requirements and describes penalties in detail. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your pension or annuity using Form W-4P.

Periodic payments. Withholding from periodic payments of a pension or annuity is figured in the same manner as withholding from wages. Periodic payments are made in installments at regular intervals over a period of more than 1 year. They may be paid annually, quarterly, monthly, etc.

If you want federal income tax to be withheld, you must designate the number of withholding allowances on line 2 of Form W-4P and indicate your marital status by checking the appropriate box. You can't designate a specific dollar amount to be withheld. However, you can designate an additional amount to be withheld on line 3.

If you don't want any federal income tax withheld from your periodic payments, check the box on line 1 of Form W-4P and submit the form to your payer. However, see *Payments to Foreign Persons and Payments To Be Delivered Outside the United States* on page 3.

Caution: If you don't submit Form W-4P to your payer, the payer must withhold on periodic payments as if you're married claiming three withholding allowances. Generally, this means that tax will be withheld if the taxable amount of your pension or annuity is at least \$2,033 a month.

If you submit a Form W-4P that doesn't contain your correct social security number (SSN), the payer must withhold as if

you're single claiming zero withholding allowances even if you checked the box on line 1 to have no federal income tax withheld.

There are some kinds of periodic payments for which you can't use Form W-4P because they're already defined as wages subject to federal income tax withholding. These payments include retirement pay for service in the U.S. Armed Forces and payments from certain nonqualified deferred compensation plans and tax-exempt organizations' deferred compensation plans described in section 457. Your payer should be able to tell you whether Form W-4P applies.

For periodic payments, your Form W-4P stays in effect until you change or revoke it. Your payer must notify you each year of your right to choose not to have federal income tax withheld (if permitted) or to change your choice.

Nonperiodic payments—10% withholding. Your payer must withhold at a flat 10% rate from the taxable amount of nonperiodic payments (but see *Eligible rollover distribution—20% withholding* below) **unless** you choose not to have federal income tax withheld. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. You can choose not to have federal income tax withheld from a nonperiodic payment (if permitted) by submitting Form W-4P (containing your correct SSN) to your payer and checking the box on line 1. However, see *Payments to Foreign Persons and Payments To Be Delivered Outside the United States* on page 3. Generally, your choice not to have federal income tax withheld will apply to any later payment from the same plan. You can't use line 2 for nonperiodic payments. But you may use line 3 to specify an additional amount that you want withheld.

Caution: If you submit a Form W-4P that doesn't contain your correct SSN, the payer can't honor your request not to have income tax withheld and must withhold 10% of the payment for federal income tax.

Eligible rollover distribution—20% withholding. Distributions you receive from qualified pension or annuity plans (for example, 401(k) plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over to an IRA or qualified plan are subject to a flat 20% federal withholding rate on the taxable amount of the distribution. The 20% withholding rate is required, and you can't choose not to have income tax withheld from eligible rollover distributions. Don't give Form W-4P to your payer unless you want an additional amount withheld. In that case, complete line 3 of Form W-4P and submit the form to your payer.

Note: The payer won't withhold federal income tax if the entire distribution is transferred by the plan administrator in a direct rollover to a traditional IRA or another eligible retirement plan (if allowed by the plan), such as a 401(k) plan, qualified pension plan, governmental section 457(b) plan, section 403(b) contract, or tax-sheltered annuity.

Distributions that are (a) required by federal law, (b) one of a specified series of equal payments, or (c) qualifying "hardship" distributions are **not** "eligible rollover distributions" and aren't subject to the mandatory 20% federal income tax withholding. See Pub. 505 for details. See also *Nonperiodic payments—10% withholding* on page 2.

Tax relief for victims of terrorist attacks. For tax years ending after September 10, 2001, disability payments for injuries incurred as a direct result of a terrorist attack directed against the United States (or its allies), whether outside or within the United States, aren't included in income. You may check the box on line 1 of Form W-4P and submit the form to your payer to have no federal income tax withheld from these disability payments. However, you must include in your income any amounts that you received or you would've received in retirement had you not become disabled as a result of a terrorist attack. See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

Changing Your "No Withholding" Choice

Periodic payments. If you previously chose not to have federal income tax withheld and you now want withholding, complete another Form W-4P and submit it to your payer. If you want federal income tax withheld at the 2019 default rate (married with three allowances), write "Revoked" next to the checkbox on line 1 of the form. If you want tax withheld at any different rate, complete line 2 on the form.

Nonperiodic payments. If you previously chose not to have federal income tax withheld and you now want withholding, write "Revoked" next to the checkbox on line 1 and submit Form W-4P to your payer.

Payments to Foreign Persons and Payments To Be Delivered Outside the United States

Unless you're a nonresident alien, withholding (in the manner described above) is required on any periodic or nonperiodic payments that are to be delivered to you outside the United States or its possessions. Don't check the box on line 1 of Form W-4P. See Pub. 505 for details.

In the absence of a tax treaty exemption, nonresident aliens, nonresident alien beneficiaries, and foreign estates generally are subject to a 30% federal withholding tax under section 1441 on the taxable portion of a periodic or nonperiodic pension or annuity payment that is from U.S. sources. However, most tax treaties provide that private pensions and annuities are exempt from withholding and tax. Also, payments from certain pension plans are exempt from withholding even if no tax treaty applies. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for details. A foreign person should submit Form W-8BEN, Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting, to the payer before receiving any payments. The Form W-8BEN must contain the foreign person's taxpayer identification number (TIN).

Statement of Federal Income Tax Withheld From Your Pension or Annuity

By January 31 of next year, your payer will furnish a statement to you on Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc., showing the total amount of your pension or annuity payments and the total federal income tax withheld during the year. If you're a foreign person who has provided your payer with Form W-8BEN, your payer instead will furnish a statement to you on Form 1042-S, Foreign Person's U.S. Source Income Subject to Withholding, by March 16 of next year.

Specific Instructions

Personal Allowances Worksheet

Complete this worksheet on page 4 first to determine the number of withholding allowances to claim.

Line C. Head of household please note: Generally, you can claim head of household filing status on your tax return only if you're unmarried and pay more than 50% of the costs of keeping up a home for yourself and a qualifying individual. See Pub. 501 for more information about filing status.

Line E. Child tax credit. When you file your tax return, you may be eligible to claim a child tax credit for each of your eligible children. To qualify, the child must be under age 17 as of December 31, must be your dependent who lives with you for more than half the year, and must have a valid social security number. To learn more about this credit, see Pub. 972, Child Tax Credit. To reduce the tax withheld from your payments by taking this credit into account, follow the instructions on line E of the worksheet. On the worksheet you will be asked about your total income. For this purpose, total income includes all of your pensions, wages, and other income, including income earned by a spouse, if you are filing a joint return.

Line F. Credit for other dependents. When you file your tax return, you may be eligible to claim a credit for other dependents for whom a child tax credit cannot be claimed, such as a qualifying child who does not meet the age or social security number requirement for the child tax credit, or a qualifying relative. To learn more about this credit, see Pub. 972. To reduce the tax withheld from your payments by taking this credit into account, follow the instructions on line F of the worksheet. On the worksheet, you will be asked about your total income. For this purpose, total income includes all of your pensions, wages, and other income, including income earned by a spouse, if you are filing a joint return.

Line G. Other credits. You may be able to reduce the tax withheld from your payments if you expect to claim other tax credits, such as tax credits for education (see Pub. 970). If you do so, your payments will be larger, but the amount of any refund that you receive when you file your tax return will be smaller. Follow the instructions for Worksheet 1-6 in Pub. 505 if you want to reduce your withholding to take these credits into account. Enter "-0-" on lines E and F if you use Worksheet 1-6.

Deductions, Adjustments, and Additional Income Worksheet

Complete this worksheet to determine if you're able to reduce the tax withheld from your pension or annuity payments to account for your itemized deductions and other adjustments to income, such as IRA contributions. If you do so, your refund at the end of the year will be smaller, but your payments will be larger. You're not required to complete this worksheet or reduce your withholding if you don't wish to do so.

You can also use this worksheet to figure out how much to increase the tax withheld from your payments if you have a large amount of other income not subject to withholding, such as interest, dividends, or capital gains.

Another option is to take these items into account and make your withholding more accurate by using the calculator at www.irs.gov/W4App. If you use the calculator, you don't need to complete any of the worksheets for Form W-4P.

Multiple Pensions/More-Than-One-Income Worksheet

Complete this worksheet if you receive more than one pension, if you have a pension and a job, or if you're married filing jointly and have a working spouse or a spouse who receives a pension. If you don't complete this worksheet, you might have too little tax withheld. If so, you will owe tax when you file your tax return and may be subject to a penalty.

Figure the total number of allowances you're entitled to claim and any additional amount of tax to withhold on all pensions using worksheets from only one Form W-4P. Claim all allowances on the Form W-4P that you or your spouse file for the highest paying pension in your family and claim zero allowances on Forms W-4P filed for all other pensions. For example, if you receive \$60,000 from your pension per year and your spouse

receives \$20,000 from a pension, you should complete the worksheets to determine what to enter on lines 2 and 3 of your Form W-4P, and your spouse should enter zero ("0-") on lines 2 and 3 of his or her Form W-4P. See Pub. 505 for details.

Another option is to use the calculator at www.irs.gov/W4App to figure your withholding more precisely.

Personal Allowances Worksheet (Keep for your records.)

A	Enter "1" for yourself	A	_____
B	Enter "1" if you will file as married filing jointly	B	_____
C	Enter "1" if you will file as head of household	C	_____
D	Enter "1" if: <div style="display: inline-block; vertical-align: middle; margin-left: 10px;"> <div style="display: inline-block; vertical-align: middle; font-size: 3em; line-height: 1;">{</div> <div style="display: inline-block; vertical-align: middle;"> <ul style="list-style-type: none"> • You're single, or married filing separately, and have only one pension; or • You're married filing jointly, have only one pension, and your spouse has no income subject to withholding; or • Your income from a second pension or a job or your spouse's pension or wages (or the total of all) are \$1,500 or less. </div> </div>	D	_____
E	Child tax credit. See Pub. 972, Child Tax Credit, for more information. <ul style="list-style-type: none"> • If your total income will be less than \$71,201 (\$103,351 if married filing jointly), enter "4" for each eligible child. • If your total income will be from \$71,201 to \$179,050 (\$103,351 to \$345,850 if married filing jointly), enter "2" for each eligible child. • If your total income will be from \$179,051 to \$200,000 (\$345,851 to \$400,000 if married filing jointly), enter "1" for each eligible child. • If your total income will be higher than \$200,000 (\$400,000 if married filing jointly), enter "-0-" 		
F	Credit for other dependents. See Pub. 972, Child Tax Credit, for more information. <ul style="list-style-type: none"> • If your total income will be less than \$71,201 (\$103,351 if married filing jointly), enter "1" for each eligible dependent. • If your total income will be from \$71,201 to \$179,050 (\$103,351 to \$345,850 if married filing jointly), enter "1" for every two dependents (for example, "-0-" for one dependent, "1" if you have two or three dependents, and "2" if you have four dependents). • If your total income will be higher than \$179,050 (\$345,850 if married filing jointly), enter "-0-" 		
G	Other credits. If you have other credits, see Worksheet 1-6 of Pub. 505 and enter the amount from that worksheet here. If you use Worksheet 1-6, enter "-0-" on lines E and F		
H	Add lines A through G and enter the total here ▶		
<div style="display: flex; align-items: center;"> <div style="flex: 1;"> <p>For accuracy, complete all worksheets that apply.</p> </div> <div style="flex: 2; border-left: 2px solid black; padding-left: 10px;"> <ul style="list-style-type: none"> • If you plan to itemize or claim adjustments to income and want to reduce your withholding, or if you have a large amount of other income not subject to withholding and want to increase your withholding, see the Deductions, Adjustments, and Additional Income Worksheet, later. • If you have more than one source of income subject to withholding or are married filing jointly and you and your spouse both have income subject to withholding and your combined income from all sources exceeds \$53,000 (\$24,450 if married filing jointly), see the Multiple Pensions/More-Than-One-Income Worksheet on page 5 to avoid having too little tax withheld. • If neither of the above situations applies, stop here and enter the number from line H on line 2 of Form W-4P above. </div> </div>			

Deductions, Adjustments, and Additional Income Worksheet

Note: Use this worksheet *only* if you plan to itemize deductions, claim certain adjustments to income, or have a large amount of other income not subject to withholding.

- 1 Enter an estimate of your 2019 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 10% of your income. See Pub. 505 for details 1 \$ _____
- 2 Enter: $\left\{ \begin{array}{l} \$24,400 \text{ if you're married filing jointly or qualifying widow(er)} \\ \$18,350 \text{ if you're head of household} \\ \$12,200 \text{ if you're single or married filing separately} \end{array} \right\}$ 2 \$ _____
- 3 Subtract line 2 from line 1. If zero or less, enter "-0-" 3 \$ _____
- 4 Enter an estimate of your 2019 adjustments to income, qualified business income deduction, and any additional standard deduction for age or blindness (see Pub. 505 for information about these items) 4 \$ _____
- 5 Add lines 3 and 4 and enter the total 5 \$ _____
- 6 Enter an estimate of your 2019 other income not subject to withholding (such as dividends, interest, or capital gains) 6 \$ _____
- 7 Subtract line 6 from line 5. If zero, enter "-0-". If less than zero, enter the amount in parentheses 7 \$ _____
- 8 Divide the amount on line 7 by \$4,200 and enter the result here. If a negative amount, enter in parentheses. Drop any fraction 8 _____
- 9 Enter the number from the **Personal Allowances Worksheet**, line H, page 4 9 _____
- 10 Add lines 8 and 9 and enter the total here. If zero or less, enter "-0-". If you plan to use the **Multiple Pensions/More-Than-One-Income Worksheet**, also enter this total on line 1 below. Otherwise, stop here and enter this total on Form W-4P, line 2, page 1 10 _____

Multiple Pensions/More-Than-One-Income Worksheet

Note: Use this worksheet *only* if the instructions under line H from the **Personal Allowances Worksheet** direct you here. This applies if you (and your spouse if married filing jointly) have more than one source of income subject to withholding (such as more than one pension, or a pension and a job, or you have a pension and your spouse works).

- 1 Enter the number from the **Personal Allowances Worksheet**, line H, page 4 (or from line 10 above if you used the **Deductions, Adjustments, and Additional Income Worksheet**) 1 _____
- 2 Find the number in **Table 1** below that applies to the **LOWEST** paying pension or job and enter it here. However, if you're married filing jointly and the amount from the highest paying pension or job is \$75,000 or less and the combined amounts for you and your spouse are \$107,000 or less, do not enter more than "3" 2 _____
- 3 If line 1 is **more than or equal to** line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-") and on Form W-4P, line 2, page 1. Do not use the rest of this worksheet 3 _____

Note: If line 1 is **less than** line 2, enter "-0-" on Form W-4P, line 2, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill.

- 4 Enter the number from line 2 of this worksheet 4 _____
- 5 Enter the number from line 1 of this worksheet 5 _____
- 6 Subtract line 5 from line 4 6 _____
- 7 Find the amount in **Table 2** below that applies to the **HIGHEST** paying pension or job and enter it here 7 \$ _____
- 8 Multiply line 7 by line 6 and enter the result here. This is the additional annual withholding needed 8 \$ _____
- 9 Divide line 8 by the number of payments remaining in 2019. For example, divide by 8 if you're paid every month and you complete this form in April 2019. Enter the result here and on Form W-4P, line 3, page 1. This is the additional amount to be withheld from each payment 9 \$ _____

Table 1**Table 2**

Married Filing Jointly		All Others		Married Filing Jointly		All Others	
If wages from LOWEST paying job or pension are—	Enter on line 2 above	If wages from LOWEST paying job or pension are—	Enter on line 2 above	If wages from HIGHEST paying job or pension are—	Enter on line 7 above	If wages from HIGHEST paying job or pension are—	Enter on line 7 above
\$0 - \$5,000	0	\$0 - \$7,000	0	\$0 - \$24,900	\$420	\$0 - \$7,200	\$420
5,001 - 9,500	1	7,001 - 13,000	1	24,901 - 84,450	500	7,201 - 36,975	500
9,501 - 19,500	2	13,001 - 27,500	2	84,451 - 173,900	910	36,976 - 81,700	910
19,501 - 35,000	3	27,501 - 32,000	3	173,901 - 326,950	1,000	81,701 - 158,225	1,000
35,001 - 40,000	4	32,001 - 40,000	4	326,951 - 413,700	1,330	158,226 - 201,600	1,330
40,001 - 46,000	5	40,001 - 60,000	5	413,701 - 617,850	1,450	201,601 - 507,800	1,450
46,001 - 55,000	6	60,001 - 75,000	6	617,851 and over	1,540	507,801 and over	1,540
55,001 - 60,000	7	75,001 - 85,000	7				
60,001 - 70,000	8	85,001 - 95,000	8				
70,001 - 75,000	9	95,001 - 100,000	9				
75,001 - 85,000	10	100,001 - 110,000	10				
85,001 - 95,000	11	110,001 - 115,000	11				
95,001 - 125,000	12	115,001 - 125,000	12				
125,001 - 155,000	13	125,001 - 135,000	13				
155,001 - 165,000	14	135,001 - 145,000	14				
165,001 - 175,000	15	145,001 - 160,000	15				
175,001 - 180,000	16	160,001 - 180,000	16				
180,001 - 195,000	17	180,001 and over	17				
195,001 - 205,000	18						
205,001 and over	19						

Privacy Act and Paperwork Reduction Act Notice

We ask for the information on this form to carry out the Internal Revenue laws of the United States. You're required to provide this information only if you want to (a) request federal income tax withholding from periodic pension or annuity payments based on your withholding allowances and marital status; (b) request additional federal income tax withholding from your pension or annuity; (c) choose not to have federal income tax withheld, when permitted; or (d) change or revoke a previous Form W-4P. To do any of the aforementioned, you're required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s). Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths

and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You're not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

Form **WH-4P**
State Form 37365
(R2 / 8-08)



State of Indiana
Annuitant's Request
for State and County Income Tax Withholding
(Please Type or Print Clearly)

Full Name _____

Home Address (number and street) _____

City, State, and Zip code _____

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

- Social Security Number _____
- A. Annuity contract claim or identification number A. 35-1115299
- B. Enter the amount of Indiana state tax to be withheld from each annuity or pension payment B. \$ _____
- C. Enter your 2-digit county code and the amount of county tax to be withheld from each annuity or pension payment C. \$ _____
- D. Total amount withheld: add line B plus line C (must be \$10 or more) D. \$ _____

I request voluntary income tax withholding from my annuity or pension payments.

Signature of Annuitant

Date

7200 MISSISSIPPI ST., SUITE 300 • MERRILLVILLE, IN 46410 • 219-845-4433 • FAX 219-844-1799

DIRECT DEPOSIT AUTHORIZATION FORM

SECTION A – TO BE COMPLETED BY THE RECIPIENT

I hereby authorize the Local 697 Pension Fund to initiate credit entries to my account listed below, in the financial institution shown. In the event a credit is made to my account in error, I authorize the Local 697 Pension Fund to make a correcting entry, provided I am notified of the adjustment. This authorization is to remain in effect until the Local 697 Pension Fund has received written notification from me terminating it.

By: _____ (Recipient's Signature)

Date _____ Recipient's Telephone Number () _____

Recipient's SSN

			=			=				
--	--	--	---	--	--	---	--	--	--	--

First Name

[illegible]

MI

Last Name

[illegible]

Address, Line 1

[illegible]

Address, Line 2 (If needed)									
-----------------------------	--	--	--	--	--	--	--	--	--

[illegible]

City

[illegible]

State

--	--

Zip

--	--	--	--	--

SECTION B - TO BE COMPLETED BY THE FINANCIAL INSTITUTION

Institution Name

[illegible]**Mailing Address**[illegible]

City

[illegible]

State

--	--

Zip

--	--	--	--	--

ABA Routing Number

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

Account Number

[illegible]

- **Checking**

- **Savings**

By: _____ (Bank Representative's Signature)

Print Name and Title _____

Date _____ Bank's Telephone Number () _____

LOCAL 697

I.B.E.W. & ELECTRICAL INDUSTRY PENSION FUND

APPLICATION SUPPLEMENT FOR LUMP-SUM RE-ADJUSTMENT ALLOWANCE

If you wish, the monthly pension to which you may be entitled can be actuarially adjusted so that you may receive at retirement a monthly pension benefit in a lower amount in return for a lump-sum payment. This form must be signed and submitted with your regular application form.

Participant Information:

Name: _____

Social Security Number: _____

Lump Sum Election:

- ☐ I **have elected** the Lump-Sum Re-Adjustment Allowance to be paid in accordance with Article II, Section 15 of the Pension Plan Rules and Regulations. Therefore, I choose to have my monthly pension benefit reduced by:

\$ _____
(Not more than a 10% reduction will be allowed)

- ☐ I **do not wish** to elect the Lump-Sum Re-Adjustment Allowance.

Signature of applicant

Date of submission



Stop here if you did **not** elect to receive a pay out in a lump sum or other eligible rollover distribution.

LOCAL 697
I.B.E.W. & ELECTRICAL INDUSTRY PENSION FUND

**APPLICATION SUPPLEMENT FOR
LUMP-SUM RE-ADJUSTMENT ALLOWANCE**

PLEASE NOTE: Complete this form only if you will receive a pay out in a lump sum or other eligible rollover distribution.

To: Trustees
Local 697, I.B.E.W. & Electrical Industry Pension Fund

We, _____ and _____
Retiree Spouse

give our consent to the Local 697, I.B.E.W. & ELECTRICAL INDUSTRY PENSION FUND to

deduct _____%, which represents a lump-sum payment, from the monthly pension benefit

for _____.
Retiree

Sincerely,

Retiree

Spouse

Statement to be notarized and returned to pension office:

Date _____

Notary Public

State of Indiana, County of Lake

My commission expires

LOCAL 697

I.B.E.W. & ELECTRICAL INDUSTRY PENSION FUND

APPLICATION SUPPLEMENT FOR LUMP-SUM RE-ADJUSTMENT ALLOWANCE

PLEASE NOTE: Complete this form only if you will receive a pay out in a lump sum or other eligible rollover distribution. Before completing this form you should read the Special Tax Notice regarding plan payments carefully. You also may wish to consult your tax advisor before making this election.

Participant's Name/Spouse's Name

Participant's Social Security Number

Street Address

City

State

Zip Code

If you will receive part or all of your benefits as an "eligible rollover distribution," you may elect to have part or all of that distribution transferred directly to an Individual Retirement Account (IRA) or to another qualified retirement plan (if it accepts rollovers). If you choose **not** to have an eligible rollover distribution transferred directly to an IRA or other retirement plan, the Plan is required to withhold 20 percent of the payment for federal income taxes. This withholding does not increase your taxes, but will be credited against any income tax you owe. (For further information on direct rollovers and withholding, please read the Special Tax Notice Regarding Plan Payments that the Plan has given you.)

Check below to indicate whether or not you elect a direct rollover of your pension payment:

- ☐ I do not want to roll over any of my payment to an IRA or other qualified retirement plan. Pay me the full amount of my benefits, after withholding 20 percent for federal taxes as required by law.
- ☐ Withhold state taxes. ☐ Withhold county taxes. ☐ Direct deposit
- ☐ Do not withhold state taxes. ☐ Do not withhold county taxes. ☐ Check
- ☐ I want to rollover my payment directly to an IRA or other qualified retirement plan that accepts rollovers. The IRA or other retirement plan is named on the next page.
- ☐ I would like to have only **part** of my payment directly rolled over. Please roll over \$_____ to the IRA or qualified retirement plan named on the next page, and pay the remainder of my benefit to me, after withholding 20 percent for federal income taxes as required by law.
- ☐ Withhold state taxes. ☐ Withhold county taxes. ☐ Direct deposit
- ☐ Do not withhold state taxes. ☐ Do not withhold county taxes. ☐ Check

LOCAL 697
I.B.E.W. & ELECTRICAL INDUSTRY PENSION FUND

**APPLICATION SUPPLEMENT FOR
LUMP-SUM RE-ADJUSTMENT ALLOWANCE**

If you elected a direct rollover, you must provide all of the following information. **Until you provide this information, no direct rollover can be made.**

Please make payment of my lump sum benefits on my behalf to:

Name of IRA Trustee or Qualified Retirement Plan

Mailing Address

Account Number

Type of Account

CERTIFICATION OF DIRECT ROLLOVER

If you have elected a direct rollover of all or part of your benefit, please read and sign the following statement:

I certify that the recipient of a direct rollover that I have named above is an Individual Retirement Account, an Individual Retirement Annuity, or a qualified retirement plan that accepts rollovers. I understand that payment of my benefits to the trustee of the IRA or qualified retirement plan will release the Trustees of the Local 697, I.B.E.W. & Electrical Industry Pension Fund from any further obligations or responsibilities with respect to the benefits so paid.

Signature of applicant

Date of submission

Special Tax Notice

Your Rollover Options

You are receiving this notice because all or a portion of a payment you are receiving from the Local 697, I.B.E.W. & Electrical Industry Pension Fund (PF) or the IBEW & Electrical Industry Local 697 Money Purchase Plan and Trust (MPPT) is eligible to be rolled over to an IRA or an employer plan. This notice is intended to help you decide whether to do such a rollover. This notice describes the rollover rules that apply to payments from the PF or MPPT.

Rules that apply to most payments from a plan are described in the "General Information About Rollovers" section. Special rules that only apply in certain circumstances are described in the "Special Rules and Options" section.

If you have additional questions after reading this notice, call the PF or MPPT at (219) 845-4433 or (219) 940-6181.

General Information about Rollovers

How can a rollover affect my taxes?

You will be taxed on a payment from the Plan if you do not roll it over. If you are under age 59½ and do not do a rollover, you will also have to pay a 10% additional income tax on early distributions (unless an exception applies). However, if you do a rollover, you will not have to pay tax until you receive payments later and the 10% additional income tax will not apply if those payments are made after you are age 59 ½ (or if an exception applies).

Where may I roll over the payment?

You may roll over the payment to either an IRA (an individual retirement account or individual retirement annuity) or an employer plan (a tax-qualified plan, section 403(b) plan, or governmental section 457(b) plan) that will accept the rollover. Please note that Plans are not required to accept a rollover, and you should consult with the Plan you intend to roll your money over to in order to ensure it accepts rollovers. The rules of the IRA or employer plan that holds the rollover will determine your investment options, fees, and rights to payment from the IRA or employer plan (for example, no spousal consent rules apply to IRAs and IRAs may not provide loans). Further, the amount rolled over will become subject to the tax rules that apply to the IRA or employer plan.

How do I do a rollover?

There are two ways to do a rollover. You can do either a direct rollover or a 60-day rollover.

If you do a direct rollover, the Plan will make the payment directly to your IRA or an employer plan. You should contact the IRA sponsor or the administrator of the employer plan for information on how to do a direct rollover.

If you do not do a direct rollover, you may still do a rollover by making a deposit into an IRA or eligible employer plan that will accept it. You will have 60 days after you receive the payment to make the deposit. If you do not do a direct rollover, the Plan is required to withhold 20% of the taxable amount of the payment for federal income taxes. This means that, in order to roll over the entire payment in a 60-day rollover, you must use other funds to make up for the 20% withheld. If you do not roll over the entire amount of the payment, the portion not rolled over will be taxed and will be subject to the 10% additional income tax on early distributions if you are under age 59 ½ (unless an exception applies).

How much may I roll over?

All or part of the lump sums payable from the PF or MPPT are eligible for rollovers. Generally other payments from the PF or MPPT are not eligible for rollover because they are made over your life expectancy (or the joint life expectancy of you and your contingent annuitant).

If I don't do a rollover, will I have to pay the 10% additional income tax on early distributions?

If you are under age 59½, you will have to pay the 10% additional income tax on early distributions for any payment from the Plan (including amounts withheld for income tax) that you do not roll over, unless one of the exceptions listed below applies. This tax is in addition to the regular income tax on the payment not rolled over.

The 10% additional income tax does not apply to the following payments from the Plan:

- Payments made after you separate from service if you will be at least age 55 in the year of the separation
- Payments that start after you separate from service if paid at least annually in equal or close to equal amounts over your life or life expectancy (or the lives or joint life expectancy of you and your beneficiary)
- Payments made due to disability
- Payments after your death
- Payments made directly to the government to satisfy a federal tax levy
- Payments made under an approved domestic relations order (QDRO)
- Payments up to the amount of your deductible medical expenses
- Certain payments made while you are on active duty if you were a member of a reserve component called to duty after September 11, 2001 for more than 179 days

If I do a rollover to an IRA, will the 10% additional income tax apply to early distributions from the IRA?

If you receive a payment from an IRA when you are under age 59½, you will have to pay the 10% additional income tax on early distributions from the IRA, unless an exception applies. In general, the exceptions to the 10% additional income tax for early distributions from an IRA are the same as the exceptions listed above for early distributions from a plan. However, there are a few differences for payments from an IRA, including:

- You are a qualified public safety officer if you are a law enforcement officer, firefighter, chaplain, or member of a rescue squad or ambulance crew."
- There is no exception for payments after separation from service that are made after age 55.
- The exception for qualified domestic relations orders (QDROs) does not apply (although a special rule applies under which, as part of a divorce or separation agreement, a tax-free transfer may be made directly to an IRA of a spouse or former spouse).
- The exception for payments made at least annually in equal or close to equal amounts over a specified period applies without regard to whether you have had a separation from service.
- There are additional exceptions for (1) payments for qualified higher education expenses, (2) payments up to \$10,000 used in a qualified first-time home purchase, and (3) payments after you have received unemployment compensation for 12 consecutive weeks (or would have been eligible to receive unemployment compensation but for self-employed status).

Will I owe state income taxes?

If you are a Indiana resident, your payment is subject to state taxes at the time of the distribution, unless you elect to roll it over. If you do not use the direct rollover method, an additional 4 percent of the taxable amount will be withheld and forwarded to the Indiana Department of Taxation as state income tax withholding to be credited against your taxes. This notice does not describe local income tax rules or the rules for other states.

Your Right to Waive the 30-Day Notice Period.

Generally, neither a direct rollover nor a payment can be made from the plan until at least 30 days after your receipt of this notice. Thus, after receiving this notice, you will have at least 30 days to consider whether or not to have your withdrawal directly rolled over. If you do not wish to wait until this 30-day notice period ends before your election is processed, you may waive the notice period by making an affirmative election indicating whether or not you wish to make a direct rollover. Your withdrawal will then be processed in accordance with your election as soon as practical after it is received by the Plan Administrator.

Special Rules and Options

If you miss the 60-day rollover deadline

Generally, the 60-day rollover deadline cannot be extended. However, the IRS has the limited authority to waive the deadline under certain extraordinary circumstances, such as when external events prevented you from completing the rollover by the 60-day rollover deadline. To apply for a waiver, you must file a private letter ruling request with the IRS. Private letter ruling requests require the payment of a nonrefundable user fee. For more information, see IRS Publication 590, Individual Retirement Arrangements (IRAs).

If you have an outstanding loan that is being offset

If you have an outstanding loan from the MPPT, your plan benefit may be offset by the amount of the loan, typically when your employment ends. The loan offset amount is treated as a distribution to you at the time of the offset and will be taxed (including the 10% additional income tax on early distributions unless an exception applies) unless you do a 60-day rollover in the amount of the loan offset to an IRA or employer plan.

If you were born on or before January 1, 1936

If you were born on or before January 1, 1936 and receive a lump-sum distribution that you do not roll over, special rules for calculating the amount of the tax on the payment might apply to you. For more information, see IRS Publication 575, Pension and Annuity Income.

If you roll over your payment to a Roth IRA

After 2009, you can roll over a payment from the Plan to a Roth IRA. If you roll over the payment to a Roth IRA, a special rule applies under which the amount of the payment rolled over (reduced by any after-tax amounts) will be taxed. However, the 10% additional income tax on early distributions will not apply (unless you take the amount rolled over out of the Roth IRA within 5 years, counting from January 1 of the year of the rollover). For payments from the Plan during 2010 that are rolled over to a Roth IRA, the taxable amount can be spread over a 2-year period starting in 2011.

If you roll over the payment to a Roth IRA, later payments from the Roth IRA that are qualified distributions will not be taxed (including earnings after the rollover). A qualified distribution from a Roth IRA is a payment made after you are age 59 ½ (or after your death or disability, or as a qualified first-time homebuyer distribution of up to \$10,000) and after you have had a Roth IRA for at least 5 years. In applying this 5-year rule, you count from January 1 of the year for which your first contribution was made to a Roth IRA. Payments from the Roth IRA that are not qualified distributions will be taxed to the extent of earnings after the rollover, including the 10% additional income tax on early distributions (unless an exception applies). You do not have to take required minimum distributions from a Roth IRA during your lifetime. For more information, see IRS Publication 590, Individual Retirement Arrangements (IRAs). You cannot roll over a payment from the Plan to a designated Roth account in an employer plan.

If you are not a plan member

Payments after death of the member. If you receive a distribution after the member's death that you do not roll over, the distribution will generally be taxed in the same manner described elsewhere in this notice. However, the 10% additional income tax on early distributions and the special rules for public safety officers do not apply, and the special rule described under the section "If you were born on or before January 1, 1936" applies only if the member was born on or before January 1, 1936.

If you are a surviving spouse. If you receive a payment from the Plan as the surviving spouse of a deceased member, you have the same rollover options that the member would have had, as described elsewhere in this notice. In addition, if you choose to do a rollover to an IRA, you may treat the IRA as your own or as an inherited IRA.

An IRA you treat as your own is treated like any other IRA of yours, so that payments made to you before you are age 59 ½ will be subject to the 10% additional income tax on early distributions (unless an exception applies) and required minimum distributions from your IRA do not have to start until after you are age 70 ½.

If you treat the IRA as an inherited IRA, payments from the IRA will not be subject to the 10% additional income tax on early distributions. However, if the member had started taking required minimum distributions, you will have to receive required minimum distributions from the inherited IRA. If the member had not started taking required minimum distributions from the Plan, you will not have to start receiving required minimum distributions from the inherited IRA until the year the member would have been age 70 ½.

If you are a surviving beneficiary other than a spouse. If you receive a payment from the Plan because of the member's death and you are a designated beneficiary other than a surviving spouse, the only rollover option you have is to do a direct rollover to an inherited IRA. Payments from the inherited IRA will not be subject to the 10% additional income tax on early distributions. You will have to receive required minimum distributions from the inherited IRA.

Payments under an approved domestic relations order. If you are the spouse or former spouse of the member who receives a payment from the Plan under an approved domestic relations order (QDRO), you generally have the same options the member would have (for example, you may roll over the payment to your own IRA or an eligible employer plan that will accept it). Payments under the QDRO will not be subject to the 10% additional income tax on early distributions.

If you are a nonresident alien

If you are a nonresident alien and you do not do a direct rollover to a U.S. IRA or U.S. employer plan, instead of withholding 20%, the Plan is generally required to withhold 30% of the payment for federal income taxes. If the amount withheld exceeds the amount of tax you owe (as may happen if you do a 60-day rollover), you may request an income tax refund by filing Form 1040NR and attaching your Form 1042-S. See Form W-8BEN for claiming that you are entitled to a reduced rate of withholding under an income tax treaty. For more information, see also IRS Publication 519, U.S. Tax Guide for Aliens, and IRS Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities.

Other special rules

If a payment is one in a series of payments for less than 10 years, your choice whether to make a direct rollover will apply to all later payments in the series (unless you make a different choice for later payments).

If your payments for the year are less than \$200, the Plan is not required to allow you to do a direct rollover and is not required to withhold for federal income taxes. However, you may do a 60-day rollover.

Unless you elect otherwise, a mandatory cashout of more than \$1,000 will be directly rolled over to an IRA chosen by the PF or MPPT. A mandatory cashout is a payment from a plan to a member made before age 62 (or normal retirement age, if later) and without the member's first making a request for the payment.

You may have special rollover rights if you recently served in the U.S. Armed Forces. For more information, see IRS Publication 3, Armed Forces' Tax Guide.

For More Information

You may wish to consult with the PF or MPPT or a professional tax advisor before taking a payment from the Plan. Also, you can find more detailed information on the federal tax treatment of payments from employer plans in: IRS Publication 575, Pension and Annuity Income; IRS Publication 590, Individual Retirement Arrangements (IRAs); and IRS Publication 571, Tax-Sheltered Annuity Plans (403(b) Plans). See IRS Form 5329 for more information on the additional 10% tax. These publications are available from a local IRS office, on the web at www.irs.gov, or by calling 1-800-TAX-FORM (1-800-829-3676).

**LAKE COUNTY N.E.C.A. – I.B.E.W.
LOCAL 697 BENEFIT FUNDS
7200 Mississippi Street, Suite 300
Merrillville, IN 46410
219-845-4433**

APPLICATION FOR PLAN P BENEFITS

Name: _____ Soc. Sec. No.: _____

Address: _____
(Street) (City) (State) (Zip)

Telephone: () _____ Date of Birth: _____

Termination date from Last Employer was (will be): _____

Current Marital Status: _____ Married _____ Single _____ Divorced _____ Widowed _____

I hereby apply for the type of benefit checked below: (check only one)

Normal Retirement (65 years & over) _____ Early Retirement (under 65 years of age) _____

I hereby request Plan P Retirement Benefits to be effective: _____
Date

SPOUSE INFORMATION:

Name of Spouse: _____

Soc. Sec. No.: _____ Date of Birth: _____

I understand that:

1. Plan P benefits may only be used to offset any required self-payments for retiree benefits under the Lake County I.B.E.W. – NECA Health and Benefits Plan.
2. The monthly Plan P benefit amount listed above was calculated based upon my age and the number of Health and Welfare Plan P credits I have earned at the time of retirement.
3. Should I pass away, my monthly Plan P benefit shall automatically be applied to any self-payments for continued coverage for my spouse listed on this application.

**LAKE COUNTY N.E.C.A. – I.B.E.W.
LOCAL 697 BENEFIT FUNDS
7200 Mississippi Street, Suite 300
Merrillville, IN 46410
219-845-4433**

APPLICATION FOR PLAN P BENEFITS

4. If my application is declined, or if I believe that I have been denied benefits provided under the Plan, I can avail myself of the right to appeal that determination.
5. My Plan P benefit will be suspended for any month that I work as a building trades craftsman or in construction. Further, I acknowledge that should I return to work within the aforementioned industry, that:
- I must notify the Fund Office within 15 days of such employment, and
 - I must repay any credit I received for said coverage while I was employed.
 - Any additional Health and Welfare Plan P credits will be recalculated in accordance to the provisions of the Lake County Indiana I.B.E.W. – NECA Health and Benefit Plan P Fund.

I have read and understand all of the above and have received another copy of the Lake County Indiana I.B.E.W. – NECA Health and Benefit Plan P Fund Summary Plan Description. I hereby submit my application for my monthly Plan P benefits.

Signature of Participant

Date

Fund Office Use

Earned Plan P Credits: _____

Calculated monthly Plan P benefit: _____