

**East End Health Plan Annual Report
For the Fiscal Year Ended December 31, 2006
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 Receivable:		
(a) Employer		\$17,058,727
(b) Employee		<u>1,658,968</u>
Total Contributions:		18,717,695
2. Additions:		
(a) Interest		71,765
(b) Stop Loss Recovery		104,506
		<u>71,765</u>
3. Total Additions:		<u>\$18,893,966</u>

DEDUCTIONS FROM FUND BALANCE

4. Insurance and Annuity Premiums to Insurance Carriers and to Service Organizations (Including Prepaid Medical Plans)		\$ 174,221
5. Benefits provided directly by the Trust or Separately Maintained Fund		15,675,301
6. Administrative Expenses		
(a) Fees and commissions	1,176,901	
(b) Insurance Premiums	21,568	
(c) Fidelity Bond Premiums	2,620	
(d) Other Administrative Expenses	<u>26,543</u>	
Total Administrative Expenses		<u>1,227,632</u>
7. Total Deductions		<u>\$17,077,154</u>

RECONCILEMENT OF FUND BALANCE

8. Fund Balance (Reserve for Future Benefits) at Beginning of Year	\$ (3,163,064)
9. Total Additions During Year (Item 3)	18,893,966
10. Total Deductions During Year (Item 7)	<u>17,077,154</u>
11. Total Net Increase (Decrease)	<u>1,816,812</u>
12. Fund Balance (Reserve for Future Benefits) at End of Year	\$ <u>(1,346,252)</u>

STATEMENT OF ASSETS AND LIABILITIES

ASSETS

(1) Contributions	\$ 84,930
(2) Investments: Bank Deposits in Savings Accounts	2,127,069
(3) Other Assets:	
Prepaid Expenses	4,737
Deposits Held for Claims	<u>150,000</u>
Total Assets	\$ <u>2,366,736</u>

LIABILITIES

(4) Unpaid Claims (Not Covered by Insurance)	\$ 3,247,297
(5) Accrued Expenses	164,672
(6) Other Liabilities – Claims Payable	274,019
(7) Reserve for Future Benefits (Fund Balance)	<u>(1,346,252)</u>
Total Liabilities and Reserves	\$ <u>2,366,736</u>

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: Dr. Greg Frost (signed)

Employee Trustee: Ms. Thelma Shaw (signed)