

Financial Statement for Third Party Administrators (TPAs)

Every TPA is required to file a financial statement with the initial request for a Certificate of Authority in Michigan. Thereafter, a financial statement must be submitted annually with the invoice received from DIFS and a \$25.00 filing fee. The information provided on the financial statement should be for the TPA, not for the TPA's parent company. In lieu of Pages 2 and 3 of this form, the TPA may submit independent audited financial statements along with an opinion prepared by a CPA.

Always complete and attach this page to every TPA financial statement or independent audit you file.

For the fiscal year	
Beginning	_____
Ending	_____
Statement and fee are due annually by July 1st for all TPAs with a Michigan Certificate of Authority.	

Name of TPA		TPA Tax ID Number (FEIN)						
Contact person name and title (for inquiries regarding this financial statement)								
Contact person email address			Contact person phone number			Ext number		

All information above is required. Please do not leave any spaces blank.

If this is a renewal filing, please be sure to complete and attach form FIS 0865 Third Party Administrator (TPA) Jurat Page for Annual Renewal. Incomplete filings will be returned without review and could subject the TPA to penalties for late filing.

Verification

I swear under penalty of perjury that the information above and attached is true, accurate and complete.

Signer's name and title (typed or printed)

Signer's name and title (typed or printed)	
Signature	Date

PA 218 of 1984 as amended requires submission and verification by Third Party Administrators who have or are requesting a Michigan Certificate of Authority. Failure to properly complete and file or amend this form may result in denial or revocation of Certificate of Authority or other compliance action.

Annual Statement Renewal Filing Checklist

- FIS 0865 Third Party Administrator Jurat Page for Annual Renewal form
- Pages 2 and 3 of this form **OR** audited financial statements; fiscal period end date must be within the last 12 months
- Payment of \$25.00 annual filing fee
- A representative of the TPA signed and dated this form

Mail complete filing for Third Party Administrator Certificate of Authority to:
DIFS Insurance Licensing
 PO Box 30165
 Lansing, MI 48909-7665

Mail annual renewal documentation to:
DIFS Insurance Licensing
 PO Box 30220
 Lansing, MI 48909-7720

Validation Code
 87-10-70



Michigan Department of Insurance and Financial Services

DIFS is an equal opportunity employer/program.
 Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.
 Visit DIFS online at: www.michigan.gov/difs Phone DIFS toll-free at: 877-999-6442

Financial Statement for Third Party Administrators (TPAs)

In lieu of Pages 2 and 3 of this form, the TPA may submit independent audited financial statements along with an opinion prepared by a CPA. Page 1 must always be filed. See detailed instructions on Page 1.

For the fiscal year	
Beginning	_____
Ending	_____

**Complete entire statement. Use blank lines to itemize and describe other items. Attach additional sheets if necessary.
Place TPA name, Tax ID Number (FEIN) and fiscal year end in the upper right corner of all attachments.**

Name of TPA	TPA Tax ID Number (FEIN)
_____	_____

ASSETS	LIABILITIES AND STOCKHOLDERS' EQUITY
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CURRENT ASSETS

- 1. Cash _____
- 2. Accounts receivable _____
- 3. Investment income _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. **Total current assets**
(add lines 1 through 8) _____

NON-CURRENT ASSETS

- 10. Furniture & fixtures _____
- 11. Equipment & supplies _____
- 12. Goodwill _____
- 13. _____
- 14. _____
- 15. _____
- 16. _____
- 17. _____
- 18. **Total non-current assets**
(add lines 10 through 17) _____
- 19. **TOTAL ASSETS**
(add lines 9 and 18) _____

LIABILITIES

- 20. Accounts payable _____
- 21. Federal taxes _____
- 22. State & City taxes _____
- 23. Notes payable _____
- 24. _____
- 25. _____
- 26. _____
- 27. _____
- 28. **Total liabilities**
(add lines 20 through 27) _____

STOCKHOLDERS' EQUITY

- 29. Common stock _____
- 30. Preferred stock _____
- 31. Additional paid-in capital _____
- 32. _____
- 33. _____
- 34. _____
- 35. _____
- 36. Retained earnings _____
- 37. **Total stockholders' equity**
(add lines 29 through 36) _____
- 38. **TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY**
(add lines 28 and 37) _____

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For the fiscal year	
Beginning	_____
Ending	_____

Complete entire statement. Use blank lines to itemize and describe other items. Attach additional sheets if necessary. Place TPA name, Tax ID Number (FEIN) and fiscal year end in the upper right corner of all attachments.

Name of TPA	TPA Tax ID Number (FEIN)

STATEMENT OF INCOME	STATEMENT OF EXPENSES
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INCOME		EXPENSES	
39. Client administration fees	_____	52. Payroll	_____
40. Commissions from insurance transactions	_____	53. Rent	_____
41. _____	_____	54. Maintenance	_____
42. _____	_____	55. Depreciation	_____
43. _____	_____	56. Vehicles	_____
44. _____	_____	57. Utilities	_____
45. Total income (add lines 39 through 44)	_____	58. Legal and auditing	_____
		59. Interest	_____
		60. Bank charges	_____
INVESTMENT INCOME		61. Freight and postage	_____
46. Net investment income	_____	62. Office supplies	_____
47. Net realized capital gain/loss	_____	63. _____	_____
48. _____	_____	64. _____	_____
49. _____	_____	65. _____	_____
50. Total investment income (add lines 46 through 49)	_____	66. _____	_____
		67. _____	_____
51. TOTAL OF ALL INCOME (add lines 45 and 50)	_____	68. _____	_____
		69. _____	_____
		70. _____	_____
		71. _____	_____
		72. Total expenses (add lines 52 through 71)	_____
		73. NET Gain or (Loss) BEFORE income taxes	_____
		74. Income taxes	_____
		75. NET Gain or (Loss) AFTER income taxes	=====