

INSTRUCTIONS FOR REPORTING EMPLOYER CONTRIBUTIONS TO THE CENTRAL PENSION FUND

These instructions are designed to assist you in preparing your monthly remittance to the Central Pension Fund. A copy of these instructions should be kept in your company's office which is responsible for preparing the monthly report. Please follow them carefully and avoid errors, which may be costly to your company as well as the Fund.

Immediately upon receipt of the Central Pension Fund Remittance Form and Employer Report of Contributions form, and based on your records through the last payroll of each month, please complete and submit both report forms. Reports should be submitted as soon after the first of the month as possible (i.e., the report covering December should be submitted during the first 10 days of January). Reports may also be submitted to coincide with your company's pay period, such as weekly, bi-weekly, semi-monthly, etc., if this is more convenient. Just be sure to include the proper period start and end date on the forms.

The Employer Reports contain the following two parts which will be preprinted with information CPF currently has available:

- **1. REMITTANCE FORM:** This must be completed and returned with each monthly Report of Contributions.
- **2. EMPLOYER REPORT(S) OF CONTRIBUTIONS:** These must be completed and returned each month, along with a Remittance Form.

Samples of each of these reports, and instructions for completing and submitting them, are in Appendix I and Appendix II. Pre-printed forms are available using either the complete SSN or, for security purposes, the internal CPF ID and last 4 characters of the SSN. **The complete SSN or CPF ID is required on all reports**, whether they are pre-printed reports generated by CPF or reports developed by your company.

If you plan to submit a company generated report or spreadsheet, the data must still meet all the requirements below. The instructions for submitting a company generated report are included in this document under *Providing Your Own Report*.

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COMPLETING THE EMPLOYER REPORTS

1. REMITTANCE FORM (cover sheet)

- a. Enter the total contributions, and amount of the check submitted, in the appropriate columns for each fringe benefit/job classification type listed. Please note the following:
 - Contributions should **not** be sent for any fringe benefits not preprinted.
 - Separate checks must be submitted for each separate fringe type and each separate report.
 - The remittance form *must be submitted* with all contribution payments.
- b. Enter the total of all checks, for a specific report, in the total box at the bottom of the form.

2. EMPLOYER REPORT OF CONTRIBUTIONS

You will receive a separate page for each different fringe and/or job classification (rate).

TOP of form:

- This page contains information currently on file at CPF pertaining to this specific contract/participating agreement, for this specific employer account.
- b. If any information contained on this page is incorrect, you should correct it and attach the appropriate documents supporting the change.
- c. Data descriptions and definitions for purposes of reporting:

<u>Employer Account</u> – The identification number and name associated with this specific employer and rate agreement.

Work Period Covered - Begin and end dates of the covered work period.

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- c. Data descriptions and definitions (continued):
 - <u>Job Location</u> The specific location, if applicable, where the job is being performed.
 - <u>Local Union</u> The local union with which this agreement exists.
 - <u>Fringe Type</u> Each fringe benefit required to be reported, as specified in the contract/participating agreement, will be listed on a separate form.
 - <u>Job Class</u> Class or classes of employees covered under this specific rate.
 - <u>Unit Type</u> In most cases this will be HOURS, however, there are agreements that have been based on units of work other than hours (such as weeks, months, shifts, etc.) and that will be reflected here.
 - <u>Hours Per Unit</u> Again, in all cases where the unit type is HOURS, this will be "1". For other unit types, the number of hours per unit, as specified in the agreement, will be reflected here (i.e. SHIFT = 7.5 hours, WEEK = 40 hours).

Rate Basis:

Rate Per Unit – Each fringe benefit can have one or more rates per unit. The rate may be based on an individual job class or one rate may cover all job classes. Some agreements will call for a base rate for regular hours and up to two overtime rates. These overtime rates can vary from one agreement to the next, such as time-and-a-half and double-time rates in one agreement and double-time and triple-time rates in another, and are therefore just referred to as the 1st and 2nd overtime rates. The rate, which has been specified in the agreement, will be reflected in these columns and will be applied to hours that appear in the corresponding columns on the employer report. *Only* reports based on *Hours* at a *Rate Per Unit* may have overtime rates.

Min/Max Rate – Only contracts which are based on a Percent of Hourly Rate may have minimum and/or maximum rates which can be applied.

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c. Data descriptions and definitions (continued):

Percent (%) Gross/Hourly Rate - This column represents one or the other, not both. You will need to be aware of which yours is depending on the contract.

Percent (%) Gross – Contributions may also be based on a percentage of gross wages earned by the employee for the specified work period. The percentage of gross wages may be in addition to, or instead of, a rate per hour contribution.

Percent (%) Hourly Rate – Contributions may also be based on a percentage of each individual's hourly wage rate. The percentage of hourly rate may be in addition to, or instead of, a rate per hour contribution. If it is addition to a rate per hour contribution, both must be based on the same number of hours (no separate overtime hours/rates).

Flat Dollar – This is a rather non-standard contribution method but may be used when the agreement calls for a specific contribution to be made on behalf of each employee regardless of the number of hours worked.

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BOTTOM of form:

a. Cross out any employees for whom you are no longer reporting contributions. They will be removed permanently from your report. If it is just that there are no hours for this period, just put zero (0) in both the Total Hours and the Total Contributions.

- b. Enter the name and complete SSN for any employees you are reporting who do not appear on the list. SSN is absolutely required for all new employees.
- c. Data Requirements enter all *applicable* information next to each employee:
 - <u>Total</u> Hours **Required On All Reports** You must include **all** hours worked or paid regardless of how contributions are computed. This is always the **greater of** hours worked or contributory hours. (Federal Law requires that CPF grant vesting credit for all hours worked whether or not contributions are made for all hours.)
 - <u>Gross Wages or Hourly Rate</u> Gross Wages are required *only* if all, or a portion of, the employees' contributions are based on a percent of gross wages. Hourly Wage Rate is required *only* if the employees' contributions are based on a percent of the hourly wage rate. These are not interchangeable and you must report on the basis specified in your agreement.

<u>Contributory Hours</u> – Required only if:

- contributions are not based on hours worked (example: contributions are based on gross wages)
- hours on which contributions are due are limited by the terms of the agreement (example: not having to contribute on OT hours, contributions limited to 40 hours per week)

NOTE: Contributory hours cannot exceed hours worked.

<u>Units Worked</u> - If the rates in your participating agreement are based on some type of unit other than hours (i.e., week, shift, etc.), this field is required.

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- c. Data Requirements (continued)
 - <u>Total Contributions</u> **Required On All Reports** You must include total contributions due for this participant, under this agreement, for the covered work period.
- d. Correct errors that appear in the preprinted information and attach documentation to support the correction, as necessary. You may not make notes on your report to move an individual from one job class to another or from one account number to another. The individual must be scratched off the report where he does not belong and written in on the report where he does belong. The change should be corrected on the pre-printed form within two reporting cycles.

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CRITICAL REMINDERS

YOU MUST PROVIDE ALL OF THE INFORMATION ON WHICH YOUR CONTRIBUTIONS ARE BASED.

YOU MUST PROVIDE EITHER THE COMPLETE SOCIAL SECURITY NUMBER OR THE CPF ID ON EVERY REPORT, ON THE SAME PAGE AS HOURS AND CONTRIBUTIONS.

IF YOUR AGREEMENT SPECIFIES A PERCENT OF GROSS WAGES, YOU <u>MUST</u> REPORT GROSS WAGES FOR THE PERIOD ON EVERY REPORT, ON THE SAME PAGE AS HOURS AND CONTRIBUTIONS.

IF YOUR AGREEMENT SPECIFIES A PERCENT OF HOURLY WAGE RATE, YOU <u>MUST</u> REPORT EACH INDIVIDUAL'S HOURLY RATE ON EVERY REPORT, ON THE SAME PAGE AS HOURS AND CONTRIBUTIONS.

TOTAL HOURS ARE <u>ALWAYS</u> REQUIRED.

INTERPRETING CONTRACT LIMITS:

- If your contract calls for an annual limit of 2080 (or some other amount), this does not mean to annualize the hours (i.e., don't just report 173.3 per month). You should report all hours worked or paid (unless otherwise excluded by the agreement. CPF's computer system will cap the contributory hours, and stop accepting contributions, when the specified limit is reached.
- CPF cannot cap the hours when there is a weekly limit, such as 40, unless
 you report weekly. If these weekly reports are reported monthly, this report
 will typically have 160 hours per month for eight months of the year and
 200 hours per month for the other four months depending on how your
 pay periods fall during the reporting period.

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PROVIDING YOUR OWN REPORT

If you choose to provide your own report, via either computer printout, spreadsheet, or some other equivalent listing, you must still provide all required data specified above. The report **must** contain the following items:

- CPF Employer Account Number
- Work Period (both start and end dates)
- Participant Last Name, First Name and complete Social Security Number or CPF ID. (Reports without will not be processed.)
- Total Hours
- Gross Wages *or* Hourly Rate (if applicable). Must agree with the contract.
- Contributory Hours (if different from Total Hours).
- Total Contributions for each employee.
- Total Hours and Contributions at the bottom of each separate report.

Other considerations:

- If you are providing reports for multiple accounts, each account must begin on a *new page*, even if there are only one or two employees for each account.
- If you are providing reports for multiple work periods, each work period must begin on a *new page*, even if there are only one or two employees.
- If you are including multiple work periods on one report, either by listing multiple rows or multiple columns, you must include a subtotal of hours and contributions for each employee.
- If you are providing reports for multiple rates/job classifications, each rate/class must begin on a *new page*, *or be distinctly separated*, even if there are only one or two employees per rate. Each rate/class must also have a subtotal of hours and contributions for all employees in the group.

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MAILING REMITTANCE FORM AND REPORT OF CONTRIBUTIONS

Our remittance processing is located in Boston, Massachusetts. Please forward all CPF Employer Remittance Forms to the following address:

Central Pension Fund P.O. Box 418433 Boston, MA 02241-8433

Please note:

The above address can <u>only</u> accept mail forwarded by the **U.S. Postal Service**. If you must forward your remittance forms through another mail service (such as FedEx or UPS), which we discourage, it cannot be sent to the above address, but must be sent to the following address instead:

Bank of America Merrill Lynch Lockbox Services Lockbox 418433 MA5-527-02-07 2 William T Morrissey Blvd Dorchester, MA 02125

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RECENT CHANGES

1. Central Pension Fund has established a policy that prohibits our contribution processors from performing math calculations of any type in order to process a remittance report. This practice is not only prone to errors it is not acceptable by CPF's auditors. If your report does not contain all of the information necessary to calculate contributions based on the formula specified in the agreement, the report will be returned unprocessed. CPF will not add up any columns or rows of data in order to process a report.

2. Central Pension Fund no longer processes reports that do not include Social Security Numbers or the internal CPF ID for all employees. Providing just the last 4 characters of the SSN is *not acceptable*. Reports that do not include the **complete SSN** or **CPF ID** will be returned unprocessed.

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APPENDIX I: REMITTANCE FORM

CENTRAL PENSION FUND
INTERNATIONAL UNION OF OPERATING ENGINEERS
FMPI OYFR REPORT OF CONTRIBUTIONS
REMITTANCE FORM

WORK PERIOD COVERED
BEGINNING ENDING

EMPLOYER NAME & ADDRESS

MAIL 1 COPY OF THE REPORT, SUMMARY FAGE AND REMITTANCE FORM TO THE FOLLOWING ADDRESS: Central Pension Fund P.O. Box 418433

Boston, MA 02241-8433 NSA

CONTRACTRATE AGREEMENT INFORMATION	JOB LOCATION	
CONTRACTRAT	LOCAL UNION	

FLAT									
% GROSS/HR KAIE	%00 U	9600.0	0.00%	0.00%	0.00%	0.00%	%UU U	0.00%	0.00%
MINIMAX RATE									
\$ PER UNII									
HOURS PEK UNII									
UNIT									
JOB CLASS									
CHECK									\$ 0.00
TOTAL									\$ 0.00
FRINGE TYPE									снеск (s) тотаL:
FRINGE									

We certify that this Remittance Form, and the accompanying Employer Report(s) of contributions, are true and complete reports of all contributions required to be paid under the applicable IUOE Local Union agreement, or other written obligation approved by the CPT Board of Trustees.

Authorized Signature of Employer

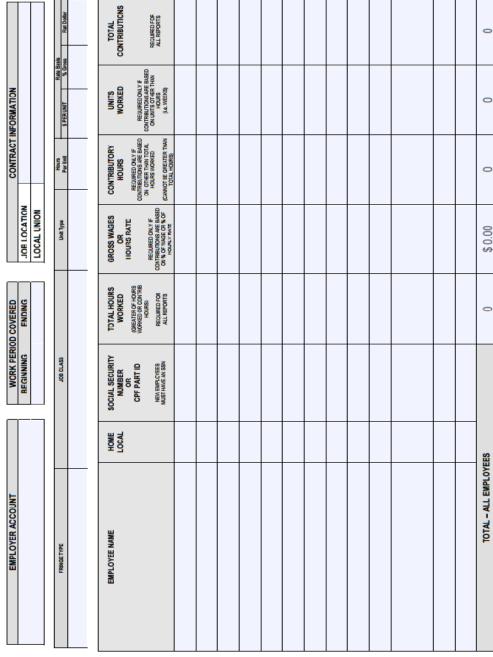
Note: Ary false statement or representation made in reporting on this form may subject you to prosecution under 18 U.S.C. § 1027, the penalty for which is a fine of \$10,000 or imprisonment of five years or both.

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APPENDIX II: EMPLOYER REPORT(S) OF CONTRIBUTIONS

CENTRAL PENSION FUND INTERNATIONAL UNION OF OPERATING ENGINEERS EMPLOYER REPORT OF CONTRIBUTIONS



Correspondent

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March 2017