

Yearly Filing Instructions for the Annual Statement of the Segregated Gift Annuity Fund

N.J.A.C. 11:4-8.6 requires that this statement shall be submitted to the Commissioner of Banking and Insurance within 120 days following the end of the year to which the statement applies and shall include the following:

1. A statement by a qualified actuary setting forth his/her opinion as to the adequacy of reserves or a certification from an officer of the organization, that the organization uses appropriate software, i.e. PG Calc, Crescendo, or similar, and has the technical expertise to calculate the required reserves.
2. Each special permit holder shall submit a copy of the workpapers used to calculate the required reserves. These workpapers, which are to support the total amount of annuity liability reported, are to be in such form and of such detail that calculation of the net present value of annuities can be verified.
3. A copy of the organizations' most recent independent audited financial statements.

The Annual Statement can be found in Excel format on the Department's web site at
http://www.state.nj.us/dobi/division_insurance/charitableann.htm

If you organization also files in New York the Department will accept of copy of the New York statement which shall also include the above 3 items.

The statement, workpapers and audit may be mailed or e-mailed to my attention at:

E-Mail: june.duggan@dobi.nj.gov

US Postal Service:

June Duggan
Department of Banking & Insurance
Office of Solvency Regulation
P.O. Box 325
Trenton, NJ 08625-0325

Overnight Service:

June Duggan
Department of Banking & Insurance
Office of Solvency Regulation
20 West State St., 8th Floor
Trenton, NJ 08608-1206

Year End	Statement Due
January	May 31
February	June 30
March	July 31
April	August 31
May	September 30
June	October 31

Year End	Statement Due
July	November 30
August	December 31
September	January 31
October	February 28
November	March 31
December	April 30

Instructions

for Completing the

Annual Statement
of the Segregated Gift Annuity Fund

for the State of New Jersey

General Instructions

One complete copy of the Annual Statement of the Segregated Gift Annuity Fund must be filed within one hundred twenty (120) days following the end of the reporting year.

The Annual Statement must be filed on a calendar year basis, unless the Commissioner has granted the Special Permit holder permission to file the statement on a fiscal year basis.

The Annual Statement must be filed whether annuities have been issued or not.

Special Permit holders may submit a computer print-out of the Statement pages or Schedules, however content may not be altered, and the print-out must agree exactly with the Statement pages or Schedules.

The name of the Special Permit holder must be printed at the top of all pages and schedules.

If no entries are to be made on a Schedule, write "None" across the Schedule and carry a "0" to the appropriate line.

A completed Annual Statement filing consists of: (1) the Annual Statement, (2) the most recent audited financial statement of the Special Permit holder or its parent organization and (3) a report identifying all annuities issued by the Special Permit holder. This report shall include, but not be limited to, name or identifying code for annuitant(s), age of annuitant(s), birthdate of annuitant(s), sex of annuitant(s), gift amount, gift date, annuity amount, mortality table, reserve percentage, reserve factor, reserve.

Email or mail the completed statement with all required attachments to:

June Duggan
Department of Banking and Insurance
Office of Solvency Regulation – 8th Floor

Mailing Address
P.O. Box 325
Trenton, NJ 08625-0325

Street Address
20 West State Street
Trenton, NJ 08625-0325

Questions regarding the statement can be addressed to:

June Duggan
Phone: (609) 292-5350 ext. 50326
E-Mail: june.duggan@dobi.state.nj.us
Fax: (609) 292-6765

JURAT

The jurat must be signed by at least two principal officers. All signatures must be original; photocopies are not acceptable.

Mailing Address:

Address where the Special Permit holder receives mail if other than the administrative office address.

Administrative Address:

Location of the main administrative office of the Special Permit holder.

Contact Person and Phone Number

E-mail address:

Person knowledgeable about the information contained in the Annual Statement. The phone number should include the area code and extension if applicable.

Officers, Directors or Trustees:

Show full names (initials not acceptable).

Registered Agent:

The Special Permit holder upon original registration or renewal with the New Jersey Department of Treasury designates a Registered Agent. The registered agent shall be an agent of the Special Permit holder, which has appointed the agent, upon whom process against the Special Permit holder may be served and who shall deliver to the Special Permit holder all process, notices or demands received by the registered agent as agent for the Special Permit holder.

Basis of Income Recognition: Cash or Accrual

If income recognition is on a cash basis, revenue is recorded in the period actually received. If income recognition is on an accrual basis, revenue is recorded in the period it is actually earned.

BALANCE SHEET

Assets must be segregated as separate and distinct funds, independent of all other funds of the special permit holder pursuant to N.J.S.A. 17B:17-13.1b:

- | | |
|----------|---|
| Line 1 – | Market value of bonds
Should agree with the total of Schedule A, Column 6. |
| Line 2 – | Market value of preferred stocks
Should agree with the total of Schedule B, Column 6. |
| Line 3 – | Market value of common stocks
Should agree with the total of Schedule C, Column 5. |
| Line 4 – | Market value of mutual funds
Should agree with the total of Schedule D, Column 5. |
| Line 5 – | Cash in office
Should agree with the total of Schedule E, Column 3. |
| Line 6 – | Other
Should agree with the total of Schedule F, Column 4. |

- Line 7 – **Gross interest due, and accrued**
Monies due and accrued to the Special Permit holder.
- Line 8 – **Total assets**
Sum of lines 1 through 7.
- Line 9 – **Net present value of annuities. Give tables and rates of interest.**
Identify mortality table and rates of interest used to calculate the net present value of all annuities issued by the Special Permit holder.
- Attach a report identifying all annuities issued by the Special Permit holder. This report shall include, but not be limited to, name or identifying code for annuitant(s), age of annuitant(s), birthdate of annuitant(s), sex of annuitant(s), gift amount, gift date, annuity amount, mortality table, reserve percentage, reserve factor, reserve.
- The total present value of annuities on the report should agree with Line 9.
- Line 10 – **Deduct net value of risks reinsured.**
To qualify as reinsurance the transaction must meet the definition contained in N.J.S.A. 17B:18-62, which states, in part: "Reinsurance is a contract under which an insurer (ceding) procures insurance from another insurer (assuming) to cover part or all of an insurance risk of the ceding insurer."
- Purchase of an annuity contract from an insurance company does not qualify as reinsurance. Please contact the Department for further guidance on accounting for these transactions (609 292 5427 ext. 50328).
- You may not take credit for reserves or for amounts due on paid or outstanding losses, for any reinsurance in force with companies not authorized to transact business in the State of New Jersey, unless such amounts are secured by a letter of credit or trust agreement in compliance with New Jersey Statutes and Regulations.
- Line 11 – **Net Reserve**
Sum of lines 9 and 10.
- Line 12 – **Annuity payment due and unpaid.**
Payment of annuity benefits due and unpaid at the end of the statement year.
- Line 13 – **All other liabilities.**
Itemize any other liabilities of the segregated gift annuity fund not already accounted for.
- Line 14 – **Total amount of all liabilities.**
Sum of lines 11 through 13.
- Line 15 – **Required surplus.**
The minimum required surplus of \$100,000 or 10% of reserves **whichever is greater** must be reported on this line.
- Line 16 – **Excess surplus.**
Any surplus in excess of the minimum required.
- Line 17 – **Total liabilities and surplus.**
Sum of lines 14 through 16. This total must equal page 6, line 8, Total Assets and page 7, line 13 Annuity Fund Balance at end of year.

STATEMENT OF CHANGES IN ANNUITY FUND

- Line 1 – **Gross amount of gifts received during the year conditioned upon annuity agreements.**
Report gross amount of the consideration received from annuitants for all annuity agreements issued during the year.
- Line 2 – **Investment Income.**
Report investment income received from all forms of investment.
- Line 2a. – **Bonds**
Should agree to total of Schedule A, column 7.
- Line 2b. – **Preferred Stocks**
Should agree to total of Schedule B, column 7.
- Line 2c. – **Common Stocks**
Should agree to total of Schedule C, column 6.
- Line 2d. – **Mutual Funds**
Should agree to total of Schedule D, column 6.
- Line 2e. – **Cash, Money Market, CD**
Should agree to total of Schedule E, column 4.
- Line 2e. – **All Other Assets**
Should agree to total of Schedule F, column 5.
- Line 3 – **Other income.**
Itemize any other income received not already accounted for. This could include transfers from the Special Permit holders other non-segregated bank and/or brokerage accounts
- Line 4 – **Gain on investments**
Line 4a – **Realized**
Report the excess of consideration received over the statement value for an asset sold or disposed of during the current year.
- Line 4b – **Unrealized**
Report the increase in market value of an asset during the year.
- Line 5 – **Total Income**
Sum of lines 1 through 4b.
- Line 6 – **Annuity payments to donors and others**
Total actual annuity benefits paid during the year according to the terms of the annuity agreements.
- Line 7 – **Other disbursements**
Itemize any other disbursements made from the segregated account.

- Line 8 – **Loss on investments**
Line 8a – **Realized**
Report the excess of statement value over the consideration received for an asset sold or disposed of during the current year.
- Line 8b – **Unrealized**
Report the decrease in market value of an asset during the year.
- Line 9 – **Total expense**
Sum of lines 6 through 8b.
- Line 10 – **Net change in annuity fund.**
Difference of line 9 from line 5.
- Line 11 – **Previous year annuity fund balance.**
The annuity fund balance as reported for the prior year.
- Line 12 – **Annuity fund balance at end of year.**
Sum of lines 10 and 11.

Exhibits

Reinsurance Recoverable on Paid and Unpaid Losses

If you have reported reinsurance on Page 6, Line 10 provide information regarding the reinsurer. Include the full name and address of the reinsurer, the amount of reinsurance recoverable on paid and unpaid losses for the year.

Exhibit of Number and Annual Payments of Annuities in Force and Reserves

- Column 1 **“Reserve”** – The amount reported for Column 1, End of Current Year, should agree with the amount reported at Page 6, Line 9.
- The reserves reported for the prior year should agree with the reserve amounts reported for the prior years’ statement.
- Column 2 **“At Beginning of Year – No”** – Report the number of annuity contracts outstanding at the beginning of the year.
- Column 3 **“At Beginning of Year – Pymt”** – Report the annualized amount of annuity payments payable under those contracts. Do not report the annuity considerations or reserve amounts in this column.
- Column 4 **“Written During Year – No”** – Report the number of annuity contracts written during the year.
- Column 5 **“Written During Year – Pymt”** – Report the annualized amount of annuity payments payable under those contracts. Do not report the annuity considerations or reserve amounts in this column.
- Column 6 **“Terminated During Year – No”** – Report the number of annuity contracts terminated by death of annuitants during the year.

Column 7	“Terminated During Year – Pymt” – Report the annualized amount of annuity payments payable under those contracts. Do not report the annuity considerations or reserve amounts in this column.
Column 8	“At End of Year – No” – Report the number of annuity contracts outstanding at the end of the year. Equals the sum of Columns 2 + 4 – 6
Column 9	“At End of Year – Pymt” – Report the annualized amount of annuity payments payable under those contracts at year-end. Do not report the annuity considerations or reserve amounts in this column. Equals the sum of Columns 3 + 5 – 7

Exhibit of Segregated Account by Jurisdiction

This exhibit is only to be completed for Special Permit holders that have answered “Yes” to question 11 on page 5.

Column 1	Line 5 – Jurisdiction Identify the Jurisdiction (i.e. California)
Column 2	Held for the Benefit of a Particular Jurisdictions Annuitants and Beneficiaries Line 1 – Assets : Report the portion of assets reported on Page 6, Line 8 which are to benefit annuitants and beneficiaries of a particular jurisdiction. Line 2 – Reserve : Report the portion of reserves reported on Page 6, Line 11 which are allocated to benefit annuitants and beneficiaries of a particular jurisdiction. Line 3 – Other : Report the portion of Page 6, Lines 12 and 13 which are allocated to benefit annuitants and beneficiaries of a particular jurisdiction. Line 4 – Surplus : Report the portion of Page 6, Lines 15 and 16 which are allocated to benefit annuitants and beneficiaries of a particular jurisdiction.
Column 3	Held for the Benefit of all Other Annuitants and Beneficiaries Line 1 – Assets : Report the portion of assets reported on Page 6, Line 8 which are to benefit all other annuitants and beneficiaries. Line 2 – Reserve : Report the portion of reserves reported on Page 6, Line 11 which are allocated for the benefit of all other annuitants and beneficiaries. Line 3 – Other : Report the portion of Page 6, Lines 12 and 13 which are allocated for the benefit of all other annuitants and beneficiaries. Line 4 – Surplus : Report the portion of Page 6, Lines 15 and 16 which are allocated for the benefit of all other annuitants and beneficiaries.
Column 4	Total Line 1 – Assets : Total columns 2 and 3. Line 2 – Reserve : Total columns 2 and 3. Line 3 – Other : Total columns 2 and 3. Line 4 – Surplus : Total columns 2 and 3.

SCHEDULES

SCHEDULE A - BONDS

Special Permit holders may attach a computer print-out of Schedule A, however, you may not alter the contents. The print-out must agree with the information required by Schedule A. All pages of the print-out must include column titles.

Bonds are obligations issued by business units, government units, certain nonprofit units and have a fixed schedule for one or more future payments of money. If no entries are to be made, write "None" across the Schedule.

Column 1	Description Give a complete and accurate description of all bonds owned at the end of the reporting year.
Column 2	Interest Rate Show rate of interest as stated on the face of the bond.
Column 3	Date of Maturity, Mo. Year Show the month and year the bond is to mature.
Column 4	Par Value Par value is equivalent to the face value of the bond adjusted for repayment of principal, if any.
Column 5	Cost Report the cost at: (1) original cost of acquiring the bond, including broker's commission and incidental expenses or (2) fair market value of the bond when the gift was placed in the segregated annuity fund.
Column 6	Statement Value (Market Value) Statement value should reflect the market value of the bond.
Column 7	Interest Received Enter amount of distribution received in cash. Interest received on bonds sold or disposed of during the year can be summarized on the next to last line in Column 7.
Column 8	Rating Enter the rating affixed to the bond by one of the national rating services, Standard & Poors, Moodys, AM Best, etc.

The sum of Column 6, Statement Value is reported on Page 6, Line 1.

The sum of Column 7, Interest Received is reported on Page 7, Line 2a.

SCHEDULE B – PREFERRED STOCKS

Special Permit holders may attach a computer print-out of Schedule B, however, you may not alter the contents. The print-out must agree with the information required by Schedule B. All pages of the print-out must include column titles.

Shares of preferred stock represent units of ownership in a corporation. If no entries are to be made, write "None" across the Schedule.

Column 1	Description Give a complete and accurate description of all preferred stock owned at the end of the reporting year.
Column 2	Rating Enter the rating affixed to the preferred stock by one of the national rating services, Standard & Poors, Moodys, AM Best, etc.
Column 3	Redeemable (Y/N) Report by "Y" or "N" if the preferred stock is redeemable.
Column 4	Number of Shares Report the number of preferred stock shares owned.
Column 5	Cost Report the cost at: (1) original cost of acquiring the preferred stock, including broker's commission and incidental expenses or (2) fair market value of the preferred stock when the gift was placed in the segregated annuity fund.
Column 6	Statement Value (Market Value) Statement value should reflect the market value of the preferred stock.
Column 7	Dividends Received Enter amount of distribution received in cash. Dividends received on preferred stock sold or disposed of during the year can be summarized on the next to last line in Column 7.
Column 8	Year Acquired Enter the year the Special Permit holder acquired the preferred stock.

The sum of Column 6, Statement Value is reported on Page 6, Line 2.

The sum of Column 7, Dividends Received is reported on Page 7, Line 2b.

SCHEDULE C – COMMON STOCKS

Special Permit holders may attach a computer print-out of Schedule C, however, you may not alter the contents. The print-out must agree with the information required by Schedule C. All pages of the print-out must include column titles.

Shares of capital stock represent units of ownership in a corporation. If no entries are to be made, write "None" across the Schedule.

Column 1	Description Give a complete and accurate description of all common stock owned at the end of the reporting year.
Column 2	CUSIP or Stock Symbol Enter the CUSIP or Stock Symbol identifier for the common stock.

Column 3	Number of Shares Report the number of common stock shares owned.
Column 4	Cost Report the cost at: (1) original cost of acquiring the common stock, including broker's commission and incidental expenses or (2) fair market value of the common stock when the gift was placed in the segregated annuity fund.
Column 5	Statement Value (Market Value) Statement value should reflect the market value of the common stock.
Column 6	Dividends Received Enter amount of distribution received in cash. Dividends received on common stock sold or disposed of during the year can be summarized on the next to last line in Column 6.
Column 7	Year Acquired Enter the year the Special Permit holder acquired the common stock.

The sum of Column 5, Statement Value is reported on Page 6, Line 3.

The sum of Column 6, Dividends Received is reported on Page 7, Line 2c.

SCHEDULE D – MUTUAL FUNDS

Special Permit holders may attach a computer print-out of Schedule D, however, you may not alter the contents. The print-out must agree with the information required by Schedule D. All pages of the print-out must include column titles.

Mutual Funds should be grouped in the following order showing the totals of each group separately, and each group arranged alphabetically.

1. Bond Funds
2. Stock Funds – Includes small cap, mid cap, large cap funds.
3. Real Estate Funds

Shares of mutual funds represent units of ownership in a corporation. If no entries are to be made, write "None" across the Schedule.

Column 1	Description Give a complete and accurate description of all mutual funds owned at the end of the reporting year.
Column 2	CUSIP or Stock Symbol Enter the CUSIP or Stock Symbol identifier for the mutual fund.
Column 3	Number of Shares Report the number of mutual fund shares owned.
Column 4	Cost Report the cost at: (1) original cost of acquiring the mutual fund, including broker's commission and incidental expenses or (2) fair market value of the mutual fund when the gift was placed in the segregated annuity fund.

Column 5	Statement Value (Market Value) Statement value should reflect the market value of the mutual fund.
Column 6	Dividends Received Enter amount of distribution received in cash. Dividends received on mutual funds sold or disposed of during the year can be summarized on the next to last line in Column 6.
Column 7	Year Acquired Enter the year the Special Permit holder acquired the mutual fund.

The sum of Column 5, Statement Value is reported on Page 6, Line 4.

The sum of Column 6, Dividends Received is reported on Page 7, Line 2d.

SCHEDULE E – CASH, MONEY MARKET, CD

Special Permit holders may attach a computer print-out of Schedule E, however, you may not alter the contents. The print-out must agree with the information required by Schedule E. All pages of the print-out must include column titles.

This Schedule shows all banks, trust companies, savings and loan associations in which deposits were maintained by the Special Permit holder at any time during the year. This schedule also shall include commercial paper, negotiable certificates of deposit, and money market funds. If no entries are to be made, write "None" across the Schedule.

Column 1	Depository Show full name of the depository. State if the depository is affiliated with the Special Permit holder.
Column 2	Interest Rate Report the rate of interest in effect as of the year-end.
Column 3	Balance Ending balance in the depository's account and at company's office.
Column 4	Interest Received Enter amount of distribution received in cash. Interest received on accounts sold or disposed of during the year can be summarized on the next to last line in Column 3.

The sum of Column 3, Balance is reported on Page 6, Line 5.

The sum of Column 4, Interest Received is reported on Page 7, Line 2e.

SCHEDULE F – ALL OTHER ASSETS

Special Permit holders may attach a computer print-out of Schedule F, however, you may not alter the contents. The print-out must agree with the information required by Schedule F. All pages of the print-out must include column titles.

This Schedule shows all other assets in the segregated account not previously accounted for. This schedule can include real estate, annuities in transit, etc. If no entries are to be made, write "None" across the Schedule.

Column 1	Location and Description of Asset Show full name and location of the asset.
Column 2	Year Acquired Show the year the Special Permit holder acquired the asset.
Column 3	Cost Report the cost at: (1) original cost of acquiring the asset, including broker's commission and incidental expenses, if applicable or (2) fair market value of the asset when the gift was placed in the segregated annuity fund.
Column 4	Statement Value (Market Value) Statement value should reflect the market value of the asset.
Column 5	Received Enter amount of distribution received in cash. Monies received on asset(s) sold or disposed of during the year can be summarized on the next to last line in Column 5.
Column 6	Encumbrances Enter the amount of any encumbrances on the asset.

The sum of Column 4, Statement Value is reported on Page 6, Line 6.

The sum of Column 5, Received is reported on Page 7, Line 2f.

Annual Statement
of the
Segregated Gift Annuity Fund
of the

of

In the State of

to the
Department of Banking & Insurance
Attn: Office of Solvency Regulation, 8th Floor
20 West State St.
P.O. Box 325
Trenton, NJ 08625-0325

For the Year Ended _____

JURAT

Annual Statement
For the Year Ended _____
of the Condition and Affairs of the
Segregated Gift Annuity Fund
of the

Organized under the Laws of the State of _____, made to the
Department of Banking and Insurance of the State of New Jersey
Pursuant to the Laws Thereof

Incorporated _____ Federal ID # _____

Mail Address _____,
(Street) (City, State, Zip)

Administrative Office _____,
(Street) (City, State, Zip)

Phone (____) _____

Contact Person and Phone Number _____
e-mail address _____

OFFICERS

Principal Officer _____
(Give Title) Name Title

Secretary _____
Name Title

Treasurer _____
Name Title

Actuary _____
Name Title

DIRECTORS OR TRUSTEES**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Show full name (initials not acceptable)

State of _____
County of _____

_____ President, _____ Secretary _____ *Treasurer

of the _____ being duly sworn, each for himself deposes and says that they are the above described officers of the said corporation, and that on the statement date, all of the above described assets were segregated and held as a separate and distinct fund, (subject to appropriation by the corporation of funds legally transferable to the general funds thereof) free and clear from any liens or claims thereon, except as above stated, and that the foregoing statement, with the schedules and explanations therein contained, annexed or referred to is a full and correct Exhibit of all of the Assets, Liabilities, Income and Disbursements, and of the condition and affairs of the said corporation's segregated annuity fund on the last day of the year ended, according to the best of their information, knowledge and belief, respectively.

Subscribed and sworn to before me on this _____ President**

day of _____, _____ Secretary**

_____ *Treasurer**

*Or corresponding person having charge of the accounts and finance of the Corporation.

**Two of the three signatures are required.

Registered Agent _____

Annual Statement for the Year _____ of the _____
Basis¹ of Income Recognition: _____ Cash or _____ Accrual

- 1 Have all the transactions related to annuity agreements, of which notice was received on or before the close of the statement date, been truthfully and accurately entered on the books? Yes ☐ No ☐
- 2 Except as shown in the next succeeding question, does this statement show the condition of the segregated annuity fund as shown by the books, records and data at the close of the statement date? Yes ☐ No ☐
- 3 Have there been included in this statement proper reserves to cover liabilities which may have been actually incurred on or before the statement date but of which no notice was received at the home office until subsequently? Yes ☐ No ☐
- 4 Total amount loaned from the segregated account during the year to directors, member of the governing board or other officers, \$_____.
Total amount of loans outstanding as of the statement date to directors, members of the governing board or other officers
\$_____
- 5 Did any person while an officer, director, member of the governing board or trustee of the special permit holder receive directly or indirectly, during the period covered by this statement, any commission on the business transactions of the segregated account? Yes ☐ No ☐
- 6 Were all the stocks, bonds and other securities owned as of the statement date, in the actual possession of the special permit holder on said date?
If No, provide custodians name and address.

- 7 Were any of the stocks, bonds or other assets of the segregated account loaned, placed under option agreement, or otherwise made available for use by another person during the year covered by this statement?
If Yes, give full and complete information relating thereto

- 8 Has the special permit holder amended or revised the forms of agreement issued to annuitants since the last annual statement filing?
If Yes, have the forms been filed with the Department? Yes ☐ No ☐
If No, provide current blank forms with the Annual Statement filing. Yes ☐ No ☐
- 9 What officials and heads of departments of the special permit holder supervised the making of this report?

Annual Statement for the Year _____ of the _____

10 In what states is the special permit holder authorized to issue charitable gift annuities?

11 Are you authorized to issue charitable gift annuities in the State of California? Yes ☐ No ☐
If Yes, please complete Exhibit of Segregated Account by Jurisdiction on page 8.

12 Is the purchase or sale of all investments of the special permit holder passed upon either by its governing body or a subordinate committee thereof? Yes ☐ No ☐

13 Does the special permit holder keep a complete permanent record of the proceedings of its governing body and all subordinate committees thereof? Yes ☐ No ☐

14 Has there been any change in name or organizational status since the date of the last statement filed with the Department? Yes ☐ No ☐

15 Has any change been made during the year of this statement in the charter, articles of incorporation, or articles of association of the special permit holder? Yes ☐ No ☐
If Yes, provide a copy of the amended document with the Annual Statement.

16 Has the special permit holder filed a copy of its currently effective annuity payout rate table with this Department? Yes ☐ No ☐
If Yes, identify the rate table and its effective date.
If No, include a copy of the table with the Annual Statement if it differs from the rates of the American Council on Gift Annuities.

17 Was there a change in the assumptions used to calculate the present value of payments due to annuitants? Yes ☐ No ☐
If Yes, explain.

18 Does the special permit holder maintain the assets of the segregated account in a separate and distinct account, physically segregated from the other assets of the special permit holder? Yes ☐ No ☐

19 Has the prior year's statement been amended? Yes ☐ No ☐

20 Has the IRS exemption expired, been cancelled, or is it being challenged by the IRS? Yes ☐ No ☐

21 Have there been any changes to the organization that would change the provisions for which your New Jersey special permit was issued? Yes ☐ No ☐

22 Has your method of accounting for the segregated fund changed? Yes ☐ No ☐
If Yes, please explain in detail.

Annual Statement for the Year _____ of the _____

BALANCE SHEET

ASSETS

- | | | |
|---|---|-------|
| 1 | Market value of bonds (Schedule A, Column 6) | _____ |
| 2 | Market value of preferred stocks (Schedule B, Column 6) | _____ |
| 3 | Market value of common stocks (Schedule C, Column 5) | _____ |
| 4 | Market value of mutual funds (Schedule D, Column 5) | _____ |
| 5 | Cash, Money Market, CD (Schedule E, Column 3) | _____ |
| 6 | Other (Schedule F, Column 4) | _____ |
| | | _____ |
| | | _____ |
| 7 | Gross interest due, _____ and accrued _____ | _____ |
| 8 | Total assets (lines 1 through 7) | _____ |

LIABILITIES, SURPLUS & OTHER FUNDS

- | | | |
|----|--|-----------|
| 9 | Net present value of annuities. Give tables and rates of interest. | _____ |
| | | _____ |
| | | _____ |
| 10 | Deduct net value of risks reinsured | (_____) |
| 11 | Net Reserve (lines 9 and 10) | _____ |
| | | _____ |
| 12 | Annuity payments due and unpaid | _____ |
| 13 | All other liabilities (Itemize) | _____ |
| | | _____ |
| | | _____ |
| | | _____ |
| 14 | Total amount of all liabilities (lines 11 through 13) | _____ |
| 15 | Required surplus ² | _____ |
| 16 | Excess surplus ³ | _____ |
| 17 | Total liabilities and surplus (lines 14 through 16; should equal line 8 above and page 7, line 13) | _____ |

Annual Statement for the Year _____ of the _____

STATEMENT OF CHANGES IN ANNUITY FUND

INCOME

- | | | |
|-----|--|-------|
| 1 | Gross amount of gifts received during the year conditioned upon annuity agreements | _____ |
| 2 | Investment Income: | |
| 2a. | Bonds (Schedule A, Column 7) | _____ |
| 2b. | Preferred Stocks (Schedule B, Column 7) | _____ |
| 2c. | Common Stock (Schedule C, Column 6) | _____ |
| 2d. | Mutual Funds (Schedule D, Column 6) | _____ |
| 2e. | Cash, Money Market, CD (Schedule E, Column 4) | _____ |
| 2f. | Other Assets (Schedule F, Column 5) | _____ |
| 3 | Other income (itemize) | _____ |
| | _____ | _____ |
| | _____ | _____ |
| 4 | Gain on investments | |
| 4a. | Realized ⁴ | _____ |
| 4b. | Unrealized ⁵ | _____ |
| | | _____ |
| 5 | Total Income (lines 1 through 4b) | _____ |

EXPENSES

- | | | |
|-----|---|-------|
| 6 | Annuity payments to donors and others | _____ |
| 7 | Reinsurance premiums paid (Schedule G, Section 1, Column 6) | |
| 8 | Other disbursements (Itemize) | _____ |
| | _____ | _____ |
| | _____ | _____ |
| 9 | Loss on investments | |
| 9a. | Realized ⁴ | _____ |
| 9b. | Unrealized ⁵ | _____ |
| | | _____ |
| 10 | Total Expense (sum of lines 6 through 9b) | _____ |
| 11 | Net Change in Annuity Fund (line 5 minus line 10) | _____ |
| 12 | Previous year Annuity Fund Balance | _____ |
| 13 | Annuity Fund Balance at end of year (lines 11 and 12) | _____ |

Annual Statement for the Year _____ of the _____

EXHIBITS

REINSURANCE RECOVERABLE ON PAID & UNPAID LOSSES

Name of Reinsurer: _____

Address: _____

Paid Losses: _____

Unpaid Losses: _____

EXHIBIT OF NUMBER AND ANNUAL PAYMENTS OF ANNUITIES IN FORCE AND RESERVES⁶

1 Reserve	2 3 At Beginning of Year		4 5 Written During Year		6 7 Terminated During Year		8 9 At End of Year	
	No.	Pymt	No.	Pymt	No.	Pymt	No.	Pymt
End of Current Year								
End Previous Year								

Exhibit of Segregated Account by Jurisdiction

1	2 Held for the Benefit of a Particular Jurisdictions Annuitants and Beneficiaries	3 Held for the Benefit of All Other Annuitants and Beneficiaries	4 Total
Assets (pg. 6, line 8)			
Reserve (pg. 6, line 11)			
Other (pg. 6, lines 12 & 13)			
Surplus (pg. 6, lines 15 & 16)			
Jurisdiction:			

Annual Statement for the Year _____ of the _____

SCHEDULE A - BONDS

Showing all BONDS owned at the end of the current year

1	2	3		4	5	6	7	8
Description	Interest	Date of Maturity		Par Value	Cost	Statement	Interest	Rating
	Rate	Mo	Year			Value (Market Value)		
US & Canadian Bonds:								
Foreign Bonds:								
Interest received on sold bonds:	XXX	XXX	XXXXXX	XXX	XXXXXX	XXX		XXXXXX
Total - Bonds	XXX	XXX	XXXXXX	XXX	XXXXXX			XXXXXX

Annual Statement for the Year _____ of the _____

SCHEDULE B - PREFERRED STOCKS

Showing all PREFERRED STOCKS owned at the end of the current year

1 Description	2 Rating	3 Redeem- able (Y/N)	4 Number of Shares	5 Cost	6 Statement Value (Market Value)	7 Dividends Received	8 Year Acquired
US & Canadian Stocks:							
Foreign Stocks:							
Dividends received on sold stock:	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX		XXXXXX
Total - Preferred Stocks	XXXXXX	XXXXXX	XXXXXX	XXXXXX			XXXXXX

Annual Statement for the Year _____ of the _____

SCHEDULE C - COMMON STOCKS

Showing all COMMON STOCKS owned at the end of the current year

1 Description	2 CUSIP or Stock Symbol	3 Number of Shares	4 Cost	5 Statement Value (Market Value)	6 Dividends Received	7 Year Acquired
US & Canadian Stocks:						
Foreign Stocks:						
Dividends received on sold stock:	XXXXXX	XXXXXX	XXXXXX	XXXXXX		XXXXXX
Total - Common Stocks	XXXXXX	XXXXXX	XXXXXX	XXXXXX		XXXXXX

SCHEDULE D - MUTUAL FUNDS

Showing all MUTUAL FUNDS owned at the end of the current year

1	2	3	4	5	6	7
Description	CUSIP # or Stock Symbol	Number of Shares	Cost	Statement Value (Market Value)	Dividends Received	Year Acquired
Bond Funds						
Sub Total	XXXXXX	XXXXXX				XXXXXX
Stock Funds						
Sub Total	XXXXXX	XXXXXX				XXXXXX
Real Estate Funds						
Sub Total						
Dividends received on mutual funds sold		XXXXXX	XXXXXX	XXXXXX		XXXXXX
Total	XXXXXX	XXXXXX	XXXXXX			XXXXXX

Annual Statement for the Year _____ of the _____

SCHEDULE E - CASH, MONEY MARKET, CD

1	2	3	4
Depository	Interest Rate	Balance	Interest Received
Total Cash in Depository	XXXXXXX		
Cash in Company's Office	XXXXXXX		
Interest Rec'd. Closed Accts.	XXXXXXX		
Total Cash	XXXXXXX		

SCHEDULE F - ALL OTHER ASSETS

1 Location and Description of Asset	2 Year Acquired	3 Cost	4 (Market Value)	5 Received	6 Encumbrances
Monies Rec'd. on Disposed Assets	XXXXXX	XXXXXX	XXXXXX		XXXXXX
Total	XXXXXX	XXXXXX			XXXXXX

Annual Statement for the Year _____ of the _____

SCHEDULE G - REINSURANCE
Showing all annuity agreements reinsured

Reinsurance Ageements entered during the current year

Section 1

1	2	3	4	5	6	7	8
	Annuitant Name/and or Agreement Number	Date Annuity Agreement Issued	Name of Reinsurer	Date Agreement Reinsured	Reinsurance Premium Paid	Total Reserve Ceded	Copy of Reinsurance Contract Attached or Date Submitted
1							
2							
3							
4							
5							
	Total	xxxxx	xxxxx	xxxxx		xxxxx	xxxxx

Reinsurance Ageements outstanding at the end of the year

Section 2

1	2	3	4	5	6	7	8
	Annuitant Name/and or Agreement Number	Date Annuity Agreement Issued	Name of Reinsurer	Date Agreement Reinsured	Reinsurance Premium Paid	Total Reserve Ceded	Copy of Reinsurance Contract Attached or Date Submitted
1							
2							
3							
4							
5							
	Total	xxxxx	xxxxx	xxxxx	xxxxx	xxxxx	xxxxx

Footnotes

- ¹ **Basis of Income Recognition** Indicate which basis, cash or accrual, is being used. Any change to the basis will require Department approval.
- ² **Required Surplus:** \$100,000 or 10% of reserves on outstanding agreements, **whichever is greater**.
- ³ **Excess Surplus:** Monies over and above reserve and required surplus
- ⁴ **Realized Gain/(Loss)** The monetary result of the actual sale of an asset.
- ⁵ **Unrealized Gain/(Loss)** The monetary result that would occur if the entity were to sell an asset at its market price at a given moment. A capital gain or loss remains unrealized as long as the entity holds the asset.
- ⁶ **Exhibit of Number and Annual Payments of Annuities in Force and Reserves**
No. = Number of annuities
Pynt. = Annualized payment on those annuities

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