



## Annual Report of Insurance Premium Finance Companies

For the Year Ended December 31, \_\_\_\_\_

DUE ☒ ON ☐ OR BEFORE MARCH 1ST

**NOTE: Where insufficient space is provided to set forth the facts adequately, attach a schedule giving the details.  
READ THE INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS REPORT**

### SCHEDULE A - GENERAL

#### Licensee Information As Issued:

Licensee Name: \_\_\_\_\_ License # \_\_\_\_\_

Street (Line-1) \_\_\_\_\_ Street (Line-2) \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

FEIN # \_\_\_\_\_ Email Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Date Licensee began business in Georgia \_\_\_\_\_

Business other than Insurance Premium Finance business conducted in same office:

**Indicate Entity Type:** ☐ Corporation ☐ Partnership ☐ Proprietorship

**Names of Corporate Officers** (specify Title for each), **Partners** (specify if Limited/General Partner for each), or **Proprietor**

#### ATTESTATION:

I do solemnly swear or affirm that I am familiar with the Laws of Georgia relating to Premium Finance Companies; that all the foregoing information and documentary evidence submitted is true, complete and correct to the best of my knowledge and belief.

Company \_\_\_\_\_

Sworn to and Subscribed before Me

Signature \_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Print Name \_\_\_\_\_

(Notary Public) \_\_\_\_\_

Print Title \_\_\_\_\_

(SEAL)

## SCHEDULE B - BALANCE SHEETS (AS PER BOOKS)

As at December 31, \_\_\_\_\_ and As at December 31, \_\_\_\_\_

Column 1 End of Present Year      Column 2 End of Previous Year

### ASSETS

1. Loans Receivable	_____	_____
2. Cash in Office and in Banks	_____	_____
3. Accounts Receivable:      (A) Parent and/or Affiliated Companies	_____	_____
(B) Other	_____	_____
4. Notes Receivable-Other	_____	_____
5. Deferred Charges and Prepaid Expenses	_____	_____
6. Fixed Assets (Less Reserve for Depreciation and Amortization)	_____	_____
7. Other Assets:              (A) Organization and Development Expenses	_____	_____
(B) Cost of Financing	_____	_____
(C) All Other Assets	_____	_____
8. Total Assets	_____	_____

### LIABILITIES AND CAPITAL

9. Accounts & Notes Payable: (A) Banks	_____	_____
(B) Due to Parent Company and/or Affiliated Companies	_____	_____
(C) Other	_____	_____
10. Bonds	_____	_____
11. Other Liabilities:          (A) Accrued Expenses	_____	_____
(B) All Other Liabilities	_____	_____
12. Expenses Reserves:      (A) Reserve for Bad Debts-Loans Receivable	_____	_____
(B) Other Reserves	_____	_____
13. Deferred Income:          (A) Unearned Interest and Fees-Loans Receivable	_____	_____
(B) All Other Deferred Income	_____	_____
14. Branch Office Capital	_____	_____
15. Net Worth (If Proprietorship or Partnership)	_____	_____
16. Capital Stock (If Corporation)	_____	_____
17. Paid in Surplus	_____	_____
18. Earned Surplus	_____	_____
19. Total Liabilities and Capital	_____	_____

# SCHEDULE C - STATEMENT OF INCOME AND EXPENSES

For Period from January 1, \_\_\_\_\_ To December 31, \_\_\_\_\_

		Amount	Amount	
<b>Gross Income Derived From Insurance Premium Finance Business</b>	1. Earned Interest less Refunds	_____	_____	
	2. Earned Fees less Refunds	_____	_____	
	3. Collections on Loans Previously Charged Off	_____	_____	
	4. All Other Income from Insurance Premium Finance Business (Attach Schedule)	_____	_____	
	5. Total Gross Income Derived From Insurance Premium Finance Business (Items 1)	_____	_____	
<b>Expenses Of Conducting Insurance Premium Finance Business</b>	6. Advertising	_____	_____	
	7. Automobile	_____	_____	
	8. Bad Debts, or Reserve for Bad Debts	_____	_____	
	9. Credit and Collection Expense	_____	_____	
	10. Depreciation and Amortization of Fixed Assets	_____	_____	
	11. Donations, Dues and Subscriptions	_____	_____	
	12. Expense, Sundry	_____	_____	
	13. Heat, Light and Water	_____	_____	
	14. Insurance	_____	_____	
	15. Postage and Expenses	_____	_____	
	16. Legal and Auditing Expenses	_____	_____	
	17. Printing, Stationary and Supplies	_____	_____	
	18. Recording Fees-Net	_____	_____	
	19. Rent	_____	_____	
	20. Salaries	_____	_____	
	21. Supervision and Administration (When not allocated to other items)	_____	_____	
	22. Taxes: (A) License Taxes	_____	_____	
	23. Telephone and Telegraph	_____	_____	
	24. Travel	_____	_____	
	25. Other Expenses of Conducting Insurance Premium Finance Business (Explain):			
	(A)	_____	_____	
	(B)	_____	_____	
	(C)	_____	_____	
	26. Total Expenses of conducting Insurance Premium Finance Business (Items 6 to 25)	_____	_____	
	<b>Total Net Earnings</b>	27. Total Net Earnings Derived from Insurance Premium Finance Business for the Period (Before Deducting Interest on Borrowed Funds and Federal and State Taxes on Income) (Item 5 less 26)	_____	_____

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# SCHEDULE D - RECONCILIATION OF SURPLUS OR NET EARNINGS

For Period from \_\_\_\_\_ To \_\_\_\_\_

	<u>Amount</u>	<u>Amount</u>
<b>Surplus, Additions and Deductions</b>		
1. Surplus Balance at End of Previous Period, Per Books (Items 18, Schedule B, Column 2)	_____	_____
2. Total Net Earnings Derived From Insurance Premium Finance Business from the Period (Item 27, Schedule C)	_____	_____
3. Other Credits to Surplus for the Period (Attach Explanation)	_____	_____
4. Total additions for the Period (Item 2 to 3)	_____	_____
<b>DEDUCTIONS:</b>		
5. Federal and State Taxes on Income	_____	_____
6. Interest Paid	_____	_____
7. Amortization of Financing Cost	_____	_____
8. Dividends Paid During the Period	_____	_____
9. Other Charges to surplus for the Period:		
(A) Transfer of Earnings to Net Worth or Home Office Control	_____	_____
10. Total Deductions for the Period (Items 5 to 9)	_____	_____
11. Net Additions to Previous Periods Surplus Balance (Item 4 minus Item 10)	_____	_____
12. Surplus Balance at End of Present Period-As per Books (Item 1 Plus Item 11) (This amount should be the same as Item 18, Schedule B, Column 1)	_____	_____