

East End Health Plan Annual Report
 For the Fiscal Year Ended December 31, 2002
 As submitted to the Superintendent of Insurance State of New York
 Changes In Fund Balance (Reserve For Future Benefits)

ADDITIONS TO FUND BALANCE

1. Contributions:		
(a) Employer		\$15,873,042
(b) Employee		1,859,147
Total Contributions		17,732,189
2. Investment Income:		
(a) Interest		136,862
3. Total Additions:		\$17,869,051

DEDUCTIONS FROM FUND BALANCE

4. Insurance and Annuity Premiums to Insurance Carriers and to Service organizations (Including Prepaid Medical Plans)		\$230,557
5. Benefits provided directly by the Trust or Separately Maintained Fund		14,963,709
6. Administrative Expenses		
(a) Fees and Commissions	1,111,646	
(b) Insurance Premiums	16,972	
(c) Fidelity Bond premium	1,889	
(d) Other Administrative Expenses	112,083	
Total Administrative Expenses		1,242,590
7. Total Deductions		\$16,436,856

RECONCILEMENT OF FUND BALANCE

8. Fund Balance (Reserve for Future Benefits) at Beginning of Year		\$4,066,676
9. Total Additions During Year (Item 3)	17,869,051	
10. Total Deductions During Year (Item 7)	16,436,856	
11. Total Net Increase (Decrease for fiscal year)		1,432,195
12. Fund Balance (Reserve for Future Benefits) at End of Year		\$5,498,871

STATEMENT OF ASSETS AND LIABILITIES

Assets

(1) Contributions		\$33,131
(2) Investments: Bank Deposits in Savings Accounts		9,003,222
(3) Other Assets:		
Accrued Income		4,477
Deposits Held for Claims		134,500
Total Assets		\$9,175,330

Liabilities

(4) Unpaid Claims (Not Covered by Insurance)		\$3,136,000
(5) Accrued Expenses		104,320
(6) Advance Premium Contributions		436,139
(7) Reserve for Future Benefits (Fund Balance)		5,498,871
Total Liabilities and Reserves		\$9,175,330

ADDITIONAL INFORMATION IS AVAILABLE

REPORT ON EXAMINATION: This fund is subject to periodic examination by New York State Insurance Department. All employee-members of the fund, all contributing employers and the participating unions may inspect the Reports on Examination at the New York State Insurance Department, upon presentation of proper credentials. If you wish to see the Report, please contact the New York State Insurance Department, Life Insurance Companies Bureau, 160 West Broadway New York, New York 10013- Telephone 212-602-0309

OTHER INFORMATION: Also available for inspection -to the public generally- are the Annual Statements and Registration Documents filed by the Fund. These may be inspected during working hours at the above address, or at the office of the Fund.

STATE OF NEW YORK, COUNTY OF SUFFOLK ss. Trustees of the fund affirm, under the penalties of perjury that the contents of this Annual Report are true and hereby subscribe thereto.

Employer Trustee: Frank Perry (signed)

Employee Trustee: Julian Mackay (signed)