2014 Annual Report

For The

City: Jacksonville

MUNICIPAL POLICE OFFICERS' AND FIREFIGHTERS' FUND





| Please direct all corre | spondence to: | | | | | | |
|-------------------------------|----------------|-------------------|---|---------------------------------------|---|--|--|
| Municipal Police | Officers' and | d Firefighters | s' | | | | |
| Retirement Trust Funds Office | | | | | | | |
| Division of Retire | | | | | | | |
| Post Office Box 3010 | | | | | | | |
| allahassee, Flo | rida 32315-3 | 3010 | | | | | |
| Phone | (850) | 922-0667 | | | | | |
| Fax | (850) | 921-2161 | | | | | |
| Toll Free | ` , | 738-6737 | | | | | |
| | , | | | | | | |
| Web | http://www.myf | lorida.com/frs/mp | <u>f</u> | | | | |
| Email | mpf@dms.myfl | lorida.com | | | | | |
| | | | | | | | |
| | | | | DATE RECEIVED | | | |
| nnual Report | | | | | | | |
| | | | _ | | _ | | |
| Audit | | | _ | | _ | | |
| ctuarial Valuation | | | | | | | |
| | | | _ | | _ | | |
| | | | | | | | |
| | | 5,100 | 300000000000000000000000000000000000000 | : : : : : : : : : : : : : : : : : : : | | | |
| APPROVED: | Financial | | Statistical | Plan | | | |
| MERINGVED. | FILIALICIAL | | SIGUSTICAL | Plan | | | |

ANNUAL REPORT FOR YEAR 2014

Information provided in this report is public record

Jacksonville

(CITY) Jacksonville Police and Fire Pension Fund

(NAME OF FUND)

One West Adams Street, Suite 100, Jacksonville, FL 32202 (ADDRESS OF FUND)

| STATE OF Florida | | | | | | |
|---|-------------------------|-------------------------------|------------------|--|--|----------------------|
| COUNTY OF <u>Duval</u> | | | | | | |
| We declare that the information the best of our information, know within the provisions of \$1.175.0 | weage and b | ellet. We de , Florida Sta | clare that th | attachments the plan was crea | nereto is true and cor ated and continues to | nplete to operate |
| Walter P. Bussells Please Type: Name of Chairma | | | | Board o | a member of the f Trustees | |
| One West Adams Street, : Mailing Address | Suite 100, | Jacksonv | ille, FL | 32202 | | l |
| | 7373 e-mail 7 | KEANE@ | coj.net | | | |
| Nathaniel Glover Please Type: Name of Secreta One West Adams Street | • | To observe | <i>-</i> 111. Tr | 20000 | | |
| One West Adams Street, Mailing Address | suite 100, | Jacksonv | ille, FL | 32202 | | |
| | 7373 e-mail | KEANE@ | coj.net | | | |
| | THIS | PAGE MUST | BE NOTAI | RIZED | | |
| CONTACT PERSON FOR ANN The Municipal Police Officers' a Firefighters' Retirement Trust F Office is hereby authorized to contact the person listed above for additional information and/or corrections regarding the annua report. | nd unds | RT: | Title One West | rector-Admit C Adams Stre ille, FL 32 | JOHN KEANE THE Public State of Florida JOHN KEANE JOHN KEANE THE Public State of Florida JOHN KEANE JOHN KEA | |
| | 904 | 255-7373 | | ANE@coj.net | | |
| | Area Code | Telephone | | mail | 1 | |
| Chairman: Subscribed and swo | orn to before i | me this \mathcal{L} d | ay of MAR | 2015 | | |

Revised November 2014

Personally known ✓ or produced identification ☐☐☐ Type of ID

Secretary: Subscribed and sworn to before me this 4 day of MAR20 15

Personally known or produced identification and Type of ID

| 1. | BOARD OF 1 | <u> TRUSTEES</u> | | | |
|----|------------------------|--|---------------------------------------|---|--|
| | Makeup of Bo | pard specified in: | | | |
| | Ordinance No | o . <u>87–545–273</u> , | Section $\underline{1}$, | Da | nted May 12, 1987 |
| | Names of Tru | <u>ustees</u> | | Trustees Elect | ed/Appointed By* |
| | Larry Schmitt | t | | Majority | of Police Officers |
| | Richard N. | . Tuten III | | Majority | of Firefighters |
| | Walter Bus | ssells | w | City Coun | cil |
| | Dr. Adam H | Herbert | | City Coun | cil |
| | Nathaniel | Glover | | Appointed | by other trustees |
| | | | | | Q . |
| | | | | | |
| | | | | | |
| | | | | | |
| | Designated inecessary. | rustee Specity: City in Ordinance (exam | / District Appointe ple: Finance Dire | e, Police Officer/Fi ector, Clerk or Tre | refighter, Elected Fifth Member, or asurer). Attach separate page, if |
| 2. | Required Quiquarter: | arterly Board Meetin | gs. List the date (| month, day, and ye | ear) of one Board meeting in each |
| | | 1st 11/22/2013 | | 2nd 2/21/20 | 14 |
| | | 3rd 4/18/2014 | | 4th 8/15/20 | 14 |
| 3. | must be perfe | ances passed during ormed for each new from your actuary att | ordinance. Any ord | od that affect your pinance having no a | pension fund. An impact statement actuarial impact upon the plan must |
| | None | N/A | NT / 7\ | | |
| | Ord. Number | Date Passed | N/A Impact Stateme | ent Date | - E |
| | | | | | |
| | Ord. Number | Date Passed | Impact Stateme | ent Date | _ |
| | Ord. Number | Date Passed | Impact Stateme | ent Date | _ |
| | Ord. Number | Date Passed | Impact Stateme | ent Date | _ |
| 4. | CHAPTER F | UNDS ONLY | | | |
| | List any bene | efit improvements imp | plemented during th | is reporting period | and the date effective: |
| | N/A | | | | |
| | | | | | |

1. ACTUARIAL VALUATION

Contributions (Page 5, Line 3) for this reporting period were made in accordance with the valuation performed by:

Pension Board Consultants, Inc.

Name of Actuarial Firm

Jarmon Welch 195 14th Street NE, Suite 2307, Atlanta, GA 30309

Contact Person Mailing Address

404 892-9798 PenBrd@aol.com
Area Code Telephone Number e-mail

Area Code Telephone Number e-mail

Date of Valuation <u>10/1/2012</u> Period Covered <u>10/1/2013-9/30/2014</u>

2. <u>CERTIFIED PUBLIC ACCOUNTANT</u>

KBLD LLC

Name of Firm

Linda Dufresne, CPA 6960 Bonneval Road, #302, Jacksonville, FL 32216

Contact Person Mailing Address

904 208-4659 Linda@dufresnecpas.com
Area Code Telephone Number e-mail

3. MONEY MANAGER

See attached Name of Firm

Contact Person Mailing Address

Area Code Telephone Number e-mail

4. PERFORMANCE EVALUATION

Summit Strategies Group

Name of Firm

Dan Holmes 8182 Maryland Ave, 6th floor, St. Louis, MO 63105

Contact Person Mailing Address

314 727-7211 d holmes@summitstrategies.com
Area Code Telephone Number e-mail

Date of Evaluation 9/30/2014 **Period Covered** 10/1/2013-9/30/2014

5. <u>LEGAL ADVISOR</u>

Klausner & Kaufman, P.A.

Name of Firm

Robert Klausner 10059 NW 1st Court, Plantation, FL 33324

Attorney Mailing Address

954 916-1202 bob@robertklausner.com
Area Code Telephone Number e-mail

6. PLAN ADMINISTRATOR

Jacksonville Police and Fire Pension Fund

Name of Firm

John Keane One W. Adams Street, Ste 100, Jacksonville, FL 32202

Administrator Mailing Address

904 255-7373 KEANE@coj.net
Area Code Telephone Number e-mail

Jacksonville CITY NAME

<u>Jacksonville Police and Fire Pension Fund</u> NAME OF PENSION FUND

STATEMENT OF ASSETS AND LIABILITIES

AS OF <u>9/30/14</u> Month/Day/Year

ASSETS - MARKET VALUE

| 1. CASH, CHECKING AND SAVINGS (From pg.7) | \$89,776.00 |
|---|--------------------|
| 2. CERTIFICATES OF DEPOSIT (From pg. 7) | \$0.00 |
| 3. SHORT TERM INVESTMENTS (From pg. 8) | \$17,198,015.00 |
| 4. OTHER CASH AND EQUIVALENTS (From pg. 8) | \$0.00 |
| 5. U. S. BONDS AND BILLS (From pg. 8) | \$11,927,430.00 |
| 6. FEDERAL AGENCY GUARANTEED SECURITIES (From pg. 8) | \$70,519,555.00 |
| 7. CORPORATE BONDS (From pg. 8) | \$226,717,154.00 |
| 8. STOCKS (From pg. 9) | \$989,528,089.00 |
| 9. OTHER SECURITIES (From pg. 9) | \$2,142.00 |
| 10. REAL ESTATE (From pg. 9) | \$154,659,253.00 |
| 11. INVESTMENTS HELD BY INSURANCE COMPANY (From pg. 9) | \$0.00 |
| 12. Prepaid and Net Fixed Assets (From pg. 10) | \$93,207.00 |
| 13. Securities Lending Collateral (From pg. 10) | \$125,067,205.00 |
| 14. ACCOUNTS RECEIVABLE (From pg. 10) | \$4,636,438.00 |
| 15. ACCRUED INTEREST | \$1,591,014.00 |
| 16. TOTAL ASSETS (sum of lines 1-15) | \$1,602,029,278.00 |
| LIABILITIES | |
| 17. REFUNDS PAYABLE | \$0.00 |
| 18. PENSIONS PAYABLE | \$1,491,086.00 |
| 19. UNPAID EXPENSES | \$0.00 |
| 20. DROP PLAN PAYABLE | \$0.00 |
| 21. PREPAID CONTRIBUTIONS | \$0.00 |
| 22. Sec. Lend. Obl. & Misc Liab. | \$127,441,140.00 |
| 23. TOTAL LIABILITIES (sum of lines 17-21) | \$128,932,226.00 |
| 24. FUND BALANCE (subtract line 22 from line 16) < <u>MUST</u> agree with page 5, line 25> | \$1,473,097,052.00 |

Jacksonville CITY NAME

Jacksonville Police and Fire Pension Fund NAME OF PENSION FUND

STATEMENT OF REVENUES, EXPENDITURES & CHANGES IN FUND BALANCE

FOR THE PERIOD ENDING <u>9/30/14</u> Month/Day/Year

REVENUES

| 1. CONTRIBUTIONS FROM EMPLOYEES (From pg. 14) | \$10,067,765.00 |
|---|--------------------|
| 2. CONTRIBUTIONS FROM STATE OF FLORIDA (From pg. 6) | \$10,110,493.00 |
| 3. CONTRIBUTIONS FROM CITY/ DISTRICT (From pg. 6) | \$148,277,368.00 |
| 4. CONTRIBUTIONS FROM CITY/ DISTRICT - FOR EMPLOYEES | \$0.00 |
| 5. BUYBACKS/REPAYMENT OF CONTRIBUTIONS | \$1,218,881.00 |
| 6. Court Fines, Pension Trfs, & Misc Rev. | \$4,688,508.00 |
| 7. UNREALIZED GAINS/LOSSES | (\$18,158,544.00) |
| 8. INTEREST AND DIVIDENDS | \$25,189,000.00 |
| 9. GAIN FROM SALE OF INVESTMENTS | \$147,189,494.00 |
| 10. TOTAL REVENUE (sum of lines 1-9) | \$328,582,965.00 |
| EXPENDITURES | |
| 11. RETIREMENT PENSION PAYMENTS (From pg. 12) | \$96,449,979.00 |
| 12. DISABILITY PENSION PAYMENTS (From pg. 12) | \$1,936,292.00 |
| 13. BENEFICIARY PENSION PAYMENTS (From pg. 12) | \$13,037,777.00 |
| 14. TOTAL PENSION PAYMENTS (sum of lines 11-13) | \$111,424,048.00 |
| 15. TERMINATION PAYMENTS (From pg. 13) | \$368,347.00 |
| 16. DROP PLAN PAYMENTS / EXPENSE | \$26,386,788.00 |
| 17. INSURANCE PREMIUM PAYMENTS | \$0.00 |
| 18. EXPENSES (From pg. 6) | \$10,135,623.00 |
| 19. Securities Lending Expense | \$101,318.00 |
| 20. Removed DROP Liab per GASB #67 | (\$247,398,723.00) |
| 21. LOSS FROM SALE OF INVESTMENTS | \$0.00 |
| 22. TOTAL EXPENDITURES (sum of lines 14-21) | (\$98,982,599.00) |
| 23. NET INCREASE / (DECREASE) (subtract line 22 from line 10) | \$427,565,564.00 |
| 24. FUND BALANCE – BEGINNING OF YEAR: October 1, 2013 < MUST agree with prior year report page 5, line 25> | \$1,045,531,488.00 |
| 25. FUND BALANCE – END OF YEAR: September 30, 2014 (line 23 plus line 24) | |
| < <u>MUST</u> agree with page 4, line 24> | \$1,473,097,052.00 |

1. TOTAL CALENDAR YEAR 2014 POLICE DEPARTMENT PAYROLL:

\$ 184,826,406.00

TOTAL CALENDAR YEAR 2014 FIRE DEPARTMENT PAYROLL:

\$ 90,240,641.00

** IMPORTANT **

This figure must be on a <u>calendar</u> year basis. Police Department Payroll includes all employees of the Police Department (secretaries, dispatchers, police officers, etc.). Fire Department Payroll includes all employees of the Fire Department <u>EXCEPT</u> for members included in the Florida Retirement System. <u>If lower than last year, or significantly higher, please explain!</u>

2. STATE OF FLORIDA PREMIUM TAX MONEY

| | FIRE | POLICE | | | |
|--|---|---|------------------------------------|--|--|
| Date of Deposit | <u>Amour</u> | nt Date of Deposit | Amount | | |
| 8/21/2014 | 4,928,287.0 | 8/21/2014 | 5,182,206.00 | | |
| Total Fire | \$4,928,287.00 | Total Police | \$5,182,206.00 | | |
| | | Total (page 5, line 2) | <u>\$10,110,493.00</u> | | |
| 3. CITY CONTRIBUTI requirements. If addition | ON: Please identify any onal space is needed please a | deposits that applied to attach a separate sheet of paper | a prior year's contribution er. | | |
| Date of Deposit | Amount | Date of Deposit | Amoun | | |
| Bi-Weekly | \$148,277,368.00 | | | | |
| | | | | | |
| | | | | | |
| 4. DETAIL OF EXPENS | SES: | Total City Contribution (Page 5, Line 3) | <u>\$148,277,368.00</u> | | |
| ADMINISTRATIVE E | EXPENSES: | | | | |
| Item | Amount | ltem | Amount | | |
| Personnel Services | \$1,016,136.00 | Prof Serv Non-Inve | \$779,227.00 | | |
| Office Space Rent | \$253,392.00 | Central Services | \$113,216.00 | | |
| Supplies | \$9,947.00 | Other | \$52,330.00 | | |
| | | Sub-Total Admin. Expenses | \$2,224,248.00 | | |
| INVESTMENT EXPE | ENSES: | | | | |
| Item | Amount | Item | Amount | | |
| Professional Service | \$7,640,438.00 | HQ Bldg & Garage O&M | \$270,937.00 | | |
| | | | | | |
| | | | | | |

Sub Total -- Investment Expenses <u>\$7,911,375.00</u>
Total Expenses (Page 5, Line 18) <u>\$10,135,623.00</u>

INVESTMENTS

<u>Jacksonville Police and Fire Pension Fund</u> NAME OF PENSION FUND

| 1. | Investn | nent Provisions | s: | | | | |
|---------|---------------------|--|---|--|--|--|---|
| A. | Ord | inance No. 90- | -442 | Section Chart. 2 | 22.04 D a | ate <u>1990</u> | |
| B. 1 | Has th 12.661, I | ne board ado _l Florida Statutes | oted a written inve s, and submitted a c | estment policy in a copy of this policy to | accordance with the Bureau of Lo | the requirements of section ocal Retirement Systems? | |
| | Yes X | No | Date <u>12/10/2012</u> | | | | |
| C. | several | years, and for | ned the total expect the long term herea etirement Systems? | fter pursuant to s. 1 | turn for the curre 12.661(9), Florida | ent year, for each of the next a Statutes, and submitted to | |
| | Yes X | No | Date <u>3/28/2013</u> | | | | |
| D. 1 | 12.66, F | e board prepar lorida Statutes biennial public | ? The SPD shall | n description (SPD) be furnished to a | in accordance w member upon ei | rith the requirements of section mployment and thereafter with | |
| | Yes <u>X</u> | No | Date <u>10/01/2014</u> | | | | |
| E. | Has the Statutes | e board comp ? | lied with the dives | titure provisions fo | und in S.185.06 | 6 (7) and 175.071 (8) Florida | |
| | Yes X | No | | | | | |
| | Note: S statutor | State premiur y provisions. | n tax moneys m See instructions f | ay not be releas or details. | ed until the p | lan has complied with the | |
| 2. | SCHE | DULE OF INVE | ESTMENTS AT MAI | RKET VALUE | | 3 | |
| | <u>Institut</u> | ion Holding De | posit Amoun | t Interest R | <u>ate</u> | | |
| | (1) CA | SH, Checking | & Savings | | | | |
| | (1) 02 | ori, checking | & Javiilys | | | | |
| | , | | | | | 44 44 44 44 | - |
| | , | - | | | | | - |
| | | | | | | | |
| | | | | | Total | <u>\$89,776.00</u> (Page 4, Line 1) | |
| | (2) CE | RTIFICATES | OF DEPOSIT | | | | |
| | - | | | —————————————————————————————————————— | | | _ |
| | 9 | | 4.800 | | | | _ |
| | 3 | | | | | 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4 | _ |
| | · | | | | Total | <u>\$0.00</u> (Page 4, Line 2) | - |

| ion Holding Deposit Amou | unt Interest Rate | |
|---|------------------------------------|--------------------------------------|
| SHORT-TERM INVESTMENTS | 3 | |
| | | |
| | Total | <u>\$17,198,015.00</u> |
| OTHER CASH & EQUIVALENT | | (Page 4, Line 3) |
| | | |
| | | |
| U. S. BONDS & BILLS | Total | \$0.00 (Page 4, Line 4) |
| Government Bonds | \$11,927,430.00 | |
| | | |
| | Total | \$11,927,430.00 (Page 4, Line 5) |
| FEDERAL AGENCY GUARAN | | |
| Government Agencies Govt Mortgage Backed | \$28,995,001.00 \$41,524,554.00 | |
| | | |
| CORPORATE BONDS | Total | \$70,519,555.00 (Page 4, Line 6) |
| | | |
| | | |
| | Total | \$226,717,154.00 (Page 4, Line 7) |

2. SCHEDULE OF INVESTMENTS - continued

2. SCHEDULE OF INVESTMENTS - continued

| Total \$2,142.00 | 989, 528, 089 (Page 4, Line 8) |
|---------------------|--|
| | |
| | |
| | |
| | |
| \$2,142.00 | |
| \$2,142.00 | |
| | |
| | |
| | |
| Total | <u>\$2,142.00</u> (Page 4, Line 9) |
| | |
| \$64,891,640.00 | 44 |
| \$50,000,000.00 | |
| \$35,842,614.00 | |
| \$3,925,000.00 | |
| Total | \$154,659,253.00 (Page 4, Line 10) |
| MPANY | |
| | · · · · · · · · · · · · · · · · · · · |
| | |
| | <u>\$0.00</u> |
| | \$50,000,000.00 \$35,842,614.00 \$3,925,000.00 |

2. SCHEDULE OF INVESTMENTS - continued

| Institut | tion Holding Deposit Amou | unt Interest Rate | |
|----------|---------------------------|-------------------|--------------------------------------|
| (12) | Ppd. & Net Fixed Assets | | |
| | Fixed Assets | \$311,510.00 | |
| | Accum. Depreciation | (\$282,328.00) | |
| | Prepaid Assets | \$64,025.00 | |
| | | Total | \$93,207.00 (Page 4, Line 12) |
| (13) | Sec Lend Collateral | | |
| | | | |
| | | | |
| | | Total | \$125,067,205.00 Page 4, Line 13) |
| (14) | ACCOUNTS RECEIVABLE * | | |
| | DUE FROM ** DATE O | F PAYMENT | AMOUNT |
| | City-Jacksonville | 10/13/2014 | <u>\$4,426,500.00</u> |
| | Recoverable Taxes | On-going | <u>\$102,062.00</u> |

TOTAL ACCOUNTS RECEIVABLE 4, 636, 438 (Page 4, Line 14)

\$68,176.00

\$39,700.00

\$144 biweekl

10/31/2014

Retirees/Survivors

Misc Revenues

^{*} State of Florida Contribution may <u>NOT</u> be listed as a receivable if the Annual Report was not approved before the plan's fiscal year end.

^{**} Required for all receivables.



Bureau Local Retirement Systems
Municipal Police Officers' & Firefighters' Trust Funds' Office
P.O. Box 3010

Tallahassee, FL 32315-3010

Tel: 850-922-0667 | Fax: 850-921-2161 | Toll-Free: 877-738-6737

Rick Scott, Governor

Chad Poppell, Secretary

APPROVED

MEMORANDUM

April 13, 2015

To:

Mr. Walter P. Bussells, Chairman Jacksonville Police Officers' & Firefighters' Pension Fund

From:

Office of Municipal Police Officers' and Firefighters' Retirement Trust Funds, Division of Retirement

Subject: 2014 ANNUAL REPORTS

This is to advise that we have <u>reviewed</u> and <u>approved</u> the 2014 Annual Report (s) for the Jacksonville Police Officers' & Firefighters' Pension Fund.

The 36th Annual Police Officers' and Firefighters' Pension Trustees' School at FSU's Center for Academic & Professional Program Services in Tallahassee will take place on June 2-4, 2015. Continue to check our website to access information and updates about the Trustees' School, including area maps, a copy of the program when completed, and links to register with FSU as well as hotel information on our website at www.myflorida.com/frs/mpf. All police officer and firefighter plan participants, board of trustee members, plan sponsors, and anyone interested in the administration and operation of the Chapters 175 and 185 pension plans should take advantage of this unique, insightful and informative program.

If you have any questions, please contact our office at (850) 922-0667.

mim

Copy:

John Keane, Executive Director / Plan Administrator

Robert Klausner, Plan Attorney Jarmon Welch, Plan Actuary

Approved