

MASON TENDERS' DISTRICT COUNCIL

PENSION FUND

520 Eighth Avenue, Suite 600
New York, NY 10018-4196
(212) 452-9700

Dear Participant:

Enclosed is a Pension Application. Please follow the instructions set forth in these materials in completing the Application.

INSTRUCTIONS:

1. Please read each question carefully.
2. Print all information.
3. Be sure to sign and date the Application.
4. Be sure to answer all items.
5. Mail the completed application to the Fund Office with proof of your age, and a copy of your Social Security card.

PROOF OF AGE OF APPLICANT FOR RETIREMENT

In order to be eligible for retirement benefits, you are required to produce proof of your age. The following list gives examples of documents that may serve as acceptable proof of your age. Submit a copy of any ONE of the items listed below. ALL documents must be copies unless otherwise noted.

1. Birth Certificate.
2. Baptismal certificate or church records of date of birth, certified by the custodian of such records.
3. Notification of registration of birth in a public registry of vital statistics.
4. Certification of record of age by the U.S. Census Bureau.
5. Hospital birth record, certified by the custodian of such records.
6. Passport (copy not permitted; you must submit original).
7. Naturalization record (copy not permitted; you must submit original).
8. Immigration papers (copy not permitted; you must submit original).
9. Certification by the Social Security Administration.
10. Signed (and notarized) statement as to date of birth by the physician or midwife in attendance at birth.

In addition, if you are married, you must also submit a marriage certificate, birth certificate (or other proof of age) for your spouse and a copy of his/her Social Security card.

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PENSION APPLICATION

PERSONAL DATA

1. Name: _____
Last First Middle

2. Address _____

City State Zip Code

Home Phone Number : (____) _____

3. Social Security No. _____ Sex: Male ____ Female ____

4. Date of Birth _____ (Attach proof of age. See instructions attached)

5. Marital Status (Check one of the following)

___ SINGLE _____ MARRIED
___ DIVORCED (Attach divorce papers/decrees) ___ WIDOW (Attach spouse's death certificate)
___ LEGALLY SEPARATED (Attach court papers/decrees)

(a) Name of Spouse _____ Social Security No. _____

(b) Date of Spouse's Birth _____ (Attach proof of age.)

6. (a) Last date you worked or intend to work _____
Mo. / Day / Yr.

(b) Name of current or last employer _____

7. Are you or were you a member of any other LIUNA Local other than Local 79 or Local 78? If yes, please list them here: _____

8. **Type of Retirement Benefit you are applying for (check one)**

_____ **Normal Pension** - Reached Normal Retirement Date (age 65 and 5 years of Vesting Service).

_____ **Early Retirement Pension** - At least age 55 with 12 years of Vesting Service.

_____ **80 & OUT Service Pension** - Age plus Vesting Service equals 80 or more.

_____ **Disability Pension** - At least 8 years of Vesting Service and a Social Security Disability Award

_____ **Vested Pension** – Not working for a contributing employer and reached Normal Retirement Date (age 65 and 5 years of Vesting Service).

9. Date you wish to start to receive your benefit: Month _____ Year _____

10. My Signature Below Signifies that:

I hereby apply for a pension from the Mason Tenders' District Council Pension Fund. I certify that all statements made in this application are true to the best of my knowledge and belief.

I understand that a false statement may disqualify me for pension benefits.

I understand that if, after I retire, I return to covered employment and work 40 or more hours in any given month, my monthly pension checks may be suspended for at least the period I continue that work. I agree to notify the Fund Office in writing immediately upon my return to covered employment and to supply whatever information the Fund Office requests to determine whether suspension is warranted.

Signature

Date

YOUR PENSION APPLICATION WILL BE PROCESSED AS PROMPTLY AS POSSIBLE. YOU WILL BE CONTACTED IF FURTHER INFORMATION OR PROOF IS REQUIRED. YOU WILL BE NOTIFIED IN WRITING OF THE AMOUNT OF YOUR VARIOUS PAYMENT OPTIONS (IF APPLICABLE) SO THAT YOU MAY CHOOSE ONE.

Form **W-9**
(Rev. October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type
See Specific
Instructions on page 2.

Name (as shown on your income tax return)	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶	<input type="checkbox"/> Exempt payee
<input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	
List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number
or
Employer identification number

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Penalties * * * *

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

**FINANCIAL EFFECT OF DEFERRING
COMMENCEMENT OF BENEFIT PAYMENTS**

This notice explains how the amount of your pension payments may be affected if you wait until a later date to start your benefits.

If you are applying for an Early Retirement Pension, your benefit will be reduced due to the fact that your pension is being paid prior to normal retirement age (generally, age 65) and therefore is being paid over a longer period of time. The monthly amount of the Early Retirement Pension is a percentage of the monthly amount that you would receive if your pension were paid to you in the form of a Single Life Annuity effective at age 65. The reduction is based on the number of years and months that your pension starts before age 65.

The chart below lists the percentage of the Single Life Annuity that you will receive if you collect it between the ages of 55 through 64. Accordingly, by starting your pension earlier, you give up the actuarial increase in your benefit. If you choose to delay payment of your pension to a later date (but still prior to age 65), the amount of the reduction will be less, based upon your age at the time you begin to receive your pension. If you wait to begin receiving your pension at age 65, your benefit amount will not be reduced. Please refer to pages 11-12 of the Fund’s Summary Plan Description (“SPD”) for an explanation of the determination of the amount of the Early Retirement Pension.

Your Age	Percentage of Single Life Annuity You Will Receive
64	93.33%
63	86.67
62	80.00
61	73.54
60	67.07
59	60.61
58	54.14
57	50.09
56	46.43
55	43.12

If you decide to delay receiving your pension until you are older than age 65, your “normal retirement” monthly benefit will be increased to take into account that your life expectancy is less than it was at age 65, provided you are not working in disqualifying employment. If you are working in disqualifying employment, your benefits will be suspended, but you may accrue additional benefits while you are working. Please refer to page 14 of the SPD for an explanation of this increase and to page 34 of the SPD for an explanation of disqualifying employment.

The Plan provides two options for this delayed retirement adjustment:

- A lump sum consisting of retroactive payments for each month you do not work in disqualifying employment after you reach age 65 until the effective date of your pension, plus interest; or
- Monthly benefits actuarially increased for each month after age 65 that you are not working in disqualifying employment. The actuarial increase is 1% for each month by which you are older than age 65 and 1.5% for each month by which you are older than age 70.

However, please note you must begin receiving your pension by April 1 of the calendar year following the year in which you reach age 70 ½.

Please also note that the information provided in this notice does not reflect any changes to the Plan's rules. Rather, it is provided to assist you in determining when you want your benefits to begin.

If you have any questions about your pension benefit or this notice, please contact the Fund Office.