



Information Booklet

FAQs

1. Why is the Society being wound up?

Over time, we've seen a steady drop in membership and participation. Combined with rising costs, the Society no longer has the financial strength or member base to continue in a sustainable way. This was exacerbated by the loss of £133,610 through an unauthorised investment made by the Society's Chief Executive last year. The Chief Executive has undertaken to repay from his own pocket the full amount invested along with a sum of £3,500, equivalent to the interest the Society would have earned had the funds remained untouched, meaning a total repayment of £137,110. He has already repaid £75,000 and is making arrangements to repay the remaining £62,110 by the end of August. Nevertheless, the underlying financial position of the Society remains extremely weak due to the drop in membership and we're acting now to avoid the risk of financial insolvency or forced closure later. The Society is already unable to meet its capital requirements as required by regulation.

2. What other options were considered?

It is not possible for the Society to continue to trade as a separate legal entity given the above challenges. The other alternative to winding up the Society would be to transfer its members, policies, assets and liabilities to a third party, for them to continue to run the policies as we have done. This is known as a Transfer of Engagements. Enquiries have been made to a targeted selection of mutual friendly societies like us to ascertain whether they would be willing to take over running the policies of Bus Employees' Friendly Society. There was no interest from any of these parties in accepting a transfer of engagements of Bus Employees' Friendly Society, with reasons given being:

- Bus Employees' Friendly Society products don't match their current products or future strategy;
- Bus Employees' Friendly Society products need considerable improvements before they meet modern Consumer Duty standards, which will take time and money to undertake;
- The costs of a transfer will be disproportionate to the scale of the size of assets and operations being transferred and the benefits it may bring;
- Lack of commercial opportunity to spread their own cost base into the policies of Bus Employees' Friendly Society to improve their own economies of scale (i.e. there appears to be no potential financial upside to the acquirer);
- Own internal focus on other projects.

3. What happens to my membership?

If members vote to wind up, your membership will end. If you have a sickness or term assurance policy you will not be able to make a claim on it after the date of the Special General Meeting so it is important that you consider taking out alternative cover before the SGM – see Q8 below. See Q4 if you already have a claim as at the date of the SGM.

4. What happens if I am already claiming under my policy due to sickness?

If you are off work sick and claiming under your policy at the time of the SGM, the Society will pay you an estimate of the value of your claim as assessed on the recommendation of the Society's appropriate actuary as compensation for the loss of your right to further sickness benefit. This has been calculated as 7.7 times the amount of your weekly benefit entitlement and will be in addition to your share of the remaining assets of the Society. You will become a creditor of the Society for the compensation amount. We have assumed that if you are off work sick and claiming you will likely need to be paid before the remaining assets are divided up. We hope to make payment of compensation within a few weeks of the SGM.

5. Will I get any money back?

Yes, the funds that are left after debts and costs are paid will be distributed to members in accordance with the Society's rules, which provide for a just and equitable distribution to be decided by the Committee on the advice of the Society's actuary.

The Society is currently solvent, so we are proposing to pay to members the value of their policies, and/or the claims made under them, as at the proposed date of dissolution (based on the advice of the Society's actuary) as follows:

- **holders of provident and retirement savings policies** will receive a payment based on the value of their policies (see further details below);
- **holders of sickness policies who are off sick and already claiming** on the policy as at the date of the SGM will receive a payment based on an estimate of the value of the claims they have made under their policies – see Q4 above;
- **holders of term assurance policies** will receive £52, equivalent to one year's premiums
- **holders of sickness policies** will receive equal shares of the remaining assets (that is, after taking account of payments to creditors and of the payments referred to above) irrespective of the number of sickness policies they have.

If you hold more than one type of policy you will receive a payment for each type of policy you hold. Although members with multiple sickness policies will only receive one payment for

their sickness policies irrespective on how many sickness policies they have, those who are off sick and already claiming under their policy will be entitled to receive the payment based on their claim as well as their share of the Society's remaining assets.

For provident and retirement savings policies, the actuarial valuation means that they will receive the value of their future benefits less the value of the premiums they will no longer be required to pay due to the Society's dissolution.

For members holding provident policies this will result in payments per unit of benefit of between £364 and £1,142 and an average payment of £681. Most members hold one unit of benefit but there is one member who has purchased 5 units of benefit and the amount to be distributed to this member is £2,069.

The Society's two retirement savings policyholders will receive the value of their future benefits less the value of the premiums they will no longer be required to pay due to the Society's dissolution (which are £1,100 and £2,100 respectively).

The remaining assets (that is, after taking account of payments to creditors and the payments to other policyholders referred to above) to be distributed equally among holders of sickness policies are expected to result in a payment of approximately £205 per sickness policy holder.

As part of the dissolution process a hardship fund of £10,000 will be established and members who face particular hardship or who believe that the compensation offered for the loss of the right to claim sickness benefit for an ongoing claim does not adequately compensate them will be able to apply for payments from that fund. Any monies that are not claimed from the hardship fund will be added to the amount to be distributed to members holding sickness policies.

6. Do I need to do anything now?

Yes.

- Please attend the Special General Meeting (or vote by proxy) to have your say on the future of the Society. Your voice is important.
- Please spread the word to your colleagues about these proposals and the importance of them attending the Special General Meeting (or voting by proxy) if they hold a policy with the Society.
- Please also consider whether you need a replacement insurance policy – please see Question 8 below.
- Please send us your bank details as soon as you can so we can process any payments due to you without delay – see Q10 below.

7. What will happen if members do not approve the special resolution by the necessary majority?

The Society does not have a viable future and winding up is therefore the only realistic option. If members reject the current proposals the Committee will have to rethink, but will almost certainly have to recommend a winding-up to members again albeit potentially on different terms. This is likely to offer a smaller final payment to members as the delay will eat into the Society's reserves and leave less money to distribute among members. If we don't reach a decision together, there's a real risk that the Society would eventually have to go through a formal legal insolvency process. That could mean significantly less money for members than if we agree on a managed plan to dissolve the Society now. Voting on the proposal gives you a say in how things are handled—and could help protect your entitlements.

8. **You say that the Society is nearly financially insolvent but are promising payments to members on winding up – how is that possible?**

Once the Society stops providing ongoing insurance cover, and instead pays policyholders a one-off payment reflecting the Society's view of value of those policies at the date of dissolution, its costs will reduce very significantly. This will also release reserves which can be distributed to members. It is only as an ongoing insurance provider that the Society is unable to meet the capital requirements required by regulation.

9. **Do I need to get a similar product to my BEFS policy?**

Please act promptly to consider if you need to avoid any gaps in cover given that you will not be able to claim on your sickness or term assurance policy from the date of the SGM.

We cannot provide advice tailored to specific individual circumstances.

Whatever type of policy you hold with the Society, it's important to consider arranging alternative cover if you wish to ensure continued protection. While we cannot recommend specific providers, here are some general steps to help you get started:

Assess your insurance needs – consider what level of income protection or life cover you require, including factors such as your regular outgoings, dependants, and any existing financial commitments.

Use comparison tools – there are several UK-based insurance comparison websites that allow you to compare policy features, premiums, and terms across a wide range of insurers.

Check regulatory status – make sure any provider you're considering is authorised by the Prudential Regulation Authority (PRA) and regulated by the PRA and the Financial Conduct Authority (FCA). You can check this on the Financial Services Register which you can find on the FCA's website at <https://register.fca.org.uk/s/>.

If necessary seek regulated financial advice – an independent financial adviser can help you understand your options and recommend suitable products that meet your specific circumstances, though they may charge for this service.

10. **What changes are proposed to the Society's rules?**

The substantive changes proposed to the Society's rules are as follows:

- To add a purpose of making discretionary grants to members. This is to make it possible to establish the proposed hardship fund.
- To provide that while the dissolution is taking place no subscriptions or benefits will be payable except for members who already have made claims at the date of the special general meeting. Upon dissolution the value of the benefits payable under members' policies (as recommended by the Society's actuary) will be paid in accordance with the formal legal document setting this out (called the Instrument of Dissolution) that you are asked to vote on at the SGM.
- To set the level of compensation for members who are claiming benefit from the Society when the Society starts the dissolution process and whose claims will therefore stop being paid. The Committee of Management has set the level of compensation on the advice of the Society's actuary at 7.7 times the member's current weekly claim rate

- To set up the hardship fund from which discretionary payments can be made.
- To provide that any payment due to a member may be donated to charity if it is not claimed within three months. This is to allow the Society to be finally wound up and its bank accounts closed even if some members who have received their share of the Society's assets by cheque may not have cashed their cheques. The Committee of Management believes that three months is a reasonable period in which to expect members who have been sent a cheque to cash it.

The full text of the proposed new rules, which also includes some minor and consequential amendments, is available on the Society's website at <https://www.busemployees.com/news.html> or by emailing befs@supanet.com or by writing to the registered office, First Floor, 80 Coombe Road, New Malden, Surrey, KT3 4QS.

11. When will I receive any money if the dissolution proposals are approved at the Special General Meeting?

If the proposals to dissolve the Society are approved at the Special General Meeting in September 2025, we will need to spend approximately two months winding down the Society's insurance activities in accordance with the proposed new rules before we can ask our regulators to register the Instrument of Dissolution and advertise the Society's dissolution in the London Gazette. After that, we are legally required to observe a further three-month waiting period before any final payments can be made to members. This is to ensure we comply with all legal and regulatory requirements.

We currently expect to begin making payments in February 2026. Members who have provided their bank details for BACS transfer will receive their money first. If no bank details are provided, we will send payment by cheque, which may take longer to arrive.

To help ensure you receive your money as quickly as possible, we kindly ask you to send us your bank details as soon as you can. Please include:

Name of your bank

Name of the account holder

Sort code

Account number

These details should be sent to the registered office address at your earliest convenience at First Floor, 80 Coombe Road, New Malden, Surrey KT3 4QS or via email to befs@supanet.com.

We will send a reminder about this again after the Special General Meeting if the proposals are approved.

12. Where can I ask questions or get more information?

You can contact the Society by email at befs@supanet.com, by telephone on 01737 226060 or on 07988 224864 or by writing to us at First Floor, 80 Coombe Road, New Malden, Surrey, KT3 4QS.

SUMMARY REPORT

Bus Employees' Friendly Society ("the Society")

Summary Report by the Actuary on the Proposed Distribution of Assets on Dissolution

Introduction

1. Rule 34 of the Society concerns the dissolution of the Society. Rule 34.1 states "Upon the winding-up of the Society or the dissolution of the Society by consent any surplus remaining, after payment in full of the Society's creditors, shall be divided among those Members who were Members at the commencement of the winding-up or the date on which the special resolution to dissolve was passed in such just and equitable proportions as are determined by the Committee on the advice of the Actuary."
2. I have written this Summary Report ("this Report") at the request of the Society as the Actuary of the Society. This report is intended for Members of the Society. Its purpose is to summarise the reasoning behind the proposed distribution of assets on dissolution, that the Society's Committee of Management is recommending to members for their approval.

The structure of this report

3. I think that all the policies of the Society can be considered as falling within one of 5 categories. These categories are sickness policies where claims are in the course of payment, other sickness policies, Provident Savings plans, Retirement Savings plans and term assurances (Table 68). In paragraphs 7 to 32, I comment on the proposed approach to dividing the assets available for distribution on dissolution between each category. I then go on to comment on how the amount allocated to each category is divided between individual policyholders within that category.
4. In paragraphs 33 to 37 I summarise the likely amounts that members can expect to receive on winding up. However, I emphasise that the precise level of payments will depend on the total amount available for distribution at the date of dissolution, which amount at the present time is difficult to predict precisely.
5. In Appendix 1 I describe the data that I have relied on for the purposes of this report and how it is necessary to make assumptions about the future.
6. For a report of this type it is necessary for me to follow professional guidance issued by the Institute and Faculty of Actuaries as the professional body to which I belong. It is also necessary for me to comply with Technical Actuarial Standards issued by the Financial Reporting Council as the UK body that regulates the conduct of auditors, accountants and actuaries. In Appendix 2 I list the guidance which I have followed.

Provident Savings Plans

7. The Provident plans were designed to provide a lump sum payment on retirement at age 60 or over. For policies taken out after 1 January 1992 the lump sum payable depends on the number of complete months that a Provident policy has been in force at retirement. For other Provident policies the formula used to determine the lump sum takes into account the year in which the policy was taken out as well as how long it has been in force at retirement.
8. In addition to lump-sum retirement benefits, Provident policies also provide lump-sum payments in the event of the death of the member and the death of the member's spouse or partner.
9. Premiums are all payable regularly, mostly weekly.
10. The Provident policies ceased to be issued after 31 December 2012. Provident policies currently in force are in respect of long-standing members and for some members the benefits expected to be paid at maturity are substantial relative to the premiums that members have paid.
11. The proposal is that the amount allocated to Provident policies should reflect the value of their retirement benefits plus the value of death benefits minus the value of premiums that would otherwise be payable up to the date of retirement. To calculate these values I have allowed for the interest that would be received on the build up of funds between now and the date of retirement and allowed for a small number of deaths occurring between now and retirement. Bearing in mind the intention of the Society to invest conservatively I considered that an investment rate of return of 3.50% p.a. (being higher than the long-term target rate of inflation) was appropriate and I used death rates based on a proportion of published death rates for England and Wales.
12. The calculations in paragraph 11 were carried out for each individual Provident policy in force at the start of 2025. After some consideration the amount proposed to be paid to each individual Provident policyholder is the result of the calculations described above for that policyholder. I think this is the fairest way of capturing the fact that the value of Provident policies does vary according to the age of the member when the policy was taken out and the length for which the Provident policy has been in force.
13. The total amount for Provident policyholders on the basis proposed is £65,370 which represents an average payment per member in force at 31 December 2024 of £703. All Provident members except one have purchased one unit of benefit. The exceptional member has purchased 5 units of benefit and the amount to be distributed to this member is £2,069 which distorts the average payment per member. Excluding this individual, the largest payment to a remaining Provident member would be £1,142 and the smallest payment would be £364. The average payment per remaining member would fall to £681.

Retirement Savings plans

14. Retirement Savings plans were available from 1 January 2013. The plan provides a lump sum benefit at age 68. Very few Retirement Savings plans were taken out and the plan ceased to be offered from 1 January 2018. Currently only 2 members of the Society hold a Retirement Savings plan.
15. The proposal is that the same method and basis as used for the Provident policies be used i.e. that the distribution to members should reflect the value of the lump sum payable when the member reaches age 68 minus the value of premiums that would otherwise be payable up to age 68.
16. The total payments for Retirement Savings plans would be £3,200 (£1,100 and £2,100)

Term assurances (Table 68)

17. Term assurances provide a lump-sum payment on the death of the member before age 68. The premiums are payable up to age 68 with most members paying a weekly premium of £1.00.
18. Part of each term assurance premium can be thought of as a contribution to the cost of paying death claims as they arise with the balance of the premium being applied to meet the expenses of the Society in administering the policy. In the sense that there is no build up of funds to meet a definite lump-sum payment after a specified number of years, the approach used for the Provident and Retirement Savings plans cannot be applied to Term assurances.
19. A consideration is that although the amount payable on death in respect of any individual is substantial relative to the premiums being paid, very few individuals can be expected to die while their policy is in force, with the result that in aggregate no funds are being held against total future claims exceeding total premiums. Under the circumstances the Committee of Management has taken the view that it would be appropriate to offer a measure of compensation for the disruption to members as a result of their life cover ceasing on dissolution and has proposed a payment for each term assurance member of one year's premiums calculated as £52.
20. I consider this to be a reasonable approach to satisfying the requirements of the Society's Rule 34 (see paragraph 1).
21. The total distribution at £52 per member would be £2,184.

Sickness claims in payment at the date of dissolution

22. Sickness policies are designed to provide an income while sick, for members who are unable to work as a result of illness. Sickness benefits are limited to payments for a maximum of 39 weeks in any consecutive period of 12 calendar months. If a member reaches the limit then no further entitlements to claim payments will arise until the member has returned to work for a continuous period of 13 weeks and a further 13 weeks' contributions have been paid.

23. If the Society is dissolved, there will be a number of members who are receiving payments when the decision is taken because they are sick. After dissolution the Society will no longer exist and I consider that these members should be compensated for the loss of sickness benefits that they would otherwise have received if the Society was able to make sickness payments until the member recovers and returns to work or otherwise becomes ineligible for further benefit payments.
24. An investigation into the claims experience of the Society in the period from November 2013 to March 2025 was carried out. In this period there were 2,171 sickness claims . The key points are:
- A significant number of members claim for relatively short periods (for example approximately 50% of claims last for 30 days or fewer and only approximately 20% of claims last for at least 70 days).
 - Hardly any members even approach having claimed for 39 weeks.
 - If a member has been claiming for a given number of days, the number of further days that the member will claim for in the future tends to be relatively stable. This is due to the fact that initially when a number of claims commence some claims will last for a short period and others for a much longer period - so, the average length of claim is a combination of shorter and longer claims. As time passes the longer period claims will last for a slightly shorter period but the shorter claims will have ceased - the average expected length of future claims will increasingly be dominated by long claims.
25. At the individual member level it is impossible to predict how much longer a sickness claim in payment will last for. However, based on the investigation discussed above, compensation based on 7.7 times the weekly sickness benefits is in my opinion a reasonable and objective level of compensation for members with sickness policies in the course of payment.
26. The total cost of the payment proposed based on sickness claims in payment at 31 December 2024 is £8,000.

Sickness policies generally

27. The activity of the Society is dominated by its sickness business. At 31 December 2024 there were 547 sickness members which compares with 93 Provident policies, 2 Retirement Savings plans and 42 Term policies. Also, to take out a Provident policy, Retirement Savings policy or a term policy (when these classes were open to new business) it was a requirement for the member to have a sickness benefit policy.
28. Sickness policies are designed to provide benefits to members while they are sick and unable to work. Much as for term assurances, premiums paid by sickness members are largely absorbed by the cost of claims which arise (which on average last around 7 to 8 weeks) and supporting the expenses of the Society. As such funds are not built up to pay a lump sum at a definite point in the future.

29. However, dissolution will cause disruption to members whose sickness cover will cease and I think it appropriate that some compensation be paid to sickness members (including those who have claims in payment). Further, in recent years the Society has set aside substantial amounts to meet anticipated future expenses. If the members of the Society agree with the recommendation that the Society be dissolved, not all of these amounts will be required to be spent on future expenses. I think it would be appropriate apply this saving to compensate sickness members.
30. The proposal is that the amounts required to meet the particular requirements of the Provident and Retirement Savings plans provide some compensation for term policies and compensate sickness members whose claims are in payment at dissolution should be calculated. This amount will be deducted from the total assets available for distribution and the balance of the available assets should be paid to sickness members (including those sickness members with claims in payment).
31. The Society's Committee of Management has considered how the amount allocated to sickness policies should be divided between individual members. Those sickness members with larger premiums have benefited from higher sickness benefits and if it is argued that in effect the distribution is funded by saving in expenses (which will tend not to vary by size of policy) this leads to the payment of a fixed amount per member. I think that this is a reasonable approach to meeting the requirements of Rule 34.
32. Based on financial estimates prepared by the Society the amount available for distribution to sickness members on dissolution is £111,246 which based on the number of sickness members in force at 31 December 2024 equates to £205 per member. In the event that the additional £62,110 expected from the Chief Executive by the end of August is not received at the date of dissolution then the amount payable to sickness members would reduce to £90 per member.

Proposed distribution

33. The likely distribution to members on dissolution can be summarised as:

	Total allocation to members	Comments
	£	
Provident	65,370	Average payment, £703 per member
Ret. savings	3,200	£1,100 plus £2,100
Term	2,184	£52 per member
Sick claims in payment	8,000	7.7 x claims per week
Sickness members	111,246	£205 per member
Total	190,000	
Estimated assets available for distribution on dissolution – see paragraphs 34 and 35	190,000	After deduction of £10,000 for distressed members

34. Please note the above figures are estimates only. It has been assumed that the Chief Executive will pay the amount he has committed to in full. If the final instalment of the amount committed (being £62,110) is not received, the payment to sickness members would reduce from £205 per member to £90.
35. The dissolution of the Society may cause particular hardship to particular members, including members in vulnerable circumstances. The Committee and the Trustees will consider individual cases where members are in particular distress and in calculating the assets available for distribution on dissolution it is proposed that a fund of £10,000 be set aside against possible payments to such members. I understand that any monies remaining in this fund at the conclusion of a period of three months from the date of the legal dissolution of the Society will be added to the amount available for distribution to sickness members.
36. The amount set aside for compensation for sickness members who have a claim in payment could vary significantly depending on the number and size of such cases at the date of dissolution.
37. The estimated assets at dissolution figure is likely to vary as a result of differences between budgeted items and the actual outcome. Numerous causes of such differences between budgets and outcome can arise prior to the dissolution of the Society.

Nigel Silby
Appropriate Actuary
8 August 2025

Appendix 1

Reliances and limitations

In this Appendix I comment on the information I have used and relied on to prepare this report and the limitations to be born in mind when considering the conclusions of this report.

Although I have considered the information provided to me for consistency and general reasonability, fundamentally, I have relied on the information maintained and provided to me by the Society for the purposes of my work.

Specific areas of reliance concern the data on business in force at the date at which my calculations have been carried out (notably at 31 December 2024), information on sickness claims in the period November 2013 to March 2025 and information on the investments of the Society. I have assumed that the business practices of the Society reflect those described in the statutory report to the Prudential Regulation Authority (“PRA”), Form FSC2 and that the commitment by the Chief Executive to pay the Society £137,110 is honoured in full (currently £75,000 has been paid to the Society and a further payment of £62,110 is expected by the end of August 2025).

Some of the numbers in this report are the result of calculations based on assumptions I have made about the future experience of the Society. For example I have made assumptions concerning future rates of recovery from sickness, future death rates and future rates of interest. I think that these assumptions are reasonable and where possible they are rooted in the past experience of the Society. However, if it were possible to know and allow precisely for what the future holds the assumptions and results could change.

An area of particular uncertainty, in that it could affect the amount available to distribute on dissolution, concerns the number and amount of sickness claims at the date of dissolution that will require to be compensated in respect of outstanding claims.

I emphasise that the value of assets expected to be available for distribution is based on a budget produced by the Society. It is inevitable that there will be some variations between the budget and the actual outcome leading to the available assets being more or less than budgeted.

Appendix 2

Guidance to Actuaries

In a report of this type it is necessary for me as a member of the Institute and Faculty of Actuaries to confirm that I have complied with relevant Professional Guidance issued by the Institute and Faculty of Actuaries. Additionally, I need to comply with relevant Technical Actuarial Standards issued by the Financial Reporting Council.

I list below the documents that I have referred to and I believe have been complied with. These documents can be found on the websites of the Institute and Faculty of Actuaries (“IFoA”) and the Financial Reporting Council (FRC”).

IFoA publications

- The Actuaries’ Code (version 3.1)
- APS X1 Applying Standards to Actuarial Work (Version 1.1)
- APS L1 Duties and Responsibilities of Life assurance Actuaries (Version 4.0)
- APS X2 Review of Actuarial Work (Version 1.0)

FRC publications

- TAS 100 General Actuarial Standards v2.0
- Technical Actuarial Guidance: Proportionality, published on 24 May 2004
- TAS 200 Version 2.0

GLOSSARY

“Actuary” and “Appropriate Actuary”	An actuary is a person who works with insurers like the Society to help them calculate financial costs and evaluate risks. Small friendly societies like the Society have an “appropriate actuary” who are appointed by the Committee of Management and approved by our regulators. The Society’s appropriate actuary is Nigel Silby, who is a Fellow of the Institute and Faculty of Actuaries, the actuarial professional body.
“Annual General Meeting” or “AGM”	The meeting of members that a friendly society holds every year to receive the Committee of Management’s report and the Society’s accounts, to elect members of the Committee of Management and Trustees, appoint auditors and carry out other items of business.
“BACS”	Bankers’ Automated Clearing Services, the method of electronic bank transfer commonly used for payments between bank accounts.
“Capital Requirement”	The amount of money (in cash or in investments) that an insurer like the Society is required to hold to ensure that it can pay its policyholders and other creditors with enough headroom to deal with all reasonably foreseeable circumstances (such as a run of high claims and/or investment losses).
“Chief Executive”	The person to whom the day-to-day management of the Society is delegated by the Committee of Management. Every friendly society is required by law to have a Chief Executive. The Society’s Chief Executive is Robert (Bob) Hodgetts.
“Committee of Management” or “the Committee”	The Committee of Management is the group of people elected by members to run the Society, although day-to-day management is delegated to the Chief Executive. The Committee of Management of a friendly society is the equivalent of a board of directors of a company. The current members of the Society’s Committee of Management are Chris Sullivan (chair), Adam Powell, Steve Roscoe, Adrian Manolescu and David Wilkinson. The other members of the Committee invited Adrian Manolescu and David Wilkinson to join the Committee in April 2025; they have not yet been elected by members but their election will be proposed at the 2025 AGM on 19 September.

“Creditor”	A person to whom money is owed.
“Dissolution” and “Dissolve”	Dissolution is a formal legal process of closing down the Society, also known as “winding up”. It involves stopping all operations, settling any debts, and fairly distributing any remaining funds or assets.
“Friendly Society”	A friendly society is a particular type of mutual organisation (ie an organisation owned by its members) which provides insurance or other benefits to its members in return for the payment of subscriptions. Friendly societies have some similarities to companies but are legally distinct from companies and are governed by their own legislation.
“Instrument of Dissolution”	The formal document members must approve by special resolution in order for the Society to be dissolved. The instrument of dissolution will list the Society’s assets and liabilities and give certain further information about the Society. If approved by members by special resolution it is then registered by the FCA and advertised in the London Gazette and a local newspaper. Unless anybody applies to Court to set the dissolution aside within three months of the date on which the instrument of dissolution is advertised in the London Gazette, that date will become the date of dissolution of the Society.
“Premium”	The amount paid for an insurance policy. Premiums paid to friendly societies are also called “contributions” or “subscriptions”.
“Proxy Vote”	A proxy vote is a means for a member of a friendly society to participate in a vote at an AGM or SGM even if they themselves can’t attend the meeting where the vote is being held. This means that members do not need to physically attend the meeting and can appoint someone else to vote in their place. A person designated as a proxy will cast a proxy vote in line with the member’s directions as written on their proxy voting card (or, if the member prefers, the proxy can be directed to vote at their discretion).
“Regulators” and “Regulatory”	The regulators of a friendly society like the Society, which conducts insurance business are the Financial Conduct Authority (FCA) and the Prudential Regulation Authority (PRA). They set rules which regulate how the Society should operate.

“the Society”	Bus Employees’ Friendly Society.
“Solvency”, “Solvent”, “Insolvency” and “Insolvent”	Basically, an organisation is solvent if it can pay its debts as they fall due and insolvent if it cannot, However, a regulated insurer like the Society must hold a higher level of assets set by its regulators (its capital requirements) in order still to be able to pay claims even in a period of exceptionally high claims and/ or a financial downturn and is considered to be “insolvent” for regulatory purposes if it fails to do so.
“Special General Meeting” or “SGM”	A meeting of members of a friendly society called for a special purpose, such as the SGM which has been called for 19 September to consider the Special Resolution to dissolve the Society
“Special Resolution”	A resolution (ie a decision by members of a friendly society) on an important matter for which the law requires at least a 75% majority of the members who vote (whether in person or by proxy) to vote in favour in order for the resolution to be passed.
“Trustees”	The Society’s assets are held on trust by trustees on behalf of the members. When the Society is dissolved the Committee of Management will be disbanded and the Trustees will pay the Society’s debts and distribute the remaining assets in accordance with the Instrument of Dissolution. The current Trustees are Chris Sullivan (who is also the chair of the Committee of Management) and David Wilkinson. Both were appointed by the Committee of Management and a resolution will be put to the AGM to confirm their appointment.
“Winding-up”	Winding-up is another term for dissolution.