

Annual Financial Standing Report – Manual Entry

INSTRUCTIONS TO HELP PREPARE YOUR 2019 FINANCIAL REPORT

THE FINANCIAL REPORT (FORM 200) HAS PROVISIONS FOR RECORDING YOUR RECEIPTS AND DISBURSEMENTS IN AN ORDERLY MANNER IN PREPARATION FOR EXAMINATION.

It is suggest that you first complete the inserts “A” & “B” and “C” & “D”. Entries on these pages will be helpful in completing the Form 200.

PAGE #1 – FORM 200

- DATE: Use the date you complete your report.
- ASSOCIATION NUMBER: This is preprinted on your report.
- I.S.O. NUMBER: This is preprinted on your report.
- FEDERAL I.D. NUMBER: This is preprinted on your report.
- N.J. INCORPORATION NUMBER: This is preprinted on your report.
- Lines 1, 2, 3, & 4. This is preprinted on your report.
- Line 5. Date of 2019 meetings. (See ARTICLE IV – MEETINGS on page 3 of the 2010 BY-LAWS OF LOCAL FIREMEN’S RELIEF ASSOCIATION.)
- Lines 6, 7, 8, & 9. Names, addresses, company and line number of officers elected for the year 2020.
- Line 10. Information on your local Exempt Association status. Your Exempt Association must be legally incorporated under State Statute Title 15-A to qualify to send a delegate to the Convention.
- Line 11. This line is self-explanatory.

NOTE: SEE FOOTNOTE BOTTOM OF FORM IN RED

PAGE #2 – FORM 200 – RECEIPTS

- Line 1. This is preprinted on your report.
- Line 2. This is preprinted on your report.
- Line 3. This is preprinted on your report.

TOTAL INSURANCE.

- Line 3a Lines 2 & 3 will be preprinted.

Add the sum of Lines 2 & 3.
(Total Insurance).

Line 4. This figure is found on Insert A, Totals All Bonds, Column 4.

Line 5. This figure is the total of interest earned for the period January 1, 2019 - December 31, 2019 (See page 7 of these instructions). This must be verified by each bank with a letter in conformance with the sample instruction letter issued by the State Office (Page 11) or a copy of your bank statement displaying your December 31 year-end balance and interest earned signed by two local association officers must accompany forms 200 & 200 A. The 1099 INT statement can also be used.

Line 5a TOTAL INTEREST.

Add Lines 4 & 5. Place total on Line “TOTAL INTEREST.”

Line 5b TOTAL INS. & INT.

Add Lines 3a & 5a – “TOTAL INSURANCE” and “TOTAL INTEREST.”
Place total on Line 5b“-TOTAL INS. & INT.”

NOTE: 15% OF THIS LINE (TOTAL INSURANCE and INTEREST) is the maximum amount that can be used for ADMINISTRATIVE EXPENSES.
(Line 30, Page 3) “TOTAL”.

Those receiving subsidy may only use 8% of this line for ADMINISTRATIVE EXPENSES (Line 30, Page 3) “TOTAL”.

Line 6. This is preprinted on your report.

Line 7. In the event an investment must be sold & it is sold at a loss, the loss is shown on this line as a negative (-) amount. Insert A Column 3 (Contact the Field Examiner in the State Office on how to calculate the loss).

Line 8. This line is for other items and should only be used when instructed by the NJSFA Office.

Line 8a MISCELLANEOUS RECEIPTS

Add Lines 6, 7, 8. Place total on Line 8a – MISC. RECEIPTS.

Line 9. This figure will be the result of adding Line TOTAL INS. & INT. and MISC. RECEIPTS. **This must be the same figure as the one on Page 3, Line 36.**

PLEASE PAY ATTENTION TO THE STATEMENT UNDER “ASSET DATA INSTRUCTIONS.”

(a) A Bank Certification Letter from each bank, signed by a Bank Official OR a copy of your bank statement displaying your 12/31 Year-End Balance and signed by two local association officers must

Accompany Form 200 and 200 A to mailed to the New Jersey State Firemen's Association.

(a-1) All Bank Certifications must show account number and balance As of December 31, 2019, and interest earned for the year January 1, 2019 to December 31, 2019. A duplicate copy of each Certification must be retained for your association file.

- Line 10. List each bank/investment account balance.
- Line 11. Enter the Total amount of all bank balances on this Line.
- Line 12. Enter all "Deposits in Transit" included in TOTAL RECEIPTS (line 12). provided the amount has not been credited & is not included in the December 31, 2019 Bank Certification. Attach copy of Deposit Slip verifying the amount.
- Line 12a. Add lines 11 & 12.
- Line 13. Enter Total Outstanding Checks listed on Page 3, Line 39.
- Line 14. This figure will be found by Deducting Line 13 from Line 12-a.
- Line 15. This figure is found on Insert A, Total All Bonds, Column 2.
- Line 16. This figure will be found by adding Line 14 & 15 Total Assets. List on Line 35, Page 3.

PAGE #3 – FORM 200 – DISBURSEMENTS

- Line 17. This figure will be found after totaling the local relief paid on Insert B. (Grand Total Local Relief Paid).
- Line 18. This is preprinted on your report. If incorrect, enter corrected Figure(s) and attach documentation.
- Lines 19, 20, 21 & TOTAL is on Line 22. Lines 19, 20 are preprinted on your report. (If Line 21 is used "Others", Total on line 22 must be changed).
- Lines 23, 24, 25, 26, 27, 28, 29. Place figures on proper lines from Insert D. Add and place totals on Line 30.

All items listed on line 23-29 above must be shown on Insert D, Administrative Expense, and must be accompanied by a copy of cancelled checks and/or a copy of an itemized bill when it is called for on Insert D. In addition if the following circumstances apply; follow instructions indicated below:

- Line 26. SAFE DEPOSIT BOX
If your Safe Deposit Box Rental Fee is over \$75.00, attach a copy of your cancelled Association check or bill to Insert D.

(NOTE – Only if over \$75.00 is this necessary).

- Line 27. BANK SERVICE CHARGE
If your Bank Service Charge is over \$100.00, attach a copy of document or documents, in support of amount charged. (NOTE – only if over \$100.00 for year).
- Line 28 ACCOUNTANT FEES
List fees paid here.
- Line 29. OTHER
Insert D, Miscellaneous must be used to list disbursements. Should your total accumulated Notary Fees exceed \$25.00, please request an itemized receipt from the Notary, showing date, item & charge for each service.
- Line 30. Total Lines 23 thru 29.

The Total shown on line 30, cannot be more than 15%, 8% for those receiving subsidy of the line shown as Total Ins. & Int. on page 2, Line 5b.
- Line 31. This is preprinted on your report State Filing Fee.
- Line 32. This can be used only if instructed by the NJSFA Office
- Line 33. Add total of Line 31 and 32. Place on Line 33.
- Line 34. Total Lines 17 through 33 and insert total on Line 34.
- Line 35. Place figure from Line 16, page 2 on Line 35.
- Line 36. Add Lines 34 and 35. Place total on Line 36. **This figure must be the same as figure on Line 9.**
- Line 37. This figure is found on Page 2 Line 12-a.
- Line 38. List all outstanding checks by check number and dollar amount.
- Line 39. Total Checks Outstanding on Line 39.
- Line 40. Actual Balance December 31, 2019. Subtract Line 39 from Line 37 and place amount on Line 40. Verify this is the same amount on Line 16 page 2
- PAGE #4 – FORM 200
- Section I Place the names of all officers and titles having access to safe deposit box.
- Section II Place the names of all officers and titles authorized to sign checks.
- Section III Fill in all the appropriate areas. This must be answered.

It is important that the Auditing Committee review (physically see), all Investments, (CD's, Zero's, Bank Books, Savings Account Books, etc.). The Committee should also make sure that all investments are in the name of the Association (and not in a "Street Name", Broker or Bank Name). Please pass this information along to the Auditing Committee.

- Section IV To be completed by Notary Public. Make sure President, Treasurer and Chairman of Auditing Committee sign. Expiration Date of Notary must appear on form.
- Section V Place the information on designated lines. (Association name and Name of City/Town).

IMPORTANT NOTE: For the report to prove line 36, page 3 MUST equal the amount shown on Line 9, page 2. In the event they are not equal review all amounts shown in your report and compare against your Treasurer Journal to see that Bank amounts agree and all Disbursements are accounted for. If you still cannot determine why a difference exists, it is suggested you call the Field Examiner in the State Office for an appointment to meet in the State Office to review all your source documentation.

INSERT A

- Schedule A. This section is for Brokerage Accounts (U.S., etc. + Zero Coupon Bonds). It is not for CD Accounts. Include a complete description (type of Bond), Date of Purchase & Insert appropriate info under columns (1) thru (4), & Total at bottom of this section. Place Total of column (4) on Line 4 & Total of column (2) on Line 15 of Form 200, page 2. (Also, please refer to separate instructions for Zero Coupon investment, supplied to those who have invested in Zero Coupons only).

NOTE: **Should you have Zero Coupon Bonds or other Broker Investments, you must attach a copy of the Year- End statement.**

INSERT B

Add all lines on relief paid by your Association from January 1, 2019 up to and including December 31, 2019. Place final figure on Page 3, line 17.

If, at any time, you should have trouble in finding a line number for anyone who is applying for relief, please contact the State Office at 1-800-852-0137. You must show Company & Line No. on this form. Be sure to show status of Member (check box).

NOTE: Recipients of Supplementary Relief approved by N. J. State Firemen's Assn. must be preceded with an "*" asterisk when listing.

INSERT C

Names and terms of all Representatives and Trustees for **2019** must be listed. Year = Final year of 3 year term

Also, names of Trustee Officers are to be listed on the lines provided.

If you should need more space, please list on a separate sheet.
Company number and Line numbers must be shown on form.

NOTE: Representatives cannot be Trustees and Trustees cannot be Representatives.

INSERT D

ADMINISTRATIVE EXPENSE

List all monies paid to Officers or Committee Members. Add and List on Page 3, Line 23.

For items shown with a “*”, under Administrative Expense, please list by name, showing line # and amount received. For “OTHERS” please indicate reason for receiving Administrative Expense. Please attach a separate sheet for these payments listed on Insert D.

List all items purchased. Add and list on Page 3, Line 29. Copy of cancelled organization check to be sent with report, along with copy of itemized bill – refer to instructions for Line 29 & 30.

GENERAL INFORMATION

ASSET CERTIFICATION: Such certification must be requested by each Treasurer from each financial institution and for each account showing the interest and balance for the year ending December 31, 2018. All letters of certification must be on bank letterhead and signed by an Officer. A copy of your Bank Statement displaying your 12/31 year-end balance and/or your interest earned for the year, copy of your 1099, witnessed by two local association officers is acceptable in place of the bank letter. (See samples of certifications attached to these instructions.) Attach the **ORIGINAL CERTIFICATION** to Form 200 (Original copy), copies to Form 200-A (Trenton copy) and Form 200-B (Local copy).

DEPOSITS: Your State Treasurer requests that all deposits on checks received must be made promptly. The back of the checks when being deposited **must be endorsed** saying:

FOR DEPOSIT ONLY
Name of Relief Association
Account Number

ANNUAL AUDIT: All treasurers’ books must be audited at the local level (See Note 1) and the Audit Committee form submitted. Audit Chairman must sign the Financial Standing Report. Refer to Instructions page 5, (Page #4 – Form 200 – Section III).

Note 1 By-laws of Local Firemen’s Relief Association
Article IX Duties of Committees Section 1

INTERNAL REVENUE SERVICE REQUIREMENTS (IRS): **Any compensation to Officers, Representatives or Trustees, etc. receiving \$600.00 or more in Administrative Expense and/or Expense Allowance, must be reported to the IRS on Form 1099 and the companion Form 1096. Forms must be filed prior to February 1, 2020.**

REMINDER: Administrative Expenses for Local Officers and or Committees must be combined and considered with Convention Delegate or Life Member payments an individual receives. If the sum is \$600.00 or more, the above procedure should be followed. **(See Exhibit 1)**

All local associations must file with the Internal Revenue Service on the 15th day of the 5th month after the Association's accounting period ends either Form 990, Form 990EZ or 990-N based on Receipts and/or Assets.

A copy of such filing **must** be sent to the State Office, and a copy retained in your file. Failure to file will lead to a fine by the IRS of up to \$25.00 per day or more.

FILING FEE AND REPORT FOR SECRETARY OF STATE: All reports for the Secretary of State (Trenton) will be handled by the office of the New Jersey State Firemen's Association. Be sure the white copy marked for Trenton is submitted to State Office along with the Original Form 200.

*Filing fee has been withheld from your insurance receipts and shown on the annual distribution check stub. Therefore, no action is required by your Association.

*White copy for Trenton, Form 200-A will be bulk delivered to Trenton, by the N. J. State Firemen's Association.

FILING YOUR FINANCIAL REPORT: There can be no relaxing to the filing of this report. Should a bank delay by not having your Bank Certification Letters available on time, or they are not correct, speak to and obtain the name of the involved Bank Manager (or person in charge) and in the event you cannot get your problem resolved call the Field Examiner in the State Office –1-800-852-0137, provide details of your problem.

Remember, all reports are to be returned via Certified Mail (Return Receipt Requested). Reports are due not later than February 20, 2020. Failure to file on time is clearly defined under Article III, Section 14, Page 22 & 23 of the 2010 Compendium, and supported by a chart printed on Page 34 of this same Compendium.

Should you wish to schedule a meeting with the Field Examiner or Treasurer at the State Office, we ask that arrangements be made in advance, and as soon as possible.

STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

1. Accounting Period – January 1 to December 31.

2. Cash Receipts

3. All Associations shall record receipts in the accounting period they are available for deposit. If interest or dividend checks are dated on or before December 31, they are to be included in the 2019 financial reports.

For example: A bank mails a check to the treasurer dated December 31, 2019. This check is received by the Treasurer January 3, 2019. The Treasurer would

include the interest in the 2019 financial records.

4. Cash Disbursements

5. All Associations shall record disbursement checks in the accounting period they are dated.

For example: A check dated December 31, 2019 and cashed January, 2020 is a check to be recorded in the 2019 financial records as an outstanding check.

It is important that all lines be completed on the Financial Report – Form 200, and if nothing is entered, please show: “Zero” / “0” / “None” / or just a line “—”, to show that you have considered that line.

DISTRIBUTION OF MATERIAL IN FILING YOUR FINANCIAL REPORTFINANCIAL REPORT

Form 200 - ORIGINAL COPY- (WHITE) – FOR <u>New Jersey State Firemen’s Assoc.</u> 1711 Route 34 South Wall Township, NJ 07727 -MAIL- Certified Mail, Return Receipt Requested (Form 200)	Insert A & B	Insert C & D	Bank Cert. Letters	Check List	Audit Comm. Letter
	Yes	Yes	Yes	Yes	Yes

Form 200-A-Trenton Copy (WHITE) – Send to State Office, Along with Form 200 – Original Copy- (White) (Form 200-A)	Insert A & B	Insert C & D	Bank Cert. Letters	Check List	Audit Comm. Letter
	Yes	Yes	Yes	No	Yes

***If you are able to duplicate Bank Letters for the Trenton Copy, it will be appreciated.**

Please attach to Trenton Copy Form 200-A. Thank you.

DO NOT send direct to TRENTON

Form 200-B Local Association File Copy This copy to be retained by Local Association. (Form 200-B)	Insert A & B	Insert C & D	Bank Cert. Letters	Check List	Audit Comm. Letter
	Yes	Yes	Yes	Yes	Yes

USE PRE-PRINTED SELF-ADDRESSED TOUCH AND SEAL ENVELOPE FOR MAILING

FINANCIAL REPORTS AND SUPPORTING DATA TO STATE OFFICE

NOTE: DEADLINE – FEBRUARY 20, 2020

PLEASE NOTE: **Filing a report that is not complete in every respect, and does not prove out does not meet the requirement of the February 20, 2020 filing deadline.**

Thank you for your cooperation in this matter.

Your Local Relief Association Letterhead

December 22, 2019
(Suggesting mailing date to Bank)

To be addressed to Bank:

SAMPLE

Gentlemen:

I am mandated by State Statute to provide Bank Certification letters on Bank letterhead for all accounts we have with your bank. These letters must accompany my annual Treasurers' Report, with a deadline filing date of February 20, 2020. Listed below is a suggested format for use on your bank letter. It must list account number, type of account, interest earned for 2019, and the total Account Balance on deposit for each account as of December 31, 2019.

A further requirement is that bank letters must carry the signature of one bank official with the bank seal if available. The writer would appreciate this information prior to January 10, 2020.

Very truly yours,

John James, Treasurer
Springfield Boro, F.R.A.
827 Hill Street
Springfield Boro, N.J. 00001

Suggested format

The following accounts of the _____ Relief Association are being maintained by this bank.

Account No.	*Type of Account	2019 Interest Earned	Total Account Balance December 31, 2019 (include interest)	If Acct. closed List Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

*CD, Savings, Checking, etc.

