

**GRAPHIC ARTS INDUSTRY JOINT PENSION TRUST**  
**25 LOUISIANA AVENUE NW, • WASHINGTON, D.C. 20001 • (202) 508-6670**

**PENSION APPLICATION – 577M (49B), Local 582M (348B)**

Instructions: Please read this application and election form carefully and *print* all requested information. Mail the completed application to the Fund office. No pension benefits can be issued until after this application and all requested documents have been received. If you have any questions regarding this application, contact the Fund office.

In accordance with the provisions of the Graphic Arts Industry Joint Pension Trust, I hereby apply for a retirement pension, for which I believe I have met the eligibility requirements (or shall have satisfied such requirements as of my contemplated retirement date). I submit this application for the purpose of obtaining such pension, and hereby certify that all the information contained on this application is true and correct to the best of my knowledge and belief.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Do Not Print)

Application for:     Normal Retirement (Age 65 or over)     Deferred Vested Retirement  
                           Early Retirement (Age 55 to 65)             Disability Pension

Name \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_    Male   
(First)                            (Middle)                            (Last)                            (Soc. Sec. No.)                            Female

Address \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Number and Street)                            (City, State and Zip Code)                            (Telephone #)

Date of Birth\* \_\_\_\_\_    Place of Birth \_\_\_\_\_    Local Union No. \_\_\_\_\_

\*Proof of Age Must Be Submitted With Application

Name of Last Employer \_\_\_\_\_

Last Day Worked (or Expected to Work) \_\_\_\_\_

Retirement Date For Commencement of Benefits \_\_\_\_\_

Note: Early Retirement benefits cannot commence earlier than the first day of the month following the filing of this application with the Fund office, if otherwise eligible. If eligible, a Disability Pension cannot commence earlier than the effective date of a Social Security Disability (SSDI) benefit (retroactive no more than 24 months from the filing of this application) or, if no SSDI award, the first of the month after filing this application.

Married  Yes     No

Name of Spouse \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Spouse's Date of Birth \_\_\_\_\_ Date of Marriage \_\_\_\_\_

**LOCAL UNION CERTIFICATION**

(To Be Completed By Local Union)

We certify that the following information is part of the official records of our Local with reference to the above-named applicant.

1. Applicant has held membership in GCC/IBT as follows: From \_\_\_\_\_ to \_\_\_\_\_ Local # \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_ Local # \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_ Local # \_\_\_\_\_

2. If not a union member, date of first collective bargaining agreement with employer \_\_\_\_\_

3. Applicant's date of birth according to Local's records \_\_\_\_\_

4. Date applicant will cease (or has ceased) all work in the industry \_\_\_\_\_

GCC/IBT Local No. \_\_\_\_\_ Date \_\_\_\_\_ Signature of President or Principal Officer \_\_\_\_\_

Title \_\_\_\_\_

(The Signature must be an original)

If you are applying for a *Disability Retirement* pension, complete the following and submit a copy of your Social Security Administration *Certificate of Disability Award* with this application. If your application for Social Security disability benefits is pending or has been denied and you are appealing, please submit status of your application below or attach a separate page.

Date Disability Incurred \_\_\_\_\_ Effective Date of Social Security Disability \_\_\_\_\_

Nature of Disability \_\_\_\_\_

Status of Application \_\_\_\_\_

**EMPLOYMENT HISTORY**

List covered employment starting with your most recent employer. List as many as you can remember. If you do not know the exact dates, give approximate dates. Attach additional sheets if necessary.

Name of Company	City	Dates of Employment		Local Union Number
		FROM Month-Year	TO Month-Year	

**INSTRUCTIONS FOR FURNISHING PROOF OF AGE OF APPLICATION  
(AND SPOUSE WHERE APPLICABLE)**

One or more of the proofs of age listed below must be furnished. Proof as high on the list as possible should be submitted if obtainable. A birth certificate, for example, is more acceptable than a passport or a marriage record. Legible copies of original documents will be acceptable, and all original documents will be returned. An applicant whose name is different from the name on the birth certificate or other documentation, should submit proof of the name change, such as a marriage certificate.

- |  |   |
|--|---|
| 1. Birth Certificate   | 11. Immigration Papers  |
| 2. Baptismal Certificate or statement of Date of Birth as shown by church records certified by custodian of such records | 12. Record of military service  |
| 3. Notification of registration of birth in public registry of vital statistic   | 13. Passport  |
| 4. Hospital records of Date of Birth, certified by custodian of such records   | 14. School Record, certified by custodian of such records   |
| 5. Certificate of Social Security Award  | 15. Vaccination Record, certified by custodian of such records  |
| 6. Foreign church or government records  | 16. Insurance Policy showing Date of Birth or age   |
| 7. Signed statement of Physician or Midwife in attendance, of Date of Birth shown on their records                       | 17. Labor Union or Lodge records, certified by custodian of such records  |
| 8. Census Records  | 18. Marriage Records showing Date of Birth or age (Application for Marriage License or church record) certified by custodian of such records          |
| 9. Family Bible or other record, certified by Notary Public  | 19. Other records, such as signed statement from persons having knowledge of Date of Birth; voting records; poll tax Receipts; driver's license; etc. |
| 10. Naturalization Record  |   |

## **RIGHT TO DEFER YOUR DISTRIBUTION**

You have a right to defer receiving a distribution from the Plan until a later date. Please read the enclosed notice entitled "Right to Defer Pension Benefits and Consequences of Not Deferring" before you make your election to take a pension benefit.

## **RELATIVE VALUE OF BENEFIT PAYMENT OPTIONS**

Please read the enclosed disclosure on Relative Value of Benefit Payment Options before making your election of a form of benefit payment. This disclosure provides important information on how to compare the forms of payment offered under the Plan.

## **ELECTION OF FORM OF PENSION PAYMENTS**

### **INSTRUCTIONS**

**(Please read carefully - For additional information, refer to the descriptions of your options in the Summary Plan Description, Schedule I that applies to you.)**

#### **Married Retirees**

**50% Spouse Joint and Survivor Annuity:** If you are married when pension benefits begin and you and your spouse do not reject in writing the 50% Spouse Joint and Survivor Annuity or the 75% Spouse Joint and Survivor Annuity form of payment, you will automatically receive a monthly benefit under the 50% Spouse Joint and Survivor Annuity form which pays you a benefit for life. Your surviving spouse will continue to receive an amount equal to one-half of your monthly benefit for life upon your death. The amount of your pension will not increase if your spouse dies before you die.

You and your spouse can reject this form of payment and elect the Five Year Certain Annuity. This rejection must be in writing and must be signed by both you and your spouse no earlier than 180 days or less than 30 days before your pension benefit effective date. Your spouse must sign in the presence of a notary public. Your spouse must acknowledge the effect of rejecting this form of payment. You will receive a waiver form to complete for this purpose.

**75% Spouse Joint and Survivor Annuity:** This option is available for benefits, except a Disability Pension, that commence on and after July 1, 2008. Instead of the 50% Spouse Joint and Survivor Annuity, you may elect to receive your pension as a 75% Spouse Joint and Survivor Annuity. Unlike the 50% Spouse Joint and Survivor Annuity, which is automatically the form of payment for a married participant, the 75% Spouse Joint and Survivor Annuity must be elected at the time you file your pension application. If you elect the 75% Spouse Joint and Survivor Annuity form of payment, you will receive monthly benefits during your lifetime, and after your death your spouse will receive a monthly benefit equal to 75% of your monthly benefits until your spouse's death.

**Note:** The Normal Retirement, Early Retirement, or Vested Pension Benefits paid under a 50% Spouse Joint and Survivor Annuity or 75% Spouse Joint and Survivor Annuity form of payment will generally provide a lower monthly payment to you during your lifetime than that paid under the normal form of payment for unmarried Participants. The choice is between more money during your lifetime with no lifetime survivor's benefit for your surviving spouse versus less money in your lifetime with a lifetime benefit for your surviving spouse. The total amount paid under any choice is calculated so as to be approximately equal.

If you choose a Five Year Certain Annuity form of payment, then pension payments from the Plan may stop upon your death so that your spouse will not receive lifetime monthly payments after your death. A waiver may be revoked at any time before pension benefit payments begin. After pension benefits begin, you cannot change the form of the pension benefit payment.

**Unmarried Retirees:** If you are not married when Normal Retirement, Early Retirement or Vested Pension benefits begin your pension shall be paid under the Five Year Certain Annuity.

**Disability Pensions:** If you're eligible for a Disability Pension then you will choose between a Single Life Annuity or a 50% Spouse Joint and Survivor Annuity. If you choose a Single Life Annuity form of payment, then pension payments from the Plan will stop upon your death so that your spouse will receive no payments after your death.

**Changing your Choice:** The election or revocation of a form of pension payment may not be made or altered after the first pension payment.

**ELECTION OF FORM OF BENEFIT PAYMENT**

Check one of the boxes below. If you are not married you must check box 3 unless you're applying for a Disability Pension, then check box 4.

- 1. I wish to receive my pension in the form of a 50% Spouse Joint and Survivor Annuity.  
This option will provide me with a lifetime monthly pension, and upon my death my surviving spouse will continue to receive an amount equal to one-half of my monthly pension. Please attach a copy of your marriage certificate and your spouse's proof of age.
- 2. I wish to receive my pension in the form of a 75% Spouse Joint and Survivor Annuity  
This option will provide me with a lifetime monthly pension, and upon my death my surviving spouse will continue to receive an amount equal to 75% of my monthly pension. Please attach a copy of your marriage certificate and your spouse's proof of age. (This option is not available for a Disability Pension.)
- 3. I wish to receive my pension in the form of a Five Year Certain Annuity.  
This option will provide me with a lifetime monthly pension. However, under this option the Plan must make a total of 60 monthly payments (i.e. five years) to you, or if you die before 60 payments are made, to your beneficiary until a total of 60 monthly payments are paid. If you are married and elect this option, then you will receive a waiver form that must be signed by you and also by your spouse in front of a notary public.
- 4. I wish to receive my pension in the form of a Single Life Annuity. (Disability Pensions ONLY)  
This option will provide me with a lifetime monthly pension with no benefits payable after my death. If you are married and elect this option, then you will receive a waiver form to reject the 50% Spouse Joint and Survivor Annuity that must be signed by you and also by your spouse in front of a notary public, within 180 days prior to your pension benefit effective date.

**BENEFICIARY INFORMATION**

(Complete this election if you checked box 3, above)

FIVE YEAR CERTAIN ANNUITY- I hereby designate the following as my beneficiaries to receive the balance of payments due me, if any, payable under the Graphic Arts Industry Joint Pension Trust.

Name of Primary Beneficiary \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Address \_\_\_\_\_

Relationship \_\_\_\_\_

Name of Contingent Beneficiary \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Address \_\_\_\_\_

Relationship \_\_\_\_\_

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Participant's Full Name (Print)

RELATIVE VALUE OF BENEFIT PAYMENT OPTIONS  
Local 577M (Former Local 49B), Local 582M (Former Local 348B)

Our Plan offers optional forms of payment to all eligible participants in addition to the normal form of payment available under our Plan. In most cases, these optional forms of payment for a participant retiring at age 55, 60, or 65 have relatively the same value as the normal form of payment with one exception. For a disabled married participant retiring at ages 55 or 60, the present value of the Single Life Annuity is more than 105% of the present value of the 50% Spouse Joint and Survivor Annuity.

The remainder of this notice explains what this means, how this was determined, and why you need to know this.

### What Is Relative Value?

Relative value means the actuarial present value of the optional form of payment compared to the actuarial present value of the normal form of payment under a plan. The relative value is calculated by converting the value of each generally available form of payment and expressing the value as either approximately the same or as a percentage of the normal forms of payment under our Plan. Actuarial values of benefits are determined using:

- Mortality assumptions, which are based on standardized tables developed by actuarial organizations and life insurance companies. Information is analyzed about large groups of people to project the rates at which groups of individuals at different ages are expected to die. These statistical mortality projections are used to develop “average life expectancies.”
- Interest assumptions, which estimate the likely investment earnings, over time, of the money put aside to pay benefits. This is important in the determination of actuarial value because investment earnings provide some of the money used to pay benefits.

### What Are The Relative Values Under Our Plan?

Under our Plan, the normal forms of payment are the:

- 50% Spouse Joint and Survivor Annuity for married participants,
- Five Year Certain and Life Annuity for single participants eligible for non-disability pensions, and
- Single Life Annuity for single participants eligible for disability pensions.

The optional forms of payment for married participants are the:

- 75% Spouse Joint and Survivor Annuity for participants eligible for non-disability pensions,
- Five Year Certain and Life Annuity for participants eligible for non-disability pensions, and
- Single Life Annuity for participants eligible for disability pensions.

All optional forms of payment under our Plan have approximately the same actuarial present value as the normal form, except as indicated below. Please refer to the description on the application under Election of Form of Pension Payments or to your Summary Plan Description if you would like additional information on your payment options. Also included in this packet is the document entitled "Estimate of Pension Benefits" which provides an estimated amount of the monthly benefit payable to you at normal retirement age in the form of a Five Year Certain Annuity.

### How Was This Determined?

The valuation and reporting methodologies used were based on IRS regulations, which can be found in Treasury Regulations Section 1.417(a)(3)-1. These methodologies are fairly technical and can be difficult to understand. However, IRS regulations require that we provide this information to you.

The values were calculated, for comparison purposes, assuming the Fund would earn 7.00% interest and that, on average, non-disabled participants and spouses would live as long as predicted under the 1971 Group Annuity mortality table (the 1983 Railroad Retirement Board mortality table for disabled participants). We also assumed for married participants that the spouse is the same age as the participant.

### What Does This Mean To Me?

As stated earlier, basically, this means the generally available forms of payment have relatively the same value except as indicated in the table below. However, it is important that you realize that this is not a guarantee or even a prediction of what you will actually be eligible to receive when you retire. The actual value of the different forms of payment will vary depending on how long the individual and spouse or beneficiary in fact live and on their ages when payments start. The calculation of the Spouse Joint and Survivor Annuities depends on the actual age of your spouse. For example, annuity payments will be significantly lower if your spouse is significantly younger than you.

Upon your written request, you will be provided with a similar comparison, based on your own age and estimated benefits, between your annuity form of payment and the other forms of payment for which you are eligible. You may want to consult a financial advisor when you are nearing retirement to determine what is right for you.

### Ratio of the Present Value of the Optional Form of Payment to the Normal Form of Payment for *Disabled Married Participants*:

Retirement Age	Ratio
55	111%
60	110%

All other optional forms of payment have relatively the same value as the normal form of payment.