



WINDING-UP PROGRESS REPORT FORM

FOR

SUPERANNUATION FUNDS & RETIREMENT SCHEMES

(FSC Form 100)

FUND OR SCHEME IDENTIFICATION AND DETAILS						
(a)	Name of Fund or Scheme:		(b)	Type of Fund or Scheme:		
(c)	Effective Date of Fund or Scheme:		(d)	FSC Registration Number:		
(e)	FSC Registration Date:		(f)	Wind-Up Date:		
(g)	Effective Date of TAJ Approval:		(h)	Sponsor's Information		
(i)	Period Covered by Progress Report			Name of Sponsor:		
	From: (dd/mm/yyyy)			Mailing Address:		
	To: (dd/mm/yyyy)			Telephone Contact:		
				Email Address:		
ADMINISTRATOR'S INFORMATION			INVESTMENT MANAGER'S INFORMATION			
(a)	Name of Administrator:		(a)	Name of Investment Manager:		
(b)	Date of Engagement:		(b)	Date of Engagement:		
(c)	Name of Responsible Officer ("RO"):	First Name Last Name	(c)	Name of Responsible Officer ("RO"):	First Name Last Name	
(d)	Name of Designated Contact Person:	First Name Last Name	(d)	Name of Designated Contact Person:	First Name Last Name	
	(if different from RO)			(if different from RO)		
	Administrator's Contact Details			Investment Manager's Contact Details		
(e)	Mailing Address:		(e)	Mailing Address:		
(f)	Telephone Contact:		(f)	Telephone Contact:		
(g)	Email Address:		(g)	Email Address:		
AUDITOR'S INFORMATION:			ACTUARY'S INFORMATION			
(a)	Name of Firm (if applicable):		(a)	Name of Firm (if applicable):		
(b)	Name of Engagement Partner:	First Name Last Name	(b)	Name of Principal/Signing Actuary:	First Name Last Name	
(c)	Date of Engagement of Firm:		(c)	Date of Engagement of Firm:		
	Firm Contact Details			Firm Contact Details		
(d)	Mailing Address:		(d)	Mailing Address:		
(e)	Telephone Contact:		(e)	Telephone Contact:		
(f)	Email Address:		(f)	Email Address:		
BOARD OF TRUSTEES						
	Name of Trustee		Trustee Type		Contact Number	Email Address
Chairperson	First Name	Last Name				
2						
3						
4						
5						
6						
7						
8						
9						
10						
Contact person (responsible for the oversight of the winding-up) :				Name:	_____	
				Tele:	_____	

Schedule Number	CONTENTS
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**Winding-Up Income Statement
FSC Form 100.10**

Ref. No. to Notes		Total JMD (\$)
	INCREASE IN ASSETS	
	Increase/Decrease due to Investments	001
	Other Sources of Increase	002
	Post wind-up contributions received	003
	Incorrect posting to the Fund	004
	Other Fund Adjustments	005
	Total Increase in Assets	006
	DECREASE IN ASSETS	
	Expenses	
	Investment Management Expenses	007
	GCT on Investment Management Expenses	008
	Administrative Expenses	009
	GCT on Administrative Expenses	010
	Actuarial Fees	011
	GCT on Actuarial Fees	012
	Advertisement Fees	013
	GCT on Advertisement Fees	014
	Legal Fees	015
	GCT on Legal Fees	016
	Auditing Fees	017
	GCT on Auditing Fees	018
	Other Expenses	019
	Total Expenses	020
	Benefits and Transfers	
	Active Members	
	Transfers to Approved Fund/Scheme	021
	Annuities Purchased	022
	Lumpsum Payments	023
	Deferred Pensioners	
	Transfers to Approved Fund/Scheme	024
	Annuities Purchased	025
	Lumpsum Payments	026
	Pensioners	
	Transfers to Approved Fund/Scheme	027
	Annuities Purchased	028
	Lumpsum Payments	029
	Beneficiaries	
	Transfers to Approved Fund/Scheme	030
	Annuities Purchased	031
	Lumpsum payments	032
	Other Benefits and Transfers	033
	Total Benefits and Transfers	034
	Refund to Sponsor	035
	Other Sources of Decrease	036
	TOTAL DECREASE IN ASSETS	037
	CHANGE IN NET ASSETS	038
	NET ASSETS AT THE START OF THE PERIOD	039
	NET ASSETS AT THE END OF THE PERIOD	040

**Statement of Net Assets
FSC Form 100.02**

Ref. No. to Notes		Total JMD (\$)
	ASSETS	
	Cash	001
	Investments	
	Total Deposits	002
	Commercial Paper	003
	Deposit Administration Contracts	004
	Type I Pooled Funds	005
	Type II Pooled Funds	006
	Total Securities of Governments	007
	Total Repurchase Agreements	008
	Total Promissory Notes	009
	Total Bonds and Debentures	010
	Total Stocks and Shares	011
	Total Leases	012
	Total Mortgage Loans	013
	Total Other Loans	014
	Total Real Estate	015
	Derivatives	016
	Other Assets	017
	Accounts Receivable	
	Employee Basic Contributions	018
	Employee Voluntary Contributions	019
	Employer Contributions - Basic	020
	Employer Contributions - Voluntary	021
	Employer Special Contributions	022
	Taxes	023
	Receivables for Investments Sold	024
	Investment Income Due and Accrued	025
	Transfers Receivable	026
	Other Amounts Receivable	027
	Total Accounts Receivable	028
	TOTAL ASSETS	029
	LIABILITIES	
	Expenses Payable	
	Investment Management Expenses	030
	Administrative Expenses	031
	Actuarial Fees	032
	Advertisement Fees	033
	Legal Fees	034
	Auditing Fees	035
	Other Expenses	036
	Total Expenses Payable	037
	Benefits Payable	
	Active Members	038
	Deferred Pensioners	039
	Pensioners	040
	Beneficiaries	041
	Total Benefits Payable	042
	Other Benefits Payable	043
	Employer share of surplus	044
	Other Liabilities	045
	TOTAL LIABILITIES	046
	NET ASSETS AT PERIOD END	047

FSC Registration No.

Schedule of Investments
FSC Form 100.30

(dd/mm/yyyy)

Period Ending

(dd/mm/yyyy)

Date of Valuation of Assets

CURRENCY VALUE (insert respective JMD
values for currencies in Column J)

USD	
CAD	
GBP	
OTHER	

ASSET TYPE (01)	ISSUER / INSTITUTION (02)	NUMBER OF UNITS (03)	CURRENCY (04)	DESCRIPTION OF SECURITY (05)	NOMINAL VALUE (Original Currency) (06)	NOMINAL VALUE (JMD Equivalent)	MARKET VALUE (Original Currency)	MARKET VALUE (JMD Equivalent)	MATURITY DATE (dd/mm/yyyy) (10)

FSC Registration No.

(dd/mm/yyyy)
Period Ending

Schedule of Liabilities
FSC Form 100.40

	Entitlement as at Wind-up Date				Total	Post winding-up gains/losses					Paid/Transferred as at (insert date of last payment)					Balance
	\$				\$	\$					\$					\$
	Basic Contribution	Voluntary Contribution	Employer Contributions	Surplus		Basic Contribution	Voluntary Contribution	Employer Contributions	Surplus	Total	Basic Contribution	Voluntary Contribution	Employer Contributions	Surplus	Total	
Benefits																
(a) Active Members																
(1) List name of members																
(2)																
(3)																
(4)																
(5)																
SUB-TOTAL																
(b) Deferred Pensioners																
(1) List name of members																
(2)																
(3)																
(4)																
(5)																
SUB-TOTAL																
(c) Pensioners																
(1) List name of members																
(2)																
(3)																
(4)																
(5)																
SUB-TOTAL																
(d) Beneficiaries																
(1) List name of members																
(2)																
(3)																
(4)																
(5)																
SUB-TOTAL																
(e) Sponsor																
GRAND TOTAL																

FSC Registration No.

(dd/mm/yyyy)
Period Ending

Benefit Payment Selection Schedule
FSC Form 100.50

Member Class	Benefit Payment Options									Balance Remaining (\$) (10)
	Annuities				Lumpsum Payment (\$) (05)	Transfer to ASF/ARS/PPP		Refund (\$)		
	Annuity Provider (01)	Type of Annuity (02)	Policy Number (03)	Cost of Purchase (\$) (04)		Name of ASF/ARS/PPP provider (06)	Transfer Amount (\$) (07)	Amount Paid to Member (08)	Tax deducted (09)	
Active Members										
(1) <i>John Brown</i>										
(2)										
(3)										
(4)										
(5)										
SUB-TOTAL										
Deferred Pensioners										
(1)										
(2)										
(3)										
(4)										
(5)										
SUB-TOTAL										
Pensioners										
(1)										
(2)										
(3)										
(4)										
(5)										
SUB-TOTAL										
Beneficiaries										
(1)										
(2)										
(3)										
(4)										
(5)										
SUB-TOTAL										
GRAND TOTAL										

FSC Registration No.

(dd/mm/yyyy)
Period Ending

Winding-Up Timeline
FSC Form 100.70

Where a section does not apply, the response N/A should be provided. Section M should be completed only by plans which are submitting an interim progress report. Sections N and O must be completed by plans which are submitting a final progress report.

	Activity	Date
(A)	Discontinuance Date	(dd/mm/yyyy)
(B)	Date of Signing of Trustees' Resolution to Voluntarily Wind-Up	(dd/mm/yyyy)
(C)	Date notice was submitted to the FSC	(dd/mm/yyyy)
(D)	Date notice was submitted to plan members	(dd/mm/yyyy)
(E)	Date of FSC's approval of the Winding-up application	(dd/mm/yyyy)
(F)	Date Wind-up Valuation Report submitted to the FSC	(dd/mm/yyyy)
(G)	Date Letter of Acceptance of Surplus Distribution submitted to the FSC, if applicable	(dd/mm/yyyy)
(H)	Date of distribution of option forms or statement of entitlement to members	(dd/mm/yyyy)
(I)	Date of approval of Surplus Distribution by the FSC	(dd/mm/yyyy)
(J)	Start Date of Distribution of Plan Assets	(dd/mm/yyyy)
(K)	Date Initial Winding-Up Progress Report Submitted to the FSC	(dd/mm/yyyy)
(L)	Dates Interim Winding-Up Progress Reports submitted to the FSC	(i) (dd/mm/yyyy)
		(ii) (dd/mm/yyyy)
		(iii) (dd/mm/yyyy)
(M)	Projected completion date of winding-up	(dd/mm/yyyy)
(N)	Date of final benefit payment and/or transfer	(dd/mm/yyyy)
(O)	Date Final Winding-Up Progress Report submitted	(dd/mm/yyyy)

Confirmations and Interrogatories to the Winding-up Progress Report Form
FSC Form 100.80

Where a question does not apply the response "N/A" should be provided.

Section A This section is to be completed by all pension plans.

(001) Have audited financial statements been submitted for the plan?

(002) Have any of the plan's trustees resigned since the last reporting date?

(003) (a) Are any of the plan's assets not immediately available for liquidation?

(b) If yes, please provide details of any action being taken to recover any assets not immediately available:

(004) (a) Have any financial assets been purchased by the plan during the reporting period?

(b) If yes, please provide details regarding the purchase of financial assets during the reporting period, including the asset class and market value of each investment.

(005) Please provide details of any difficulties that are hindering the completion of the winding up:

	<i>Members traced</i>	<i>Members not traced</i>
(i) Active Members	<input type="text"/>	<input type="text"/>
(ii) Deferred Pensioners	<input type="text"/>	<input type="text"/>
(iii) Pensioners	<input type="text"/>	<input type="text"/>

(007) (a) Has an application been made to the Supreme Court for the payment of benefits in respect of any participant in the plan?

(b) Has evidence of the date and the amount of each payment made to the Supreme Court been submitted to the FSC?

(008) (a) Has the plan's tax exemption been revoked?

(b) If yes, please provide details (date of revocation, circumstance, etc.)

(009) Were there changes in the membership status for any member between the wind-up date and date of their payment?
If yes, please enclose a reconciliation list of those members and their membership status when their benefits were paid as an addendum to this submission.

Section B This section is to be completed by pension plans submitting a final winding-up report.

(010) Have all outstanding contributions been remitted to the investment manager?

(011) Have statements of entitlement been issued to all members of the plan?

(012) Was the winding-up conducted in accordance with the requirements of the Pensions Act, Regulations and Constitutive Documents of the superannuation fund or retirement scheme?

(013) Have all the assets of the superannuation fund or retirement scheme been disbursed?

(014) Has the certificate of registration for the pension plan been returned to the FSC or enclosed with this submission? If yes, date of submission (dd/mm/yyyy):

(015) Have the certificates of registration for all the trustees of the plan been returned to the FSC or enclosed with this submission? If yes, date of submission (dd/mm/yyyy):

(016) Have copies of the first and last advertisements placed been submitted or enclosed with this submission? If yes, date of submission (dd/mm/yyyy):

(017) Has documentary evidence of the payment of taxes been submitted or enclosed with this submission? If yes, date of submission (dd/mm/yyyy):

(018) Has documentary evidence of the issuance of deferred annuity certificates been submitted or enclosed with this submission? If yes, date of submission (dd/mm/yyyy):

FSC Registration No.

(dd/mm/yyyy)
Period Ending

**Notes to the Winding-Up Progress Report Form
FSC Form 100.90**

**Declaration
FSC Form 100.101**

- I/We understand that the FSC will be using the information in this report and any supporting documentation to determine whether its files will be closed and for any other purposes identified.
- I/We warrant that I/we have truthfully and fully answered the relevant questions in this form and disclosed any other information which might reasonably be considered relevant for the purpose of this report, and have provided all supporting documents.
- I/We acknowledge that the FSC may disclose information in the performance of its statutory functions or otherwise as may be specifically authorized by law.
- I/We understand that the FSC may make such enquiries and seek such further information as it thinks appropriate.

Trustee/Primary Contact Person

Signature _____
 Name _____
 Title/Position _____
 Date _____

TRUSTEE
 Signature _____
 Name _____
 Title/Position _____
 Date _____

TRUSTEE
 Signature _____
 Name _____
 Title/Position _____
 Date _____

TRUSTEE
 Signature _____
 Name _____
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TRUSTEE
 Signature _____
 Name _____
 Title/Position _____
 Date _____