

**Millwrights' Local No. 1102
Supplemental Pension Fund**

Millwrights' Local No. 1102
Supplemental Pension Fund
6525 Centurion Drive
Lansing, MI 48917
Phone: (517) 321-7502

Hardship Distribution Application

Form Instructions

Please print using blue or black ink. Return the original form to the address above (it cannot be accepted by fax). Be sure to include all proper documentation and sign the affidavit on page 3 of the form. You are limited to two (2) hardship distributions in a calendar year.

**Without the required signatures, the form will be returned to you, unprocessed.
The Hardship Program expires on December 31, 2020.**

Hardship Distribution Limitations

If you are eligible for a loan from the Fund, you must apply for that loan before you apply for a Hardship Distribution. You may only apply for two (2) Hardship Distributions in a calendar year. Your total Hardship Distributions are limited to the lesser of one half (1/2) of your vested Account Balance or a lifetime Fifty Thousand Dollars (\$50,000) maximum. The lifetime maximum amount that can be distributed under the Hardship Distribution Program includes any previous defaulted loans, prior hardship distributions, tax withholdings, and any current loan balance, and late loan fees.

You may collect a portion of your vested Fund account balance under limited, financial hardship circumstances. Specifically, if you have terminated employment with all covered employers for at least 45 days, but including one complete calendar month, and are experiencing "financial hardship", as defined by the Program, you're eligible for a Hardship Distribution under certain, limited circumstances.

About You

Former Employer: _____

Last Date of Employment: _____
(Must be at least two (2) calendar months before the date of this Application)

Name: _____ Date of Birth: _____

Social Security Number: _____ Phone Number: _____

Your Address: _____
Street City State Zip

Marital Status: _____
Never Married (sign Affidavit Declaring Marital Status section)
Widowed (send copy of Death Certificate)
Divorced _____ times. (If ever, send divorce decree)
Married _____ times. (Attach copy of marriage certificate or license; spouse must sign spousal consent section)

Hardship Reason

You may request a hardship distribution only for one of the following reasons. Please check the applicable reason and attach the required documentation, supporting the amount needed.

Reason for Distribution

Payment to prevent a mortgage foreclosure, default (land contract), or property tax forfeiture on your primary residence.
Payment of college tuition at an accredited college or similar secondary educational institution for your child.
Payment to prevent your eviction from an Apartment in which you reside.
Payment for unpaid child support payments.

Required Documentation

A copy of the foreclosure or default notice, (related to a mortgage, land contract or unpaid property taxes.)
A copy of the tuition statement
A copy of the eviction notice
A copy from the Friend of the Court or other Agency showing past due amounts/arrears.

Distribution amount – please check one of the following. See over for important tax information.

Maximum amount available. (The lesser of one-half (1/2) of your vested Fund Account Balance or Fifty Thousand Dollars \$50,000). **Please see above Hardship Distribution Limitations.**

Specific dollar amount \$_____. This amount should be equal to the amount specified in the required documentation subject to the above rule. The Plan will withhold additional amounts to cover the appropriate federal taxes.

Please make my hardship distribution check payable to: **(CANNOT BE ISSUED TO PARTICIPANT)**

Person or Entity: _____

Address: _____

Account Number, if applicable: _____

Federal Taxes – please check below if you want additional federal taxes withheld. See below for important tax information.

This payment is eligible for rollover into tax-qualified plans. Therefore, the Millwrights Local 1102 Supplemental Pension Fund is required by the IRS to withhold federal taxes from your Hardship Distribution. You may be taxed by the IRS for the distribution. The Plan will automatically withhold **20%** of the amount subject to the distribution (the sum of the amount needed to resolve the financial hardship and pay required federal income tax holding) and **4.25%** for the required State of Michigan income tax withholding. You may elect to have additional amounts be withheld for federal taxes.

Please withhold **an additional** _____ % for federal taxes. (Above the automatic 20%.)

Spousal Consent

The following must be signed and sealed by a Notary Public

I hereby certify that I am the spouse of the above-named Participant and that I consent to the Hardship Distribution from the Plan as indicated above. I also understand that by consenting to this distribution I waive all rights to any other payment I would have been entitled to upon the Participant's death, with respect to the amount subject to distribution described above. I further understand that this election is irrevocable.

X _____
Spouse's Signature

Date Signed

X _____
Notary Public

Date Signed

Participant's Affidavit Declaring Marital Status

The following must be signed and sealed by a Notary Public

I hereby attest and verify that I am not married, divorced or widowed at the present time and never have been.

X _____
Participant's Signature

Date Signed

X _____
Notary Public

Date Signed

Please read the following carefully

Hardship Distributions:

1. Monies requested must be used for the following purposes:
 - To prevent foreclosure or default on the Participant's primary residence (mortgage, land contract or property taxes)
 - To pay college tuition at an accredited college or similar secondary educational institution for your child
 - To prevent your eviction from an apartment in which you reside
 - To pay for unpaid child support payments.
2. The amount of the request must not be in excess of the amount required to satisfy the need, plus any taxes and penalties on the withdrawal.

The Plan reserves the right to request additional documents from the participant to prove the need for and/or the amount of the hardship distribution at any time.

Plan assets that are to be assigned to an Alternate Payee under a current or pending Qualified Domestic Relations Order (QDRO) cannot be requested as a hardship distribution from the Plan.

If you are MARRIED, your spouse must sign this form in front of a Notary Public
If you are SEPARATED, you are still considered Married under the Plan

Important Tax Information

Your Hardship Distribution will be reported by the Millwrights Local No. 1102 Pension Fund to the IRS on form 1099-R. The Participant is responsible for paying any federal, state, or local income taxes. The Plan will automatically withhold 20% of the total amount subject to the distribution (the sum of the amount needed to resolve the financial hardship and pay required federal income tax withholding). The Participant will be responsible for paying the remaining federal, state, or local income taxes. If the Participant is not 59 ½ at the time of the hardship distribution, the IRS will impose a 10% tax penalty for early withdrawal.

It is wise to seek professional tax advice before requesting a hardship distribution from the Millwrights Local 1102 Supplemental Pension Fund. The Fund and the Trustees cannot provide tax advice.

Authorization

I have read and understand the above form and affirm that the information included on the form and other information provided to the Plan is correct and complete. I also confirm that the amount requested does not exceed the amount needed to address the hardship.

X _____
Participant's Signature

Date Signed

Return Completed Application and Required Documents To:
Millwrights' Local No. 1102
Supplemental Pension Fund
6525 Centurion Drive
Lansing, MI 48917