

## 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	_____
<b>Statement and fee are due annually by July 1<sup>st</sup> for all TPAs with a Michigan Certificate of Authority.</b>	

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](http://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) \_\_\_\_\_

## Financial Statement for Third Party Administrators (TPAs)

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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. <b>Total income</b> (add lines 39 through 44) _____	58. Legal and auditing _____
	59. Interest _____
	60. Bank charges _____
<b>INVESTMENT INCOME</b>	61. Freight and postage _____
46. Net investment income _____	62. Office supplies _____
47. Net realized capital gain/loss _____	63. _____
48. _____	64. _____
49. _____	65. _____
50. <b>Total investment income</b> (add lines 46 through 49) _____	66. _____
	67. _____
51. <b>TOTAL OF ALL INCOME</b> (add lines 45 and 50) _____	68. _____
	69. _____
	70. _____
	71. _____
	72. <b>Total expenses</b> (add lines 52 through 71) _____
	73. <b>NET Gain or (Loss) BEFORE</b> <b>income taxes</b> _____
	74. <b>Income taxes</b> _____
	75. <b>NET Gain or (Loss) AFTER</b> <b>income taxes</b> _____