

Exposure Draft 59
January 2016
Comments due: April 30, 2016

*Proposed Amendments to International Public
Sector Accounting Standard*

**Amendments to IPSAS 25,
*Employee Benefits***

IPSASB

International Public
Sector Accounting
Standards Board®

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IPSAS relate to the general purpose financial statements (financial statements) and are authoritative. RPGs are pronouncements that provide guidance on good practice in preparing general purpose financial reports (GPFRs) that are not financial statements. Unlike IPSAS RPGs do not establish requirements. Currently all pronouncements relating to GPFRs that are not financial statements are RPGs. RPGs do not provide guidance on the level of assurance (if any) to which information should be subjected.

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REQUEST FOR COMMENTS

This Exposure Draft 59, *Amendments to IPSAS 25, Employee Benefits*, was developed and approved by the International Public Sector Accounting Standards Board® (IPSASB®).

The proposals in this Exposure Draft may be modified in light of comments received before being issued in final form. **Comments are requested by April 30, 2016.**

Respondents are asked to submit their comments electronically through the IPSASB website, using the "[Submit a Comment](#)" link. Please submit comments in both a PDF and Word file. Also, please note that first-time users must register to use this feature. All comments will be considered a matter of public record and will ultimately be posted on the website. This publication may be downloaded from the IPSASB website: www.ipsasb.org. The approved text is published in the English language.

Objective of the Exposure Draft

IPSAS 25, *Employee Benefits*, is drawn primarily from International Accounting Standard (IAS) 19 (2004), *Employee Benefits*. Since 2004, the International Accounting Standards Board has made several revisions to IAS 19 including:

- Removing an option that allows an entity to defer the recognition of changes in the net defined benefit liability (the "corridor approach");
- Introduction of the net interest approach for defined benefit plans;
- Amending certain disclosure requirements for defined benefit plans and multi-employer plans; and,
- Simplification of requirements for contributions from employees or third parties to a defined benefit plan, when those contributions are applied to a simple contributory plan that is linked to service.

The objective is to issue a revised IPSAS 25 converged with the current IAS 19 (issued in 2004, including amendments up to December 31, 2015).

Guide for Respondents

The IPSASB welcomes comments on all of the matters discussed in this Exposure Draft. Comments are most helpful if they indicate the specific paragraph or group of paragraphs to which they relate, contain a clear rationale and, where applicable, provide a suggestion for alternative wording.

The Specific Matters for Comment requested for the Exposure Draft are provided below.

Specific Matter for Comment 1

Do you agree with the proposals in the Exposure Draft for revision of IPSAS 25? If not, please indicate what proposed amendments you do not agree with and provide reasons.

Specific Matter for Comment 2

IPSAS 25 currently includes a section on Composite Social Security Programs (paragraphs 47-49). The IPSASB is considering deleting this section because the IPSASB is not aware that it has been applied in any jurisdiction. If you do not agree that this section should be deleted, please provide a reason for your response along with any proposed revisions.

ED 59—AMENDMENTS TO IPSAS 25—EMPLOYEE BENEFITS

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Amendments to IPSAS 25, *Employee Benefits*

Paragraphs proposed to be amended are shown with new text underlined and deleted text struck through. New paragraphs from IAS 19 that do not replace existing ones in IPSAS 25 are identified with a number and a capital letter in this Exposure Draft for clarification purposes. Paragraphs in the current IPSAS 25 that have been relocated are identified with capital letters underlined and the old numbering struck through.

Objective

Paragraph 1 is retained and not amended.

1. ...

Scope

Paragraphs 5 and 6 are amended. New text is underlined and deleted text is struck through. Paragraphs 2, 3, 4, 7, 8 and 9 are retained and not amended.

2. ...
3. ...
4. ...
5. Employee Benefits include:
 - (a) Short-term employee benefits, such as ~~wages, salaries, and social security contributions; paid leave and paid sick leave; profit-sharing and bonuses (if payable within twelve months of the end of the period); and non-monetary benefits (such as medical care, housing, cars, and free or subsidized goods or services) for current employees;~~ the following, if expected to be settled wholly before twelve months after the end of the reporting period in which the employees render the related services:
 - (i) Wages, salaries and social security contributions;
 - (ii) Paid annual leave and paid sick leave;
 - (iii) Profit-sharing and bonuses; and
 - (iv) Non-monetary benefits (such as medical care, housing, cars and free or subsidized goods or services) for current employees;
 - (b) Post-employment benefits, such as ~~pensions, other retirement benefits, post-employment life insurance, and post-employment medical care~~ the following:
 - (i) Retirement benefits (e.g., pensions and lump sum payments on retirement); and
 - (ii) Other post-employment benefits, such as post-employment life insurance and post-employment medical care;
 - (c) Other long-term employee benefits, ~~which may include long-service leave or sabbatical leave, jubilee or other long-service benefits, long-term disability benefits and, if they are~~

~~not payable wholly within twelve months after the end of the period, profit-sharing, bonuses, and deferred compensation; and such as the following:~~

- ~~(i) Long-term paid absences such as long-service leave or sabbatical leave;~~
- ~~(ii) Jubilee or other long-service benefits; and~~
- ~~(iii) Long-term disability benefits; and~~
- (d) Termination benefits.

~~Because each category identified in (a)–(d) above has different characteristics, this Standard establishes separate requirements for each category.~~

- 6. Employee benefits include benefits provided to either to employees or to their dependants, and may be settled by payments (or the provision of goods or services) made either directly to the employees, to their spouses, children, or other dependants, or to others, such as insurance companies.
- 7. ...
- 8. ...
- 9. ...

Definitions

Paragraph 10 is amended. New text is underlined (except in the title of the defined terms) and deleted text is struck through. Where a new defined term is introduced it is double-underlined to distinguish it from defined terms in the current IPSAS 25, e.g., asset ceiling.

- 10. **The following terms are used in this Standard with the meanings specified:**

Definitions of employee benefits

Employee benefits are all forms of consideration given by an entity in exchange for service rendered by employees or for the termination of employment.

Short-term employee benefits are employee benefits (other than termination benefits) that are due to be settled ~~within twelve months after the end of the period~~ wholly before twelve months after the end of the reporting period in which the employees render the related service.

Post-employment benefits are employee benefits (other than termination benefits and short-term employee benefits) ~~which~~ that are payable after the completion of employment.

Other long-term employee benefits are all employee benefits (other than short-term employee benefits, post-employment benefits and termination benefits) ~~that are not due to be settled within twelve months after the end of the period in which the employees render the related service.~~

Termination benefits are employee benefits ~~payable~~ provided for the termination of an employee's employment as a result of either:

- (a) An entity's decision to terminate an employee's employment before the normal retirement date; or
- (b) An employee's decision to accept ~~voluntary redundancy~~ an offer of benefits for these benefits for the termination of employment.

Definitions relating to classification of plans

Post-employment benefit plans are formal or informal arrangements under which an entity provides post-employment benefits for one or more employees.

Defined contribution plans are post-employment benefit plans under which an entity pays fixed contributions into a separate entity (a fund), and will have no legal or constructive obligation to pay further contributions if the fund does not hold sufficient assets to pay all employee benefits relating to employee service in the current and prior periods.

Defined benefit plans are post-employment benefit plans other than defined contribution plans.

Multi-employer plans are defined contribution plans (other than state plans and composite social security programs) or defined benefit plans (other than state plans) that:

- (a) Pool the assets contributed by various entities that are not under common control; and
- (b) Use those assets to provide benefits to employees of more than one entity, on the basis that contribution and benefit levels are determined without regard to the identity of the entity that employs the employees concerned.

Composite social security programs are established by legislation, and

- (a) Operate as multi-employer plans to provide post-employment benefits; as well as to
- (b) Provide benefits that are not consideration in exchange for service rendered by employees.

State plans are plans other than composite social security programs established by legislation that operate as if they are multi-employer plans for all entities in economic categories laid down in legislation.

Definitions relating to the net defined benefit liability (asset)

The net defined benefit liability (asset) is the deficit or surplus, adjusted for any effect of limiting a net defined benefit asset to the asset ceiling.

The deficit or surplus is:

- (a) The present value of the defined benefit obligation less
- (b) The fair value of plan assets (if any).

The asset ceiling is the present value of any economic benefits available in the form of refunds from the plan or reductions in future contributions to the plan.

The **present value of a defined benefit obligation** is the present value, without deducting any plan assets, of expected future payments required to settle the obligation resulting from employee service in the current and prior periods.

Plan assets comprise:

- (a) Assets held by a long-term employee benefit fund; and
- (b) Qualifying insurance policies.

Assets held by a long-term employee benefit fund are assets (other than non-transferable financial instruments issued by the reporting entity) that:

- (a) Are held by an entity (a fund) that is legally separate from the reporting entity and exists solely to pay or fund employee benefits; and
- (b) Are available to be used only to pay or fund employee benefits, are not available to the reporting entity's own creditors (even in bankruptcy), and cannot be returned to the reporting entity, unless either:
 - (i) The remaining assets of the fund are sufficient to meet all the related employee benefit obligations of the plan or the reporting entity; or
 - (ii) The assets are returned to the reporting entity to reimburse it for employee benefits already paid.

A **qualifying insurance policy** is an insurance policy* issued by an insurer that is not a related party (as defined in IPSAS 20) of the reporting entity, if the proceeds of the policy:

- (a) Can be used only to pay or fund employee benefits under a defined benefit plan; and
- (b) Are not available to the reporting entity's own creditors (even in bankruptcy) and cannot be paid to the reporting entity, unless either:
 - (i) The proceeds represent surplus assets that are not needed for the policy to meet all the related employee benefit obligations; or
 - (ii) The proceeds are returned to the reporting entity to reimburse it for employee benefits already paid.

Definitions relating to defined benefit cost

Service cost comprises:

- (a) **Current service cost, which is the increase in the present value of the defined benefit obligation resulting from employee service in the current period;**
- (b) **Past service cost, which is the change in the present value of the defined benefit obligation for employee service in prior periods, resulting from a plan amendment (the introduction or withdrawal of, or changes to, a defined benefit plan) or a curtailment (a significant reduction by the entity in the number of employees covered by a plan); and**

* A qualifying insurance policy is not necessarily an insurance contract (see the relevant international or national standard dealing with insurance contracts).

(c) Any gain or loss on settlement.

Net interest on the net defined benefit liability (asset) is the change during the period in the net defined benefit liability (asset) that arises from the passage of time.

Remeasurements of the net defined benefit liability (asset) comprise:

- (a) Actuarial gains and losses;**
- (b) The return on plan assets, excluding amounts included in net interest on the net defined benefit liability (asset); and**
- (c) Any change in the effect of the asset ceiling, excluding amounts included in net interest on the net defined benefit liability (asset).**

Actuarial gains and losses comprise are changes in the present value of the defined benefit obligation resulting from:

- (a) Experience adjustments (the effects of differences between the previous actuarial assumptions and what has actually occurred); and**
- (b) The effects of changes in actuarial assumptions.**

The return on plan assets is interest, dividends or similar distributions and other revenue derived from the plan assets, together with realized and unrealized gains or losses on the plan assets, less:

- (a) Any costs of administering managing the plan assets ~~(other than those included in the actuarial assumptions used to measure the defined benefit obligation)~~; and**
- (b) Any tax payable by the plan itself, other than tax included in the actuarial assumptions used to measure the present value of the defined benefit obligation.**

A settlement is a transaction that eliminates all further legal or constructive obligations for part or all of the benefits provided under a defined benefit plan, other than a payment of benefits to, or on behalf of, employees that is set out in the terms of the plan and included in the actuarial assumptions.

Short-Term Employee Benefits

Paragraphs 11, 13, 14-20, 24-26 are amended. Paragraph 12A is added. Paragraph 12 is deleted. The final section of paragraph 13 is now paragraph 13A with amendments. The headings above paragraph 14 and 20 are amended. New text is underlined and deleted text is struck through. Paragraphs 21, 22 and 23 are retained and not amended.

11. Short-term employee benefits include items such as the following, if expected to be settled wholly before twelve months after the end of the reporting period in which the employees render the related services:
- (a) Wages, salaries, and social security contributions;**
 - (b) ~~Short-term compensated absences (such as Paid annual leave and paid sick leave) where the compensation for the absences is due to be settled within twelve months after the end of the period in which the employees render the related employee service;~~**

- (c) ~~Performance related bonuses and Profit-sharing and bonuses payable within twelve months after the end of the period in which the employees render the related service; and~~
 - (d) Non-monetary benefits (such as medical care, housing, cars, and free or subsidized goods or services) for current employees.
- ~~12. Accounting for short-term employee benefits is generally straightforward, because no actuarial assumptions are required to measure the obligation or the cost, and there is no possibility of any actuarial gain or loss. Moreover, short-term employee benefit obligations are measured on an undiscounted basis.~~
- 12A. An entity need not reclassify a short-term employee benefit if the entity's expectations of the timing of settlement change temporarily. However, if the characteristics of the benefit change (such as a change from a non-accumulating benefit to an accumulating benefit) or if a change in expectations of the timing of settlement is not temporary, then the entity considers whether the benefit still meets the definition of short-term employee benefits.

Recognition and measurement

All Short-Term Employee Benefits

13. **When an employee has rendered service to an entity during an accounting period, the entity shall recognize the undiscounted amount of short-term employee benefits expected to be paid in exchange for that service:**
- (d) **As a liability (accrued expense), after deducting any amount already paid. If the amount already paid exceeds the undiscounted amount of the benefits, an entity shall recognize that excess as an asset (prepaid expense) to the extent that the prepayment will lead to, for example, a reduction in future payments or a cash refund; and**
 - (e) **As an expense, unless another Standard requires or permits the inclusion of the benefits in the cost of an asset (see, for example, IPSAS 12, *Inventories*, and IPSAS 17, *Property, Plant, and Equipment*).**

~~Paragraphs 14, 17, and 20 explain how an entity shall apply this requirement to short-term employee benefits in the form of compensated absences and bonus and profit-sharing plans.~~

- 13A. Paragraphs 14, 17, and 20 explain how an entity shall apply paragraph 13 to short-term employee benefits in the form of paid absences and profit-sharing and bonus plans.

Short-Term Compensated Paid Absences

14. **An entity shall recognize the expected cost of short-term employee benefits in the form of compensated paid absences under paragraph 13 as follows:**
- (a) **In the case of accumulating compensated absences, when the employees render service that increases their entitlement to future compensated paid absences; and**
 - (b) **In the case of non-accumulating compensated paid absences, when the absences occur.**

15. An entity may ~~compensate~~ pay employees for absence for various reasons, including ~~vacation~~ holidays, sickness and short-term disability, maternity or paternity, jury service, and military service. Entitlement to ~~compensated~~ paid absences falls into two categories:
- (a) Accumulating; and
 - (b) Non-accumulating.
16. Accumulating ~~compensated~~ paid absences are those that are carried forward and can be used in future periods if the current period's entitlement is not used in full. Accumulating ~~compensated~~ paid absences may be either vesting (in other words, employees are entitled to a cash payment for unused entitlement on leaving the entity) or nonvesting (when employees are not entitled to a cash payment for unused entitlement on leaving). An obligation arises as employees render service that increases their entitlement to future ~~compensated~~ paid absences. The obligation exists, and is recognized, even if the ~~compensated~~ paid absences are non-vesting, although the possibility that employees may leave before they use an accumulated non-vesting entitlement affects the measurement of that obligation.
17. **An entity shall measure the expected cost of accumulating ~~compensated~~ paid absences as the additional amount that the entity expects to pay as a result of the unused entitlement that has accumulated at the end of the reporting date period.**
18. The method specified in ~~paragraph 17~~ the previous paragraph measures the obligation at the amount of the additional payments that are expected to arise solely from the fact that the benefit accumulates. In many cases, an entity may not need to make detailed computations to estimate that there is no material obligation for unused ~~compensated~~ paid absences. For example, a sick leave obligation is likely to be material only if there is a formal or informal understanding that unused paid sick leave may be taken as paid ~~vacation~~ annual leave.
19. Non-accumulating ~~compensated~~ paid absences do not carry forward; they lapse if the current period's entitlement is not used in full and do not entitle employees to a cash payment for unused entitlement on leaving the entity. This is commonly the case for sick pay (to the extent that unused past entitlement does not increase future entitlement), maternity or paternity leave, and ~~compensated~~ paid absences for jury service or military service. An entity recognizes no liability or expense until the time of the absence, because employee service does not increase the amount of the benefit.

~~Bonus Payments and Profit-Sharing Payments and Bonus Plans~~

20. **An entity shall recognize the expected cost of ~~bonus payments and profit-sharing and~~ bonus payments under paragraph 13 when, and only when:**
- (a) The entity has a present legal or constructive obligation to make such payments as a result of past events; and
 - (b) A reliable estimate of the obligation can be made.
- A present obligation exists when, and only when, the entity has no realistic alternative but to make the payments.
21. ...
22. ...

- 23 ...
24. An obligation under profit-sharing plans and bonus plans and ~~profit-sharing plans~~ results from employee service, and ~~is recognized as an expense in surplus or deficit~~ not from a transaction with the entity's owners. Therefore, an entity recognizes the cost of profit-sharing and bonus plans not as a distribution of profit but as an expense.
25. If profit-sharing and bonus payments and ~~profit shares~~ are not ~~due~~ expected to be settled wholly ~~within~~ before twelve months after the end of the reporting period in which the employees render the related service, those payments are other long-term employee benefits (see paragraphs 147–153).

Disclosure

26. Although this Standard does not require specific disclosures about short-term employee benefits, other Standards may require disclosures. For example, IPSAS 20 requires disclosures of the aggregate remuneration of key management personnel and IPSAS 1 requires the disclosure of information about employee benefits expense.

Post-employment Benefits—Distinction between Defined Contribution Plans and Defined Benefit Plans

Paragraphs 27, 28, 29 and 31 are amended. Paragraph 28A is added. New text is underlined and deleted text is struck through. Paragraph 30 is retained and not amended.

27. Post-employment benefits include, ~~for example~~ items such as the following:
- (a) Retirement benefits, ~~such as pensions~~ (eg pensions and lump sum payments on retirement); and
 - (b) Other post-employment benefits, such as post-employment life insurance, and post-employment medical care
28. Post-employment benefit plans are classified as either defined contribution plans or defined benefit plans, depending on the economic substance of the plan, as derived from its principal terms and conditions. ~~In order to be classified as a defined contribution plan a post-employment benefit plan must require the entity to pay fixed contributions into a separate entity. Under defined contribution plans:~~
- (a) ~~The entity's legal or constructive obligation is limited to the amount that it agrees to contribute to the fund. Thus, the amount of the post-employment benefits received by the employee is determined by the amount of contributions paid by an entity (and perhaps also the employee) to a post-employment benefit plan or to an insurance company, together with investment returns arising from the contributions; and~~
 - (b) ~~In consequence, actuarial risk (that benefits will be less than expected) and investment risk (that assets invested will be insufficient to meet expected benefits) fall on the employee.~~
- 28A. Under defined contribution plans the entity's legal or constructive obligation is limited to the amount that it agrees to contribute to the fund. Thus, the amount of the post-employment benefits received by the employee is determined by the amount of contributions paid by an entity

(and perhaps also the employee) to a post-employment benefit plan or to an insurance company, together with investment returns arising from the contributions. In consequence, actuarial risk (that benefits will be less than expected) and investment risk (that assets invested will be insufficient to meet expected benefits) fall, in substance, on the employee.

29. Examples of cases where an entity's obligation is not limited to the amount that it agrees to contribute to the fund are when the entity has a legal or constructive obligation through:
- (a) A plan benefit formula that is not linked solely to the amount of contributions and requires the entity to provide further contributions if assets are insufficient to meet the benefits in the plan benefit formula;
 - (b) A guarantee, either indirectly through a plan or directly, of a specified return on contributions; or
 - (c) Those informal practices that give rise to a constructive obligation. For example, a constructive obligation may arise where an entity has a history of increasing benefits for former employees to keep pace with inflation, even where there is no legal obligation to do so.
30. ...
31. ~~Unlike defined contribution plans, the definition of a defined benefit plan does not require the payment of contributions to a separate entity.~~ Paragraphs 32–53 ~~below~~ explain the distinction between defined contribution plans and defined benefit plans in the context of multi-employer plans, defined benefit plans that share risks between entities under common control, state plans, composite social security programs, and insured benefits.

Multi-Employer Plans

Paragraphs 32, 33-36 are amended. Paragraph 37 is deleted. Paragraphs 32A and 38A are added. New text is underlined and deleted text is struck through. Paragraph 38 is retained and not amended.

32. **An entity shall classify a multi-employer plan as a defined contribution plan or a defined benefit plan under the terms of the plan (including any constructive obligation that goes beyond the formal terms). ~~Where a multi-employer plan is a defined benefit plan, an entity shall:~~**
- ~~(a) Account for its proportionate share of the defined benefit obligation, plan assets, and cost associated with the plan in the same way as for any other defined benefit plan; and~~
 - ~~(b) Disclose the information required by paragraph 141.~~
- 32A. **If an entity participates in a multi-employer defined benefit plan, unless paragraph 33 applies, it shall:**
- (a) Account for its proportionate share of the defined benefit obligation, plan assets and cost associated with the plan in the same way as for any other defined benefit plan; and**
 - (b) Disclose the information required by paragraphs 144A–144N (excluding paragraph 144N(d)).**

33. **When sufficient information is not available to use defined benefit accounting for a multi-employer plan that is a defined benefit defined benefit plan, an entity shall:**
- (a) **Account for the plan under in accordance with paragraphs 55–57 and 56 as if it were a defined contribution plan; and**
 - (b) **Disclose the information required by paragraph 144N:**
 - ~~(i) The fact that the plan is a defined benefit plan; and~~
 - ~~(ii) The reason why sufficient information is not available to enable the entity to account for the plan as a defined benefit plan; and~~
 - ~~(c) To the extent that a surplus or deficit in the plan may affect the amount of future contributions, disclose in addition:~~
 - ~~(i) Any available information about that surplus or deficit;~~
 - ~~(ii) The basis used to determine that surplus or deficit; and~~
 - ~~(iii) The implications, if any, for the entity.~~
34. One example of a multi-employer defined benefit multi-employer plan is one where:
- (a) The plan is financed on a pay-as-you-go basis; ~~such that contributions of employers and/or employees are set at a level that is expected to be sufficient to pay the benefits falling due in the same period; and future benefits earned during the current period will be paid out of future contributions; and~~
 - (b) Employees' benefits are determined by the length of their service and the participating entities have no realistic means of withdrawing from the plan without paying a contribution for the benefits earned by employees up to the date of withdrawal. Such a plan creates actuarial risk for the entity; if the ultimate cost of benefits already earned at the end of the reporting date period is more than expected, the entity will have to either increase its contributions or persuade employees to accept a reduction in benefits. Therefore, such a plan is a defined benefit plan.
35. Where sufficient information is available about a multi-employer plan that is a defined benefit plan, an entity accounts for its proportionate share of the defined benefit obligation, plan assets, and post-employment benefit cost associated with the plan in the same way as for any other defined benefit plan. However, ~~there may be cases where~~ an entity may not be able to identify its share of the underlying financial position and performance of the plan with sufficient reliability for accounting purposes. This may occur if:
- (a) The entity does not have access to sufficient information about the plan that satisfies the requirements of this Standard; or
 - (b) The plan exposes the participating entities to actuarial risks associated with the current and former employees of other entities, with the result that there is no consistent and reliable basis for allocating the obligation, plan assets, and cost to individual entities participating in the plan.
- In those cases, an entity accounts for the plan as if it were a defined contribution plan, and discloses the additional information required by paragraph ~~33~~ 144N.

36. There may be a contractual agreement between the multi-employer plan and its participants ~~entities~~ that determines how the surplus in the plan will be distributed to the participants ~~entities~~ (or the deficit funded). A participant in a multi-employer plan with such an agreement that accounts for the plan as a defined contribution plan in accordance with paragraph 33 shall recognize the asset or liability that arises from the contractual agreement, and the resulting revenue or expense in surplus or deficit.
- ~~37. IPSAS 19, *Provisions, Contingent Liabilities and Contingent Assets* requires an entity to disclose information about some contingent liabilities. In the context of a multi-employer plan, a contingent liability may arise from, for example:~~
- ~~(a) Actuarial losses relating to other participating entities because each entity that participates in a multi-employer plan shares in the actuarial risks of every other participating entity; or~~
- ~~(b) Any responsibility under the terms of a plan to finance any shortfall in the plan if other entities cease to participate.~~
38. ...
- 38A. In determining when to recognize, and how to measure, a liability relating to the wind-up of a multi-employer defined benefit plan, or the entity's withdrawal from a multi-employer defined benefit plan, an entity shall apply IPSAS 19, *Provisions, Contingent Liabilities and Contingent Assets*.**

The heading above paragraph 39 is amended. Paragraphs 41 and 42 are amended. New text is underlined and deleted text is struck through. Paragraphs 39 and 40 are retained and not amended.

Defined Benefit Plans ~~where the Participating that Share Risks between Entities are~~ under Common Control

39. ...
40. ...
41. There are cases in the public sector where a controlling entity and one or more controlled entities participate in a defined benefit plan. Unless there is a contractual agreement, binding arrangement, or stated policy, as specified in paragraph 40, the controlled entity accounts on a defined contribution basis and the controlling entity accounts on a defined benefit basis in its consolidated financial statements. The controlled entity also discloses that it accounts on a defined contribution basis in its separate financial statements. A controlled entity that accounts on a defined contribution basis also provides details of the controlling entity, and states that, in the controlling entity's consolidated financial statements, accounting is on a defined benefit basis. The controlled entity also makes the disclosures required in paragraph 42 ~~2~~ 144O.
42. **Participation in such a plan is a related party transaction for each individual group entity. An entity shall therefore, in its separate ~~or individual~~ financial statements, make the following disclosures: disclose the information required by paragraph 144O.**
- ~~(a) The contractual agreement, binding arrangement, or stated policy for charging the net defined benefit cost or the fact that there is no such policy.~~
- ~~(b) The policy for determining the contribution to be paid by the entity.~~

- ~~(c) If the entity accounts for an allocation of the net defined benefit cost in accordance with paragraph 40, all the information about the plan as a whole in accordance with paragraphs 140–142.~~
- ~~(d) If the entity accounts for the contribution payable for the period in accordance with paragraph 40, the information about the plan as a whole required in accordance with paragraphs 141(b)–(e), (j), (n), (o), (q), and 142. The other disclosures required by paragraph 141 do not apply.~~

State Plans

Paragraphs 43 and 44 are amended. New text is underlined and deleted text is struck through. Paragraphs 45 and 46 are retained and not amended.

43. An entity shall account for ~~post-employment benefits under~~ state plans in the same way as for a multi-employer plan (see paragraphs 32 and ~~33~~ 38A).
44. State plans are established by legislation to cover all entities (or all entities in a particular category, for example, a specific industry) and are operated by national, state, or local government or by another body (for example, an agency created specifically for this purpose). This Standard deals only with employee benefits of the entity, and does not address accounting for any obligations under state plans related to employees and past employees of entities that are not controlled by the reporting entity. While governments may establish state plans and provide benefits to employees of private sector entities and/or self-employed individuals, obligations arising in respect of such plans are not addressed in this Standard. Some plans established by an entity provide both compulsory benefits, as a substitute for benefits that would otherwise be covered under a state plan, and additional voluntary benefits. Such plans are not state plans.
45. ...
46. ...

Composite Social Security Programs

Paragraphs 47 and 48 are amended. New text is underlined and deleted text is struck through. Paragraph 49 is retained, not amended and included in the Exposure Draft to make it more straightforward for constituents to comment on the section on Composite Social Security Programs (see Specific Matter for Comment 2).

47. **A reporting entity shall account for post-employment benefits under composite social security programs in the same way as for a multi-employer plan (see paragraphs 32, 32A and 33).**
48. Composite social security programs are established by legislation and provide benefits to individuals who have satisfied eligibility criteria. Such criteria principally include a requirement that an individual has attained a retirement age laid down in legislation. There may also be other criteria related to factors such as income and personal wealth. In some jurisdictions, the composite social security program may also operate to provide benefits as consideration in exchange for employment services rendered by individuals. This Standard only addresses

obligations in composite social security programs that arise as consideration in exchange for service rendered by employees and past employees of the reporting entity. This Standard requires a reporting entity to account for obligations for employee benefits that arise under composite social security programs as for a multi-employer plan in accordance with paragraphs 32, 32A and 33.

49. For an economic entity, such as the whole-of-government level, the accounting treatment for obligations for employee benefits under composite social security programs depends upon whether the component of that program operating to provide post-employment benefits to employees of the economic entity is characterized as a defined contribution or a defined benefit plan. In making this judgment, the factors highlighted in paragraph 35 are considered.

Insured Benefits

Paragraphs 50, 51 and 53 are amended. New text is underlined and deleted text is struck through. Paragraph 52 is retained and not amended.

50. **An entity may pay insurance premiums to fund a post-employment benefit plan. The entity shall treat such a plan as a defined contribution plan unless the entity will have (either directly, or indirectly through the plan) a legal or constructive obligation to either:**
- a) **To Ppay the employee benefits directly when they fall due; or**
 - b) **To Ppay further amounts if the insurer does not pay all future employee benefits relating to employee service in the current and prior periods.**

If the entity retains such a legal or constructive obligation, the entity shall treat the plan as a defined benefit plan.

51. The benefits insured by an insurance ~~contract~~ policy need not have a direct or automatic relationship with the entity's obligation for employee benefits. Post-employment benefit plans involving insurance ~~contracts~~ policies are subject to the same distinction between accounting and funding as other funded plans.

52. ...

53. Where an insurance policy ~~(a)~~ is in the name of a specified plan participant or a group of plan participants, and ~~(b)~~ the entity does not have any legal or constructive obligation to cover any loss on the policy, the entity has no obligation to pay benefits to the employees, and the insurer has sole responsibility for paying the benefits. The payment of fixed premiums under such contracts is, in substance, the settlement of the employee benefit obligation, rather than an investment to meet the obligation. Consequently, the entity no longer has an asset or a liability. Therefore, an entity treats such payments as contributions to a defined contribution plan.

Post-employment Benefits—Defined Contribution Plans

Paragraph 54 is amended. New text is underlined and deleted text is struck through.

54. Accounting for defined contribution plans is straightforward because the reporting entity's obligation for each period is determined by the amounts to be contributed for that period. Consequently, no actuarial assumptions are required to measure the obligation or the expense, and there is no possibility of any actuarial gain or loss. Moreover, the obligations are measured

on an undiscounted basis, except where they ~~do not fall due~~ are not expected to be settled wholly within before twelve months after the end of the reporting period in which the employees render the related service.

Recognition and Measurement

Paragraphs 55 and 56 are amended. New text is underlined and deleted text is struck through.

55. **When an employee has rendered service to an entity during a period, the entity shall recognize the contribution payable to a defined contribution plan in exchange for that service:**
- (a) **As a liability (accrued expense), after deducting any contribution already paid. If the contribution already paid exceeds the contribution due for service before the end of the reporting date period, an entity shall recognize that excess as an asset (prepaid expense) to the extent that the prepayment will lead to, for example, a reduction in future payments or a cash refund; and**
 - (b) **As an expense, unless another Standard requires or permits the inclusion of the contribution in the cost of an asset (see, for example, IPSAS 12 and IPSAS 17.)**
56. **~~Where~~ When contributions to a defined contribution plan ~~do not fall due~~ are not expected to be settled wholly within before twelve months after the end of the reporting period in which the employees render the related service, they shall be discounted using the discount rate specified in paragraph 91.**

Disclosure

Paragraphs 57 and 58 are retained and not amended.

57. ...

58. ...

Post-employment Benefits—Defined Benefit Plans

Paragraph 59 is retained and not amended.

59. ...

Recognition and Measurement

Paragraphs 60 and 61 are amended. Paragraphs 67 and 68 are relocated and renumbered as paragraphs 61A and 61B, respectively. New text is underlined and deleted text is struck through. Paragraph 62 is retained and not amended.

60. Defined benefit plans may be unfunded, or they may be wholly or partly funded by contributions by an entity, and sometimes its employees, into an entity₁ or fund₁ that is legally separate from the reporting entity and from which the employee benefits are paid. The payment of funded benefits when they fall due depends not only on the financial position and the investment

performance of the fund but also on an entity's ability, ~~(and willingness)~~, to make good any shortfall in the fund's assets. Therefore, the entity is, in substance, underwriting the actuarial and investment risks associated with the plan. Consequently, the expense recognized for a defined benefit plan is not necessarily the amount of the contribution due for the period.

61. Accounting by an entity for defined benefit plans involves the following steps:

(a) Determining the deficit or surplus. This involves:

~~(a)(i)~~ Using ~~an~~ actuarial techniques, ~~the projected unit credit method~~, to make a reliable estimate of the ~~amount of benefit~~ ultimate cost to the entity of the benefit that employees have earned in return for their service in the current and prior periods (see paragraphs 77–79). This requires an entity to determine how much benefit is attributable to the current and prior periods (see paragraphs 80–84), and to make estimates (actuarial assumptions) about demographic variables (such as employee turnover and mortality) and financial variables (such as future increases in salaries and medical costs) that will ~~influence~~ affect the cost of the benefit (see paragraphs 85–103);

~~(b)(ii)~~ Discounting that benefit ~~using the Projected Unit Credit Method~~ in order to determine the present value of the defined benefit obligation and the current service cost (see paragraphs 77–79 and 91–94);

~~(c)(iii)~~ Determining ~~Deducting~~ the fair value of any plan assets (see paragraphs 118–120) ~~from the present value of the defined benefit obligation;~~

~~(d) Determining the total amount of actuarial gains and losses and the amount of those actuarial gains and losses to be recognized (see paragraphs 105–111);~~

~~(e) Where a plan has been introduced or changed, determining the resulting past service cost (see paragraphs 112–117); and~~

~~(f) Where a plan has been curtailed or settled, determining the resulting gain or loss (see paragraphs 129–135). Where an entity has more than one defined benefit plan, the entity applies these procedures for each material plan separately. For example, a State Government responsible for educational and health services and a number of other services may have separate plans for teachers, healthcare workers, and other employees.~~

(b) Determining the amount of the net defined benefit liability (asset) as the amount of the deficit or surplus determined in (a), adjusted for any effect of limiting a net defined benefit asset to the asset ceiling (see paragraph 73B).

(c) Determining amounts to be recognized in surplus or deficit:

(i) Current service cost (see paragraphs 80–84).

(ii) Any past service cost and gain or loss on settlement (see paragraphs 111A–116D).

(iii) Net interest on the net defined benefit liability (asset) (see paragraphs 135D–135G).

(d) Determining the remeasurements of the net defined benefit liability (asset), to be recognized in net assets/equity, comprising:

(i) Actuarial gains and losses (see paragraphs 135I and 135J);

- (ii) Return on plan assets, excluding amounts included in net interest on the net defined benefit liability (asset) (see paragraph 135K); and
- (iii) Any change in the effect of the asset ceiling (see paragraph 73B), excluding amounts included in net interest on the net defined benefit liability (asset).

Where an entity has more than one defined benefit plan, the entity applies these procedures for each material plan separately.

~~61A.67.~~ **An entity shall determine the ~~present value of defined benefit obligations and the fair value of any plan assets~~ net defined benefit liability (asset) with sufficient regularity that the amounts recognized in the financial statements do not differ materially from the amounts that would be determined at the end of the reporting date period.**

~~61B.68.~~ This Standard encourages, but does not require, an entity to involve a qualified actuary in the measurement of all material post-employment benefit obligations. For practical reasons, an entity may request a qualified actuary to carry out a detailed valuation of the obligation before the end of the reporting date period. Nevertheless, the results of that valuation are updated for any material transactions and other material changes in circumstances (including changes in market prices and interest rates) up to the end of the reporting date period.

62. ...

Accounting for the Constructive Obligation

Paragraph 64 is amended. New text is underlined and deleted text is struck through. Paragraph 63 is retained and not amended.

63. ...

64. The formal terms of a defined benefit plan may permit an entity to terminate its obligation under the plan. Nevertheless, it is usually difficult for an entity to ~~cancel~~ terminate its obligation under a plan (without payment) if employees are to be retained. Therefore, in the absence of evidence to the contrary, accounting for post-employment benefits assumes that an entity that is currently promising such benefits will continue to do so over the remaining working lives of employees.

Statement of Financial Position

Paragraphs 65 and 66, 69-71 and 73 are deleted. Paragraphs 73A and 73B are added. Paragraph 72 is relocated and renumbered as paragraph 73C and amended. New text is underlined and deleted text is struck through. Paragraphs 67 and 68 are retained and not amended.

~~65~~ **~~The amount recognized as a defined benefit liability shall be the net total of the following amounts:~~**

- ~~(a) The present value of the defined benefit obligation at the reporting date (see paragraph 77);~~
- ~~(b) Plus any actuarial gains (less any actuarial losses) not recognized because of the treatment set out in paragraphs 105 and 106;~~
- ~~(c) Minus any past service cost not yet recognized (see paragraph 112); and~~
- ~~(d) Minus the fair value at the reporting date of plan assets (if any) out of which the obligations are to be settled directly (see paragraphs 118–120).~~

- ~~66. The present value of the defined benefit obligation is the gross obligation, before deducting the fair value of any plan assets.~~
- ~~67. ...~~
- ~~68. ...~~
- ~~69. The amount determined under paragraph 65 may be negative (an asset). An entity shall measure the resulting asset at the lower of:~~
- ~~(a) The amount determined under paragraph 65; and~~
 - ~~(b) The total of:~~
 - ~~(i) Any cumulative unrecognized net actuarial losses and past service cost (see paragraphs 105, 106 and 112); and~~
 - ~~(ii) The present value of any economic benefits available in the form of refunds from the plan or reductions in future contributions to the plan. The present value of these economic benefits shall be determined using the discount rate specified in paragraph 91.~~
- ~~70. The application of paragraph 69 shall not result in a gain being recognized solely as a result of an actuarial loss or past service cost in the current period, or in a loss being recognized solely as a result of an actuarial gain in the current period. The entity shall therefore recognize immediately under paragraph 65 the following, to the extent that they arise while the defined benefit asset is determined in accordance with paragraph 69(b):~~
- ~~(a) Net actuarial losses of the current period and past service cost of the current period to the extent that they exceed any reduction in the present value of the economic benefits specified in paragraph 69(b)(ii). If there is no change or an increase in the present value of the economic benefits, the entire net actuarial losses of the current period and past service cost of the current period shall be recognized immediately under paragraph 65.~~
 - ~~(b) Net actuarial gains of the current period after the deduction of past service cost of the current period, to the extent that they exceed any increase in the present value of the economic benefits specified in paragraph 69(b)(ii). If there is no change or a decrease in the present value of the economic benefits, the entire net actuarial gains of the current period after the deduction of past service cost of the current period shall be recognized immediately under paragraph 65.~~
- ~~71. Paragraph 70 applies to an entity only if it has, at the beginning or end of the accounting period, a surplus in a defined benefit plan and cannot, based on the current terms of the plan, recover that surplus fully through refunds or reductions in future contributions. In such cases, past service cost and actuarial losses that arise in the period, the recognition of which is deferred under paragraph 65, will increase the amount specified in paragraph 69(b)(i). If that increase is not offset by an equal decrease in the present value of economic benefits that qualify for recognition under paragraph 69(b)(ii), there will be an increase in the net total specified by paragraph 69(b) and, hence, a recognized gain. Paragraph 70 prohibits the recognition of a gain in these circumstances. The opposite effect arises with actuarial gains that arise in the period, the recognition of which is deferred under paragraph 65, to the extent that the actuarial gains reduce cumulative unrecognized actuarial losses. Paragraph 70 prohibits the recognition of a~~

~~loss in these circumstances. For examples of the application of this paragraph, see Illustrative Examples, paragraphs IE8–IE30.~~

~~73. The limit in paragraph 69(b) does not override the delayed recognition of certain actuarial losses (see paragraphs 105 and 106) and certain past service cost (see paragraph 112), other than as specified in paragraph 70. Paragraph 141(f)(iii) requires an entity to disclose any amount not recognized as an asset because of the limit in paragraph 69(b).~~

73A. An entity shall recognize the net defined benefit liability (asset) in the statement of financial position.

73B. When an entity has a surplus in a defined benefit plan, it shall measure the net defined benefit asset at the lower of:

(a) The surplus in the defined benefit plan; and

(b) The asset ceiling, determined using the discount rate specified in paragraph 91.

~~73C.72. A net defined benefit~~ An asset may arise where a defined benefit plan has been overfunded, or ~~in certain cases where actuarial gains are recognized~~ have arisen. An entity recognizes ~~an~~ a net defined benefit asset in such cases because:

(a) The entity controls a resource, which is the ability to use the surplus to generate future benefits;

(b) That control is a result of past events (contributions paid by the entity and service rendered by the employee); and

(c) Future economic benefits are available to the entity in the form of a reduction in future contributions or a cash refund, either directly to the entity or indirectly to another plan in deficit. The asset ceiling is the present value of those future benefits.

The heading above paragraph 74 is deleted. Paragraphs 74 and 75 are deleted. Deleted text is struck through.

Statement of Financial Performance

~~74. An entity shall recognize the net total of the following amounts in surplus or deficit, except to the extent that another Standard requires or permits their inclusion in the cost of an asset:~~

~~(a) Current service cost (see paragraphs 76–104);~~

~~(b) Interest cost (see paragraph 95);~~

~~(c) The expected return on any plan assets (see paragraphs 125–127) and on any reimbursement rights (see paragraph 124);~~

~~(d) Actuarial gains and losses, as required in accordance with the entity's accounting policy (see paragraphs 105–109);~~

~~(e) Past service cost (see paragraph 112);~~

~~(f) The effect of any curtailments or settlements (see paragraphs 129 and 130); and~~

~~(g) The effect of the limit in paragraph 69(b), unless it is recognized in the Statement of Changes in Net Assets/Equity in accordance with paragraph 108.~~

~~75. Other Standards require the inclusion of certain employee benefit costs within the cost of assets, such as inventories or property, plant, and equipment (see IPSAS 12 and IPSAS 17). Any post-employment benefit costs included in the cost of such assets include the appropriate proportion of the components listed in paragraph 74.~~

Recognition and Measurement—Present Value of Defined Benefit Obligations and Current Service Cost

Paragraphs 76-82, 84, 86, 88 and 90 are amended. New text is underlined and deleted text is struck through. Paragraphs 83, 85, 87 and 89 are retained and not amended.

76. The ultimate cost of a defined benefit plan may be influenced by many variables, such as final salaries, employee turnover and mortality, employee contributions and medical cost trends ~~and, for a funded plan, the investment earnings on the plan assets~~. The ultimate cost of the plan is uncertain and this uncertainty is likely to persist over a long period of time. In order to measure the present value of the post-employment benefit obligations and the related current service cost, it is necessary to:
- (a) To Apply an actuarial valuation method (see paragraphs 77–79);
 - (b) To Attribute benefit to periods of service (see paragraphs 80–84); and
 - (c) To Make actuarial assumptions (see paragraphs 85–96K).

Actuarial Valuation Method

77. **An entity shall use the Projected Unit Credit Method to determine the present value of its defined benefit obligations and the related current service cost and, where applicable, past service cost.**
78. The ~~Projected Unit Credit Method~~ (sometimes known as the accrued benefit method prorated on service or as the benefit/years of service method) sees each period of service as giving rise to an additional unit of benefit entitlement (see paragraphs 80–84), and measures each unit separately to build up the final obligation (see paragraphs 85–96K).
79. An entity discounts the whole of a post-employment benefit obligation, even if part of the obligation ~~falls due within~~ is expected to be settled before twelve months of ~~after~~ the reporting date period.

Attributing Benefit to Periods of Service

80. **In determining the present value of its defined benefit obligations and the related current service cost and, where applicable, past service cost, an entity shall attribute benefit to periods of service under the plan’s benefit formula. However, if an employee’s service in later years will lead to a materially higher level of benefit than in earlier years, an entity shall attribute benefit on a straight-line basis from:**
- (a) **The date when service by the employee first leads to benefits under the plan (whether or not the benefits are conditional on further service); until**
 - (b) **The date when further service by the employee will lead to no material amount of further benefits under the plan, other than from further salary increases.**

81. The ~~Projected Unit Credit Method~~ requires an entity to attribute benefit to the current period (in order to determine current service cost) and the current and prior periods (in order to determine the present value of defined benefit obligations). An entity attributes benefit to periods in which the obligation to provide post-employment benefits arises. That obligation arises as employees render services in return for post-employment benefits that an entity expects to pay in future reporting periods. Actuarial techniques allow an entity to measure that obligation with sufficient reliability to justify recognition of a liability.
82. Employee service gives rise to an obligation under a defined benefit plan even if the benefits are conditional on future employment (in other words, they are not vested). Employee service before the vesting date gives rise to a constructive obligation because, at the end of each successive reporting date period, the amount of future service that an employee will have to render before becoming entitled to the benefit is reduced. In measuring its defined benefit obligation, an entity considers the probability that some employees may not satisfy any vesting requirements. Similarly, although ~~certain~~ some post-employment benefits, for example, post-employment medical benefits, become payable only if a specified event occurs when an employee is no longer employed, an obligation is created when the employee renders service that will provide entitlement to the benefit if the specified event occurs. The probability that the specified event will occur affects the measurement of the obligation, but does not determine whether the obligation exists.
83. ...
84. Where the amount of a benefit is a constant proportion of final salary for each year of service, future salary increases will affect the amount required to settle the obligation that exists for service before the end of the reporting date period, but do not create an additional obligation. Therefore:
- (a) For the purpose of paragraph 80(b), salary increases do not lead to further benefits, even though the amount of the benefits is dependent on final salary; and
 - (b) The amount of benefit attributed to each period is a constant proportion of the salary to which the benefit is linked.

Actuarial Assumptions

85. ...
86. Actuarial assumptions are an entity's best estimates of the variables that will determine the ultimate cost of providing post-employment benefits. Actuarial assumptions comprise:
- (a) Demographic assumptions about the future characteristics of current and former employees (and their dependants) who are eligible for benefits. Demographic assumptions deal with matters such as:
 - (i) Mortality, ~~both during and after employment~~ (see paragraphs 90A and 90B);
 - (ii) Rates of employee turnover, disability, and early retirement;
 - (iii) The proportion of plan members with dependants who will be eligible for benefits; ~~and~~
 - (iv) ~~Claim rates under medical plans.~~ The proportion of plan members who will select each form of payment option available under the plan terms; and

- (v) Claim rates under medical plans.
- (b) Financial assumptions, dealing with items such as:
 - (i) The discount rate (see paragraphs 91–~~95~~94);
 - (ii) ~~Future salary and b~~Benefit levels, excluding any cost of the benefits to be met by employees, and future salary (see paragraphs 96–40096H);
 - (iii) In the case of medical benefits, future medical costs, including, ~~where material, the cost of administering claims and benefit payments~~ claim handling costs (i.e., the costs that will be incurred in processing and resolving claims, including legal and adjuster’s fees) (see paragraphs 40496I–40496K); and
 - (iv) ~~The expected rate of return on plan assets (see paragraphs 125–127)~~ Taxes payable by the plan on contributions relating to service before the reporting date or on benefits resulting from that service.
- 87. ...
- 88. Actuarial assumptions are mutually compatible if they reflect the economic relationships between factors such as inflation, rates of salary increase, ~~the return on plan assets~~, and discount rates. For example, all assumptions that depend on a particular inflation level (such as assumptions about interest rates and salary and benefit increases) in any given future period assume the same inflation level in that period.
- 89. ...
- 90. **Financial assumptions shall be based on market expectations, at the end of the reporting date period, for the period over which the obligations are to be settled.**

New heading “Actuarial assumptions: mortality” is added above paragraph 90A. Paragraphs 90A and 90B are added. Paragraph 95 is deleted. New text is underlined and deleted text is struck through. Paragraphs 91-94 are retained and not amended.

Actuarial Assumptions: Mortality

- 90A. **An entity shall determine its mortality assumptions by reference to its best estimate of the mortality of plan members both during and after employment.**
- 90B. In order to estimate the ultimate cost of the benefit an entity takes into consideration expected changes in mortality, for example by modifying standard mortality tables with estimates of mortality improvements.

Actuarial Assumptions—Discount Rate

- 91. ...
- 92. ...
- 93. ...
- 94. ...

- ~~95. Interest cost is computed by multiplying the discount rate as determined at the start of the period by the present value of the defined benefit obligation throughout that period, taking account of any material changes in the obligation. The present value of the obligation will differ from the liability recognized in the statement of financial position, (a) because the liability is recognized after deducting the fair value of any plan assets, and (b) because some actuarial gains and losses, and some past service cost, are not recognized immediately. The Illustrative Examples, paragraphs IE1–IE6, illustrate the computation of interest cost, among other things.~~

Actuarial Assumptions—Salaries, Benefits and Medical Costs

Paragraph 96 is amended. Paragraphs 96A, 96D; 96E; 96F and 96G are added. Paragraphs 97, 101 and 102 are relocated and renumbered as paragraph 96C, 96I and 96J, respectively. Paragraph 99, 100 and 103 are relocated, amended and renumbered as paragraph 96B, 96H and 96K, respectively. Paragraphs 98 and 104 are deleted. New text is underlined and deleted text is struck through.

96. ~~Post-employment benefit obligations~~ **An entity shall be measured measure its defined benefit obligations on a basis that reflects:**
- (a) ~~Estimated future salary increases~~ **The benefits set out in the terms of the plan (or resulting from any constructive obligation that goes beyond those terms) at the end of the reporting period;**
 - (b) ~~The benefits set out in the terms of the plan (or resulting from any constructive obligation that goes beyond those terms) at the reporting date;~~ **Any estimated future salary increases that affect the benefits payable;**
 - (c) ~~Estimated future changes in the level of any state benefits that affect the benefits payable under a defined benefit plan, if, and only if, either:~~ **The effect of any limit on the employer's share of the cost of the future benefits;**
 - ~~(i) Those changes were enacted before the reporting date; or~~
 - ~~(ii) Past history, or other reliable evidence, indicates that those state benefits will change in some predictable manner, for example, in line with future changes in general price levels or general salary levels.~~
 - (d) **Contributions from employees or third parties that reduce the ultimate cost to the entity of those benefits; and**
 - (e) **Estimated future changes in the level of any state benefits that affect the benefits payable under a defined benefit plan, if, and only if, either:**
 - (i) Those changes were enacted before the end of the reporting period; or**
 - (ii) Historical data, or other reliable evidence, indicate that those state benefits will change in some predictable manner, for example, in line with future changes in general price levels or general salary levels.**
- 96A. ~~Actuarial assumptions reflect future benefit changes that are set out in the formal terms of a plan (or a constructive obligation that goes beyond those terms) at the end of the reporting period. This is the case if, for example:~~

- (a) The entity has a history of increasing benefits, for example, to mitigate the effects of inflation, and there is no indication that this practice will change in the future;
- (b) The entity is obliged, by either the formal terms of a plan (or a constructive obligation that goes beyond those terms) or legislation, to use any surplus in the plan for the benefit of plan participants (see paragraph 114(c)); or
- (c) Benefits vary in response to a performance target or other criteria. For example, the terms of the plan may state that it will pay reduced benefits or require additional contributions from employees if the plan assets are insufficient. The measurement of the obligation reflects the best estimate of the effect of the performance target or other criteria.
- ~~96B.99.~~ Actuarial assumptions do not reflect future benefit changes that are not set out in the formal terms of the plan (or a constructive obligation) at the end of the reporting date period. Such changes will result in:
- (a) Past service cost, to the extent that they change benefits for service before the change; and
- (b) Current service cost for periods after the change, to the extent that they change benefits for service after the change.
- ~~96C.97.~~ Estimates of future salary increases take account of inflation, seniority, promotion, and other relevant factors, such as supply and demand in the employment market.
- ~~96D.~~ Some defined benefit plans limit the contributions that an entity is required to pay. The ultimate cost of the benefits takes account of the effect of a limit on contributions. The effect of a limit on contributions is determined over the shorter of:
- (a) The estimated life of the entity; and
- (b) The estimated life of the plan.
- ~~96E.~~ Some defined benefit plans require employees or third parties to contribute to the cost of the plan. Contributions by employees reduce the cost of the benefits to the entity. An entity considers whether third-party contributions reduce the cost of the benefits to the entity, or are a reimbursement right as described in paragraph 121. Contributions by employees or third parties are either set out in the formal terms of the plan (or arise from a constructive obligation that goes beyond those terms), or are discretionary. Discretionary contributions by employees or third parties reduce service cost upon payment of these contributions to the plan.
- ~~96F.~~ Contributions from employees or third parties set out in the formal terms of the plan either reduce service cost (if they are linked to service), or affect remeasurements of the net defined benefit liability (asset) (if they are not linked to service). An example of contributions that are not linked to service is when the contributions are required to reduce a deficit arising from losses on plan assets or from actuarial losses. If contributions from employees or third parties are linked to service, those contributions reduce the service cost as follows:
- (a) If the amount of the contributions is dependent on the number of years of service, an entity shall attribute the contributions to periods of service using the same attribution method required by paragraph 80 for the gross benefit (ie either using the plan's contribution formula or on a straight-line basis); or

(b) If the amount of the contributions is independent of the number of years of service, the entity is permitted to recognise such contributions as a reduction of the service cost in the period in which the related service is rendered. Examples of contributions that are independent of the number of years of service include those that are a fixed percentage of the employee's salary, a fixed amount throughout the service period or dependent on the employee's age.

Paragraph AG13A provides related application guidance.

96G. For contributions from employees or third parties that are attributed to periods of service in accordance with paragraph 96F(a), changes in the contributions result in:

(a) Current and past service cost (if those changes are not set out in the formal terms of a plan and do not arise from a constructive obligation); or

(b) Actuarial gains and losses (if those changes are set out in the formal terms of a plan, or arise from a constructive obligation).

~~96H.400.~~ Some post-employment benefits are linked to variables, such as the level of benefit entitlements from social security pensions or state medical care. The measurement of such benefits reflects ~~expected changes~~ the best estimate ~~in~~ of such variables, based on ~~past history~~ historical data and other reliable evidence.

~~96I.401.~~ **Assumptions about medical costs shall take account of estimated future changes in the cost of medical services, resulting from both inflation and specific changes in medical costs.**

~~96J.402.~~ Measurement of post-employment medical benefits requires assumptions about the level and frequency of future claims and the cost of meeting those claims. An entity estimates future medical costs on the basis of historical data about the entity's own experience, supplemented where necessary by historical data from other entities, insurance companies, medical providers, or other sources. Estimates of future medical costs consider the effect of technological advances, changes in health care utilization or delivery patterns, and changes in the health status of plan participants.

~~96K.403.~~ The level and frequency of claims is particularly sensitive to the age, health status, and gender of employees (and their dependants), and may be sensitive to other factors such as geographical location. Therefore, historical data ~~is~~ are adjusted to the extent that the demographic mix of the population differs from that of the population used as a basis for the ~~historical~~ data. It is also adjusted where there is reliable evidence that historical trends will not continue.

~~98.~~ ~~If the formal terms of a plan (or a constructive obligation that goes beyond those terms) require an entity to change benefits in future periods, the measurement of the obligation reflects those changes. This is the case when, for example:~~

~~(a) The entity has a past history of increasing benefits, for example, to mitigate the effects of inflation, and there is no indication that this practice will change in the future; or~~

~~(b) Actuarial gains have already been recognized in the financial statements, and the entity is obliged, by either the formal terms of a plan (or a constructive obligation that goes beyond those terms) or legislation, to use any surplus in the plan for the benefit of plan participants (see paragraph 114(c)).~~

~~104. Some post-employment health care plans require employees to contribute to the medical costs covered by the plan. Estimates of future medical costs take account of any such contributions, based on the terms of the plan at the reporting date (or based on any constructive obligation that goes beyond those terms.) Changes in those employee contributions result in past service cost or, where applicable, curtailments. The cost of meeting claims may be reduced by benefits from state or other medical providers (see paragraphs 96(c) and 100.)~~

The heading "*Actuarial Gains and Losses*" above paragraph 105 is deleted. Paragraphs 105-111 are deleted. Deleted text is struck through.

~~*Actuarial Gains and Losses*~~

~~105. In measuring its defined benefit liability in accordance with paragraph 65, an entity shall, subject to paragraph 70, recognize a portion (as specified in paragraph 106) of its actuarial gains and losses as revenue or expense if the net cumulative unrecognized actuarial gains and losses at the end of the previous reporting period exceeded the greater of:~~

- ~~(a) 40% of the present value of the defined benefit obligation at that date (before deducting plan assets); and~~
- ~~(b) 40% of the fair value of any plan assets at that date.~~

~~These limits shall be calculated and applied separately for each defined benefit plan.~~

~~106. The portion of actuarial gains and losses to be recognized for each defined benefit plan is the excess determined in accordance with paragraph 105, divided by the expected average remaining working lives of the employees participating in that plan. However, an entity may adopt any systematic method that results in faster recognition of actuarial gains and losses, provided that the same basis is applied to both gains and losses, and the basis is applied consistently from period to period. An entity may apply such systematic methods to actuarial gains and losses even if they are within the limits specified in paragraph 105.~~

~~107. If, as permitted by paragraph 106, an entity adopts a policy of recognizing actuarial gains and losses in the period in which they occur, it may recognize them as a separate item directly in net assets/equity, in accordance with paragraphs 108 and 109, providing it does so for:~~

- ~~(a) All of its defined benefit plans; and~~
- ~~(b) All of its actuarial gains and losses.~~

~~108. Actuarial gains and losses recognized directly in net assets/equity as permitted by paragraph 107 shall be presented in the statement of changes in net assets/equity in accordance with paragraph 118(b) of IPSAS 1.~~

~~109. An entity that recognizes actuarial gains and losses in accordance with paragraph 107 shall also recognize any adjustments arising from the limit in paragraph 69(b) outside surplus or deficit in the statement of changes in net assets/equity, in accordance with paragraph 118(b) of IPSAS 1. Actuarial gains and losses and adjustments arising from the limit in paragraph 69(b) that have been recognized directly in the statement of changes in net assets/equity shall be recognized immediately in accumulated surpluses or deficits. They shall not be recognized in surplus or deficit in a subsequent period.~~

- ~~110. Actuarial gains and losses may result from increases or decreases in either the present value of a defined benefit obligation or the fair value of any related plan assets. Causes of actuarial gains and losses include, for example:~~
- ~~(a) Unexpectedly high or low rates of employee turnover, early retirement or mortality, or of increases in salaries, benefits (if the formal or constructive terms of a plan provide for inflationary benefit increases), or medical costs;~~
 - ~~(b) The effect of changes in estimates of future employee turnover, early retirement, or mortality, or of increases in salaries, benefits (if the formal or constructive terms of a plan provide for inflationary benefit increases), or medical costs;~~
 - ~~(c) The effect of changes in the discount rate; and~~
 - ~~(d) Differences between the actual return on plan assets and the expected return on plan assets (see paragraphs 125–127).~~
- ~~111. In the long term, actuarial gains and losses may offset one another. Therefore, estimates of post-employment benefit obligations may be viewed as a range (or corridor) around the best estimate. An entity is permitted, but not required, to recognize actuarial gains and losses that fall within that range. This Standard requires an entity to recognize, as a minimum, a specified portion of the actuarial gains and losses that fall outside a corridor of plus or minus 10%. The Illustrative Examples, paragraphs IE1–IE6, illustrate the treatment of actuarial gains and losses, among other things. The Standard also permits systematic methods of faster recognition, provided that those methods satisfy the conditions set out in paragraph 106. Such permitted methods include, for example, immediate recognition of all actuarial gains and losses, both within and outside the corridor.~~

The heading “Past service cost and gains and losses on settlement” above paragraph 111A is added. Paragraphs 111A-111C are added. New text is underlined.

Past service cost and gains and losses on settlement

- 111A. Before determining past service cost, or a gain or loss on settlement, an entity shall remeasure the net defined benefit liability (asset) using the current fair value of plan assets and current actuarial assumptions (including current market interest rates and other current market prices) reflecting the benefits offered under the plan before the plan amendment, curtailment or settlement.**
- 111B. An entity need not distinguish between past service cost resulting from a plan amendment, past service cost resulting from a curtailment and a gain or loss on settlement if these transactions occur together. In some cases, a plan amendment occurs before a settlement, such as when an entity changes the benefits under the plan and settles the amended benefits later. In those cases an entity recognizes past service cost before any gain or loss on settlement.
- 111C. A settlement occurs together with a plan amendment and curtailment if a plan is terminated with the result that the obligation is settled and the plan ceases to exist. However, the termination of a plan is not a settlement if the plan is replaced by a new plan that offers benefits that are, in substance, the same.

Past Service Cost

Paragraphs 112, 113, 115 and 116 are deleted. Paragraphs 113A-103E are added. Paragraph 117 is relocated and renumbered as 113F. Paragraph 114 is amended. New text is underlined and deleted text is struck through.

- ~~112. In measuring its defined benefit liability under paragraph 65, an entity shall, subject to paragraph 70, recognize past service cost as an expense on a straight-line basis over the average period until the benefits become vested. To the extent that the benefits are already vested immediately following the introduction of, or changes to, a defined benefit plan, an entity shall recognize past service cost immediately.~~
- ~~113. Past service cost arises when an entity introduces a defined benefit plan that attributes benefits to past service or changes the benefits payable for past service under an existing defined benefit plan. Such changes are in return for employee service over the period until the benefits concerned are vested. Therefore, the entity recognizes past service cost over that period, regardless of the fact that the cost refers to employee service in previous periods. The entity measures past service cost as the change in the liability resulting from the amendment (see paragraph 77). Negative past service cost arises when an entity changes the benefits attributable to past service so that the present value of the defined benefit obligation decreases.~~
- 113A. Past service cost is the change in the present value of the defined benefit obligation resulting from a plan amendment or curtailment.
- 113B. **An entity shall recognize past service cost as an expense at the earlier of the following dates:**
- (a) When the plan amendment or curtailment occurs; and**
- (b) When the entity recognizes related restructuring costs (see IPSAS 19) or termination benefits (see paragraph 159A).**
- ~~113C. A plan amendment occurs when an entity introduces, or withdraws, a defined benefit plan or changes the benefits payable under an existing defined benefit plan.~~
- ~~113D. A curtailment occurs when an entity significantly reduces the number of employees covered by a plan. A curtailment may arise from an isolated event, such as the closing of a plant, discontinuance of an operation or termination or suspension of a plan.~~
- ~~113E. Past service cost may be either positive (when benefits are introduced or changed so that the present value of the defined benefit obligation increases) or negative (when benefits are withdrawn or changed so that the present value of the defined benefit obligation decreases).~~
- ~~113F.447. Where an entity reduces certain benefits payable under an existing defined benefit plan and, at the same time, increases other benefits payable under the plan for the same employees, the entity treats the change as a single net change.~~
114. Past service cost excludes:
- (a) The effect of differences between actual and previously assumed salary increases on the obligation to pay benefits for service in prior years (there is no past service cost because actuarial assumptions allow for projected salaries);

- (b) ~~Under~~ Underestimates and ~~over-estimates~~ overestimates of discretionary pension increases when an entity has a constructive obligation to grant such increases (there is no past service cost because actuarial assumptions allow for such increases);
- (c) Estimates of benefit improvements that result from actuarial gains or from the return on plan assets that have been recognized in the financial statements if the entity is obliged, by either the formal terms of a plan (or a constructive obligation that goes beyond those terms) or legislation, to use any surplus in the plan for the benefit of plan participants, even if the benefit increase has not yet been formally awarded (there is no past service cost because the resulting increase in the obligation is an actuarial loss ~~and not past service cost~~, see paragraph ~~98(b)96A~~); and
- (d) The increase in vested benefits (i.e., benefits that are not conditional on future employment, see paragraph 82) when, in the absence of new or improved benefits, employees complete vesting requirements (there is no past service cost because the entity recognized the estimated cost of benefits as current service cost as the service was rendered). ~~and~~
- ~~(e) The effect of plan amendments that reduce benefits for future service (a curtailment).~~
- ~~115. An entity establishes the amortization schedule for past service cost when the benefits are introduced or changed. It would be impracticable to maintain the detailed records needed to identify and implement subsequent changes in that amortization schedule. Moreover, the effect is likely to be material only where there is a curtailment or settlement. Therefore, an entity amends the amortization schedule for past service cost only if there is a curtailment or settlement.~~
- ~~116. Where an entity reduces benefits payable under an existing defined benefit plan, the resulting reduction in the defined benefit liability is recognized as (negative) past service cost over the average period until the reduced portion of the benefits becomes vested.~~

The heading “Gains and losses on settlement” above paragraph 116A is added. Paragraphs 116A-116D are added. New text is underlined.

Gains and losses on settlement

- 116A. The gain or loss on a settlement is the difference between:
- (a) The present value of the defined benefit obligation being settled, as determined on the date of settlement; and
- (b) The settlement price, including any plan assets transferred and any payments made directly by the entity in connection with the settlement.
- 116B. **An entity shall recognize a gain or loss on the settlement of a defined benefit plan when the settlement occurs.**
- 116C. A settlement occurs when an entity enters into a transaction that eliminates all further legal or constructive obligation for part or all of the benefits provided under a defined benefit plan (other than a payment of benefits to, or on behalf of, employees in accordance with the terms of the plan and included in the actuarial assumptions). For example, a one-off transfer of significant employer obligations under the plan to an insurance company through the purchase of an

insurance policy is a settlement; a lump sum cash payment, under the terms of the plan, to plan participants in exchange for their rights to receive specified post-employment benefits is not.

- 116D. In some cases, an entity acquires an insurance policy to fund some or all of the employee benefits relating to employee service in the current and prior periods. The acquisition of such a policy is not a settlement if the entity retains a legal or constructive obligation (see paragraph 50) to pay further amounts if the insurer does not pay the employee benefits specified in the insurance policy. Paragraphs 121–124 deal with the recognition and measurement of reimbursement rights under insurance policies that are not plan assets.

Recognition and Measurement—Plan Assets

Fair Value of Plan Assets

Paragraphs 118 and 120 are amended. New text is underlined and deleted text is struck through. Paragraph 119 is retained and not amended.

118. The fair value of any plan assets is deducted from the present value of the defined benefit obligation in determining the amount recognized in the statement of financial position under paragraph 65 deficit or surplus. ~~When no market price is available, the fair value of plan assets is estimated, for example, by discounting expected future cash flows using a discount rate that reflects both the risk associated with the plan assets and the maturity or expected disposal date of those assets (or, if they have no maturity, the expected period until the settlement of the related obligation).~~
119. ...
120. Where plan assets include qualifying insurance policies that exactly match the amount and timing of some or all of the benefits payable under the plan, the fair value of those insurance policies is deemed to be the present value of the related obligations, ~~as described in paragraph 65~~ (subject to any reduction required if the amounts receivable under the insurance policies are not recoverable in full).

Reimbursements

Paragraphs 121-124 are amended. New text is underlined and deleted text is struck through.

121. **When, and only when, it is virtually certain that another party will reimburse some or all of the expenditure required to settle a defined benefit obligation, an entity shall:**
- (a) **Recognize its right to reimbursement as a separate asset. The entity shall measure the asset at fair value. ~~In all other respects, an entity shall treat that asset in the same way as plan assets. In the statement of financial performance, the expense relating to a defined benefit plan may be presented net of the amount recognized for a reimbursement.~~**
 - (b) **Disaggregate and recognize changes in the fair value of its right to reimbursement in the same way as for changes in the fair value of plan assets (see paragraphs 135E and 135F). The components of defined benefit cost recognized in accordance with paragraph 135A may be recognized net of amounts relating to changes in the carrying amount of the right to reimbursement.**

122. Sometimes, an entity is able to look to another party, such as an insurer, to pay part or all of the expenditure required to settle a defined benefit obligation. Qualifying insurance policies, as defined in paragraph 10, are plan assets. An entity accounts for qualifying insurance policies in the same way as for all other plan assets, and paragraph 121 ~~does~~ is not apply relevant (see paragraphs 50–53 and 120).
123. When an insurance policy held by an entity is not a qualifying insurance policy, that insurance policy is not a plan asset. Paragraph 121 ~~deals with~~ is relevant to such cases: the entity recognizes its right to reimbursement under the insurance policy as a separate asset, rather than as a deduction in determining the defined benefit liability recognized under paragraph 65; ~~in all other respects, the entity treats that asset in the same way as plan assets deficit or surplus. In particular, the defined benefit liability recognized under paragraph 65 is increased (reduced) to the extent that net cumulative actuarial gains (losses) on the defined benefit obligation and on the related reimbursement right remain unrecognized under paragraphs 105 and 106.~~ Paragraph 141(f)(iv) 144F(b) requires the entity to disclose a brief description of the link between the reimbursement right and the related obligation.
124. If the right to reimbursement arises under an insurance policy or a legally binding agreement that exactly matches the amount and timing of some or all of the benefits payable under a defined benefit plan, the fair value of the reimbursement right is deemed to be the present value of the related obligation, ~~as described in paragraph 65~~ (subject to any reduction required if the reimbursement is not recoverable in full).

The heading “*Return on Plan Assets*” above paragraph 125 is deleted. Paragraphs 125-127 are deleted. Deleted text is struck through.

Return on Plan Assets

125. ~~The expected return on plan assets is one component of the expense recognized in the statement of financial performance. The difference between the expected return on plan assets and the actual return on plan assets is an actuarial gain or loss; it is included with the actuarial gains and losses on the defined benefit obligation in determining the net amount that is compared with the limits of the 10% corridor specified in paragraph 105.~~
126. ~~The expected return on plan assets is based on market expectations, at the beginning of the period, for returns over the entire life of the related obligation. The expected return on plan assets reflects changes in the fair value of plan assets held during the period as a result of actual contributions paid into the fund and actual benefits paid out of the fund.~~
127. ~~In determining the expected and actual return on plan assets, an entity deducts expected administration costs, other than those included in the actuarial assumptions used to measure the obligation.~~

The heading “*Entity Combinations*” above paragraph 128 is deleted. Paragraph 128 is deleted. Deleted text is struck through.

Entity Combinations

~~128. In determining the assets and liabilities to be recognized related to post-employment benefits in an entity combination, an entity considers the international or national accounting standard dealing with entity combinations.~~

The heading “Curtailments and Settlements” above paragraph 129 is deleted. Paragraphs 129-135 are deleted. Deleted text is struck through.

Curtailments and Settlements

~~129. An entity shall recognize gains or losses on the curtailment or settlement of a defined benefit plan when the curtailment or settlement occurs. The gain or loss on a curtailment or settlement shall comprise:~~

- ~~(a) Any resulting change in the present value of the defined benefit obligation;~~
- ~~(b) Any resulting change in the fair value of the plan assets; and~~
- ~~(c) Any related actuarial gains and losses and past service cost that, under paragraphs 105 and 112, had not previously been recognized.~~

~~130. Before determining the effect of a curtailment or settlement, an entity shall remeasure the obligation (and the related plan assets, if any) using current actuarial assumptions (including current market interest rates and other current market prices).~~

~~131. A curtailment occurs when an entity either:~~

- ~~(a) Is demonstrably committed to make a significant reduction in the number of employees covered by a plan; or~~
- ~~(b) Amends the terms of a defined benefit plan so that a significant element of future service by current employees will no longer qualify for benefits, or will qualify only for reduced benefits.~~

~~A curtailment may arise from an isolated event, such as the closing of a plant, discontinuance of an operation or termination or suspension of a plan, or a reduction in the extent to which future salary increases are linked to the benefits payable for past service. Curtailments are often linked with a restructuring. When this is the case, an entity accounts for a curtailment at the same time as for a related restructuring.~~

~~131A. When a plan amendment reduces benefits, only the effect of the reduction for future service is a curtailment. The effect of any reduction for past service is a negative past service cost.~~

~~132. A settlement occurs when an entity enters into a transaction that eliminates all further legal or constructive obligation for part or all of the benefits provided under a defined benefit plan, for example, when a lump-sum cash payment is made to, or on behalf of, plan participants in exchange for their rights to receive specified post-employment benefits.~~

~~133. In some cases, an entity acquires an insurance policy to fund some or all of the employee benefits relating to employee service in the current and prior periods. The acquisition of such a policy is not a settlement if the entity retains a legal or constructive obligation (see paragraph 50) to pay further amounts if the insurer does not pay the employee benefits specified in the~~

~~insurance policy. Paragraphs 121–124 deal with the recognition and measurement of reimbursement rights under insurance policies that are not plan assets.~~

- ~~134. A settlement occurs together with a curtailment if a plan is terminated such that the obligation is settled and the plan ceases to exist. However, the termination of a plan is not a curtailment or settlement if the plan is replaced by a new plan that offers benefits that are, in substance, identical.~~
- ~~135. Where a curtailment relates to only some of the employees covered by a plan, or where only part of an obligation is settled, the gain or loss includes a proportionate share of the previously unrecognized past service cost and actuarial gains and losses. The proportionate share is determined on the basis of the present value of the obligations before and after the curtailment or settlement, unless another basis is more rational in the circumstances. For example, it may be appropriate to apply any gain arising on a curtailment or settlement of the same plan to first eliminate any unrecognized past service cost relating to the same plan.~~

The headings “Components of defined benefit cost”, “Net interest on the net defined benefit liability (asset)” and “Remeasurements of the net defined benefit liability (asset)” are added above paragraphs 135A, 135D and 135H, respectively. Paragraphs 135A-135K are added. New text is underlined.

Components of defined benefit cost

- 135A. An entity shall recognize the components of defined benefit cost, except to the extent that another IPSAS requires or permits their inclusion in the cost of an asset, as follows:**
- (a) Service cost (see paragraphs 76–116D) in surplus or deficit;**
 - (b) Net interest on the net defined benefit liability (asset) (see paragraphs 135D–135G) in surplus or deficit; and**
 - (c) Remeasurements of the net defined benefit liability (asset) (see paragraphs 135H–135K) in net assets/equity.**
- ~~135B. Other IPSASs require the inclusion of some employee benefit costs within the cost of assets, such as inventories and property, plant and equipment (see IPSAS 12 and IPSAS 17). Any post-employment benefit costs included in the cost of such assets include the appropriate proportion of the components listed in paragraph 135A.~~
- 135C. Remeasurements of the net defined benefit liability (asset) recognized in net assets/equity shall not be reclassified to surplus or deficit in a subsequent period. However, the entity may transfer those amounts recognized in net assets/equity within net assets/equity.**

Net interest on the net defined benefit liability (asset)

- 135D. Net interest on the net defined benefit liability (asset) shall be determined by multiplying the net defined benefit liability (asset) by the discount rate specified in paragraph 91, both as determined at the start of the reporting period, taking account of any changes in the net defined benefit liability (asset) during the period as a result of contribution and benefit payments.**

- 135E. Net interest on the net defined benefit liability (asset) can be viewed as comprising interest revenue on plan assets, interest cost on the defined benefit obligation and interest on the effect of the asset ceiling mentioned in paragraph 73B.
- 135F. Interest revenue on plan assets is a component of the return on plan assets, and is determined by multiplying the fair value of the plan assets by the discount rate specified in paragraph 91, both as determined at the start of the reporting period, taking account of any changes in the plan assets held during the period as a result of contributions and benefit payments. The difference between the interest revenue on plan assets and the return on plan assets is included in the remeasurement of the net defined benefit liability (asset).
- 135G. Interest on the effect of the asset ceiling is part of the total change in the effect of the asset ceiling, and is determined by multiplying the effect of the asset ceiling by the discount rate specified in paragraph 91, both as determined at the start of the reporting period. The difference between that amount and the total change in the effect of the asset ceiling is included in the remeasurement of the net defined benefit liability (asset).

Remeasurements of the net defined benefit liability (asset)

- 135H. Remeasurements of the net defined benefit liability (asset) comprise:
- (a) Actuarial gains and losses (see paragraphs 135I and 135J);
 - (b) The return on plan assets (see paragraph 135K), excluding amounts included in net interest on the net defined benefit liability (asset) (see paragraph 135F); and
 - (c) Any change in the effect of the asset ceiling, excluding amounts included in net interest on the net defined benefit liability (asset) (see paragraph 135G).
- 135I. Actuarial gains and losses result from increases or decreases in the present value of the defined benefit obligation because of changes in actuarial assumptions and experience adjustments. Causes of actuarial gains and losses include, for example:
- (a) Unexpectedly high or low rates of employee turnover, early retirement or mortality or of increases in salaries, benefits (if the formal or constructive terms of a plan provide for inflationary benefit increases) or medical costs;
 - (b) The effect of changes to assumptions concerning benefit payment options;
 - (c) The effect of changes in estimates of future employee turnover, early retirement or mortality or of increases in salaries, benefits (if the formal or constructive terms of a plan provide for inflationary benefit increases) or medical costs; and
 - (d) The effect of changes in the discount rate.
- 135J. Actuarial gains and losses do not include changes in the present value of the defined benefit obligation because of the introduction, amendment, curtailment or settlement of the defined benefit plan, or changes to the benefits payable under the defined benefit plan. Such changes result in past service cost or gains or losses on settlement.
- 135K. In determining the return on plan assets, an entity deducts the costs of managing the plan assets and any tax payable by the plan itself, other than tax included in the actuarial assumptions used to measure the defined benefit obligation (paragraph 86). Other administration costs are not deducted from the return on plan assets.

Presentation

Paragraphs 136-138 are retained and not amended.

Offset

136. ...

137. ...

Current/Non-Current Distinction

138. ...

The heading “Financial Components of Post-employment Benefit Costs” above paragraph 139 is deleted. Paragraph 139 is deleted. Deleted text is struck through.

Financial Components of Post-employment Benefit Costs

139. ~~———— This Standard does not specify whether an entity should present current service cost, interest cost, and the expected return on plan assets as components of a single item of revenue or expense on the face of the statement of financial performance.~~

The heading “Components of defined benefit cost” above paragraph 139A is added. Paragraph 139A is added. New text is underlined.

Components of defined benefit cost

139A. Paragraph 135A requires an entity to recognize service cost and net interest on the net defined benefit liability (asset) in surplus or deficit. This Standard does not specify how an entity should present service cost and net interest on the net defined benefit liability (asset). An entity presents those components in accordance with IPSAS 1.

Disclosure

Paragraphs 140-144 are deleted. Paragraphs 144A-144P are added. The headings “Characteristics of defined benefit plans and risks associated”, “Explanation of amounts in the financial statements”, “Amount, timing and uncertainty of future cash flows”, “Multi-employer plans” “Defined benefit plans that share risks between entities under common control” and “Disclosure requirements in other IPSASs” above paragraphs 144E, 144F, 144K, 144N, 144O and 145, respectively, are added. Paragraphs 145 and 146 are retained and not amended.

140. ~~———— **An entity shall disclose information that enables users of financial statements to evaluate the nature of its defined benefit plans and the financial effects of changes in those plans during the period.**~~

141. ~~———— An entity shall disclose the following information about defined benefit plans:~~

~~(a) The entity’s accounting policy for recognizing actuarial gains and losses;~~

- ~~(b) A general description of the type of plan;~~
- ~~(c) A reconciliation of opening and closing balances of the present value of the defined benefit obligation showing separately, if applicable, the effects during the period attributable to each of the following:~~
- ~~(i) Current service cost;~~
 - ~~(ii) Interest cost;~~
 - ~~(iii) Contributions by plan participants;~~
 - ~~(iv) Actuarial gains and losses;~~
 - ~~(v) Foreign currency exchange rate changes on plans measured in a currency different from the entity's presentation currency;~~
 - ~~(vi) Benefits paid;~~
 - ~~(vii) Past service cost;~~
 - ~~(viii) Entity combinations;~~
 - ~~(ix) Curtailments; and~~
 - ~~(x) Settlements.~~
- ~~(d) An analysis of the defined benefit obligation into amounts arising from plans that are wholly unfunded and amounts arising from plans that are wholly or partly funded;~~
- ~~(e) A reconciliation of the opening and closing balances of the fair value of plan assets, and of the opening and closing balances of any reimbursement right recognized as an asset in accordance with paragraph 121 showing separately, if applicable, the effects during the period attributable to each of the following:~~
- ~~(i) Expected return on plan assets;~~
 - ~~(ii) Actuarial gains and losses;~~
 - ~~(iii) Foreign currency exchange rate changes on plans measured in a currency different from the entity's presentation currency;~~
 - ~~(iv) Contributions by the employer;~~
 - ~~(v) Contributions by plan participants;~~
 - ~~(vi) Benefits paid;~~
 - ~~(vii) Entity combinations; and~~
 - ~~(viii) Settlements.~~
- ~~(f) A reconciliation of the present value of the defined benefit obligation in (c) and the fair value of the plan assets in (e) to the assets and liabilities recognized in the statement of financial position, showing at least:~~
- ~~(i) The net actuarial gains or losses not recognized in the statement of financial position (see paragraph 105);~~
 - ~~(ii) The past service cost not recognized in the statement of financial position (see paragraph 112);~~

- ~~(iii) — Any amount not recognized as an asset, because of the limit in paragraph 69(b);~~
- ~~(iv) — The fair value at the reporting date of any reimbursement right recognized as an asset in accordance with paragraph 121 (with a brief description of the link between the reimbursement right and the related obligation); and~~
- ~~(v) — The other amounts recognized in the statement of financial position.~~
- ~~(g) — The total expense recognized in the statement of financial performance for each of the following, and the line item(s) in which they are included:~~
 - ~~(i) — Current service cost;~~
 - ~~(ii) — Interest cost;~~
 - ~~(iii) — Expected return on plan assets;~~
 - ~~(iv) — Expected return on any reimbursement right recognized as an asset in accordance with paragraph 121;~~
 - ~~(v) — Actuarial gains and losses;~~
 - ~~(vi) — Past service cost;~~
 - ~~(vii) — The effect of any curtailment or settlement; and~~
 - ~~(viii) — The effect of the limit in paragraph 69(b).~~
- ~~(h) — The total amount recognized in the statement of changes in net assets/equity for each of the following:~~
 - ~~(i) — Actuarial gains and losses; and~~
 - ~~(ii) — The effect of the limit in paragraph 69(b).~~
- ~~(i) — For entities that recognize actuarial gains and losses in the statement of changes in net assets/equity in accordance with paragraph 107, the cumulative amount of actuarial gains and losses recognized in that statement;~~
- ~~(j) — For each major category of plan assets, which shall include, but is not limited to, equity instruments, debt instruments, property, and all other assets, the percentage or amount that each major category constitutes of the fair value of the total plan assets;~~
- ~~(k) — The amounts included in the fair value of plan assets for:~~
 - ~~(i) — Each category of the entity's own financial instruments; and~~
 - ~~(ii) — Any property occupied by, or other assets used by, the entity.~~
- ~~(l) — A narrative description of the basis used to determine the overall expected rate of return on assets, including the effect of the major categories of plan assets;~~
- ~~(m) — The actual return on plan assets, as well as the actual return on any reimbursement right recognized as an asset in accordance with paragraph 121;~~
- ~~(n) — The principal actuarial assumptions used as at the reporting date, including, when applicable:~~
 - ~~(i) — The discount rates;~~
 - ~~(ii) — The basis on which the discount rate has been determined;~~

~~(iii) The expected rates of return on any plan assets for the periods presented in the financial statements;~~

~~(iv) The expected rates of return for the periods presented in the financial statements on any reimbursement right recognized as an asset in accordance with paragraph 121;~~

~~(v) The expected rates of salary increases (and of changes in an index or other variable specified in the formal or constructive terms of a plan as the basis for future benefit increases);~~

~~(vi) Medical cost trend rates; and~~

~~(vii) Any other material actuarial assumptions used.~~

~~An entity shall disclose each actuarial assumption in absolute terms (for example, as an absolute percentage) and not just as a margin between different percentages or other variables;~~

~~(o) The effect of an increase of one percentage point and the effect of a decrease of one percentage point in the assumed medical cost trend rates on:~~

~~(i) The aggregate of the current service cost and interest cost components of net periodic post-employment medical costs; and~~

~~(ii) The accumulated post-employment benefit obligation for medical costs.~~

~~(iii) For the purposes of this disclosure, all other assumptions shall be held constant. For plans operating in a high inflation environment, the disclosure shall be the effect of a percentage increase or decrease in the assumed medical cost trend rate of a significance similar to one percentage point in a low inflation environment;~~

~~(p) The amounts for the current annual period and previous four annual periods of:~~

~~(i) The present value of the defined benefit obligation, the fair value of the plan assets, and the surplus or deficit in the plan; and~~

~~(ii) The experience adjustments arising on:~~

~~a. The plan liabilities expressed either as (1) an amount, or (2) a percentage of the plan liabilities at the reporting date; and~~

~~b. The plan assets expressed either as (1) an amount, or (2) a percentage of the plan assets at the reporting date.~~

~~(q) The employer's best estimate, as soon as it can reasonably be determined, of contributions expected to be paid to the plan during the annual period beginning after the reporting date.~~

~~142. Paragraph 141(b) requires a general description of the type of plan. Such a description distinguishes, for example, flat salary pension plans from final salary pension plans, and from post-employment medical plans. The description of the plan includes informal practices that give rise to constructive obligations included in the measurement of the defined benefit obligation in accordance with paragraph 63. Further detail is not required.~~

~~143. When an entity has more than one defined benefit plan, disclosures may be made in total, separately for each plan, or in such groupings as are considered to be the most useful. It may be useful to distinguish groupings by criteria such as the following:~~

- ~~(a) The geographical location of the plans; or~~
- ~~(b) Whether plans are subject to materially different risks, for example, by distinguishing flat salary pension plans from final salary pension plans, and from post-employment medical plans.~~

~~When an entity provides disclosures in total for a grouping of plans, such disclosures are provided in the form of weighted averages or of relatively narrow ranges.~~

~~144. Paragraph 33 requires additional disclosures about multi-employer defined benefit plans that are treated as if they were defined contribution plans.~~

144A. An entity shall disclose information that:

- (a) Explains the characteristics of its defined benefit plans and risks associated with them (see paragraph 144E);
- (b) Identifies and explains the amounts in its financial statements arising from its defined benefit plans (see paragraphs 144F–144J); and
- (c) Describes how its defined benefit plans may affect the amount, timing and uncertainty of the entity's future cash flows (see paragraphs 144K–144M).

144B. To meet the objectives in paragraph 144A, an entity shall consider all the following:

- (a) The level of detail necessary to satisfy the disclosure requirements;
- (b) How much emphasis to place on each of the various requirements;
- (c) How much aggregation or disaggregation to undertake; and
- (d) Whether users of financial statements need additional information to evaluate the quantitative information disclosed.

144C. If the disclosures provided in accordance with the requirements in this Standard and other IPSASs are insufficient to meet the objectives in paragraph 144A, an entity shall disclose additional information necessary to meet those objectives. For example, an entity may present an analysis of the present value of the defined benefit obligation that distinguishes the nature, characteristics and risks of the obligation. Such a disclosure could distinguish:

- (a) Between amounts owing to active members, deferred members, and pensioners.
- (b) Between vested benefits and accrued but not vested benefits.
- (c) Between conditional benefits, amounts attributable to future salary increases and other benefits.

144D. An entity shall assess whether all or some disclosures should be disaggregated to distinguish plans or groups of plans with materially different risks. For example, an entity may disaggregate disclosure about plans showing one or more of the following features:

- (a) Different geographical locations.

- (b) Different characteristics such as flat salary pension plans, final salary pension plans or post-employment medical plans.
- (c) Different regulatory environments.
- (d) Different reporting segments.
- (e) Different funding arrangements (eg wholly unfunded, wholly or partly funded).

Characteristics of defined benefit plans and risks associated with them

144E. An entity shall disclose:

- (a) Information about the characteristics of its defined benefit plans, including:
 - (i) The nature of the benefits provided by the plan (eg final salary defined benefit plan or contribution-based plan with guarantee).
 - (ii) A description of the regulatory framework in which the plan operates, for example the level of any minimum funding requirements, and any effect of the regulatory framework on the plan, such as the asset ceiling (see paragraph 73B).
 - (iii) A description of any other entity's responsibilities for the governance of the plan, for example responsibilities of trustees or of management of the plan.
- (b) A description of the risks to which the plan exposes the entity, focused on any unusual, entity-specific or plan-specific risks, and of any significant concentrations of risk. For example, if plan assets are invested primarily in one class of investments, eg property, the plan may expose the entity to a concentration of property market risk.
- (c) A description of any plan amendments, curtailments and settlements.
- (d) The basis on which the discount rate has been determined.

Explanation of amounts in the financial statements

144F. An entity shall provide a reconciliation from the opening balance to the closing balance for each of the following, if applicable:

- (a) The net defined benefit liability (asset), showing separate reconciliations for:
 - (i) Plan assets.
 - (ii) The present value of the defined benefit obligation.
 - (iii) The effect of the asset ceiling.
- (b) Any reimbursement rights. An entity shall also describe the relationship between any reimbursement right and the related obligation.

144G. Each reconciliation listed in paragraph 144F shall show each of the following, if applicable:

- (a) Current service cost.
- (b) Interest revenue or expense.
- (c) Remeasurements of the net defined benefit liability (asset), showing separately:
 - (i) The return on plan assets, excluding amounts included in interest in (b).

- (ii) Actuarial gains and losses arising from changes in demographic assumptions (see paragraph 86(a)).
 - (iii) Actuarial gains and losses arising from changes in financial assumptions (see paragraph 86(b)).
 - (iv) Changes in the effect of limiting a net defined benefit asset to the asset ceiling, excluding amounts included in interest in (b). An entity shall also disclose how it determined the maximum economic benefit available, i.e. whether those benefits would be in the form of refunds, reductions in future contributions or a combination of both.
- (d) Past service cost and gains and losses arising from settlements. As permitted by paragraph 111B, past service cost and gains and losses arising from settlements need not be distinguished if they occur together.
 - (e) The effect of changes in foreign exchange rates.
 - (f) Contributions to the plan, showing separately those by the employer and by plan participants.
 - (g) Payments from the plan, showing separately the amount paid in respect of any settlements.
 - (h) The effects of public sector combinations and disposals.
- 144H. An entity shall disaggregate the fair value of the plan assets into classes that distinguish the nature and risks of those assets, subdividing each class of plan asset into those that have a quoted market price in an active market and those that do not. For example, and considering the level of disclosure discussed in paragraph 144B, an entity could distinguish between:
- (a) Cash and cash equivalents;
 - (b) Equity instruments (segregated by industry type, company size, geography etc);
 - (c) Debt instruments (segregated by type of issuer, credit quality, geography etc);
 - (d) Real estate (segregated by geography etc);
 - (e) Derivatives (segregated by type of underlying risk in the contract, for example, interest rate contracts, foreign exchange contracts, equity contracts, credit contracts, longevity swaps etc);
 - (f) Investment funds (segregated by type of fund);
 - (g) Asset-backed securities; and
 - (h) Structured debt.
- 144I. An entity shall disclose the fair value of the entity's own transferable financial instruments held as plan assets, and the fair value of plan assets that are property occupied by, or other assets used by, the entity.
- 144J. An entity shall disclose the significant actuarial assumptions used to determine the present value of the defined benefit obligation (see paragraph 86). Such disclosure shall be in absolute terms (eg as an absolute percentage, and not just as a margin between different percentages and

other variables). When an entity provides disclosures in total for a grouping of plans, it shall provide such disclosures in the form of weighted averages or relatively narrow ranges.

Amount, timing and uncertainty of future cash flows

144K. An entity shall disclose:

- (a) A sensitivity analysis for each significant actuarial assumption (as disclosed under paragraph 144J) as of the end of the reporting period, showing how the defined benefit obligation would have been affected by changes in the relevant actuarial assumption that were reasonably possible at that date.
- (b) The methods and assumptions used in preparing the sensitivity analyses required by (a) and the limitations of those methods.
- (c) Changes from the previous period in the methods and assumptions used in preparing the sensitivity analyses, and the reasons for such changes.

144L. An entity shall disclose a description of any asset-liability matching strategies used by the plan or the entity, including the use of annuities and other techniques, such as longevity swaps, to manage risk.

144M. To provide an indication of the effect of the defined benefit plan on the entity's future cash flows, an entity shall disclose:

- (a) A description of any funding arrangements and funding policy that affect future contributions.
- (b) The expected contributions to the plan for the next reporting period.
- (c) Information about the maturity profile of the defined benefit obligation. This will include the weighted average duration of the defined benefit obligation and may include other information about the distribution of the timing of benefit payments, such as a maturity analysis of the benefit payments.

Multi-employer plans

144N. If an entity participates in a multi-employer defined benefit plan, it shall disclose:

- (a) A description of the funding arrangements, including the method used to determine the entity's rate of contributions and any minimum funding requirements.
- (b) A description of the extent to which the entity can be liable to the plan for other entities' obligations under the terms and conditions of the multi-employer plan.
- (c) A description of any agreed allocation of a deficit or surplus on:
 - (i) Wind-up of the plan; or
 - (ii) The entity's withdrawal from the plan.
- (d) If the entity accounts for that plan as if it were a defined contribution plan in accordance with paragraph 33, it shall disclose the following, in addition to the information required by (a)–(c) and instead of the information required by paragraphs 144E–144M:
 - (i) The fact that the plan is a defined benefit plan.

- (ii) The reason why sufficient information is not available to enable the entity to account for the plan as a defined benefit plan.
- (iii) The expected contributions to the plan for the next reporting period.
- (iv) Information about any deficit or surplus in the plan that may affect the amount of future contributions, including the basis used to determine that deficit or surplus and the implications, if any, for the entity.
- (v) An indication of the level of participation of the entity in the plan compared with other participating entities. Examples of measures that might provide such an indication include the entity's proportion of the total contributions to the plan or the entity's proportion of the total number of active members, retired members, and former members entitled to benefits, if that information is available.

Defined benefit plans that share risks between entities under common control

144O. If an entity participates in a defined benefit plan that shares risks between entities under common control, it shall disclose:

- (a) The contractual agreement or stated policy for charging the net defined benefit cost or the fact that there is no such policy.
- (b) The policy for determining the contribution to be paid by the entity.
- (c) If the entity accounts for an allocation of the net defined benefit cost as noted in paragraph 40, all the information about the plan as a whole required by paragraphs 144A–144M.
- (d) If the entity accounts for the contribution payable for the period as noted in paragraph 40, the information about the plan as a whole required by paragraphs 144A–144C, 144E, 144H–144J and 144M(a) and (b).

144P. The information required by paragraph 144O(c) and (d) can be disclosed by cross-reference to disclosures in another group entity's financial statements if:

- (a) That group entity's financial statements separately identify and disclose the information required about the plan; and
- (b) That group entity's financial statements are available to users of the financial statements on the same terms as the financial statements of the entity and at the same time as, or earlier than, the financial statements of the entity.

Disclosure requirements in other IPSASs

145. ...

146. ...

Other Long-Term Employee Benefits

Paragraphs 147 and 148 are amended. New text is underlined and deleted text is struck through. Paragraph 149 is retained and not amended.

147. ~~Other long-term employee benefits may include, for example items such as the following, if not expected to be settled wholly before twelve months after the end of the reporting period in which the employees render the related service:~~
- ~~(a) Long-term compensated paid absences such as long service or sabbatical leave;~~
 - ~~(b) Jubilee or other long service benefits;~~
 - ~~(c) Long-term disability benefits;~~
 - ~~(d) Bonuses and profit sharing and bonuses payable twelve months or more after the end of the period in which the employees render the related service;~~
 - ~~(e) Deferred compensation paid twelve months or more after the end of the period in which it is earned remuneration; and~~
 - ~~(f) Compensation payable by the entity until an individual enters new employment.~~
148. The measurement of other long-term employee benefits is not usually subject to the same degree of uncertainty as the measurement of post-employment benefits. ~~Furthermore, the introduction of, or changes to, other long-term employee benefits rarely causes a material amount of past service cost. For these this reasons, this Standard requires a simplified method of accounting for other long-term employee benefits. This method differs from the accounting required for post-employment benefits as follows:~~
- ~~(a) Actuarial gains and losses are recognized immediately and no corridor is applied; and~~
 - ~~(b) All past service cost is recognized immediately.~~
- Unlike the accounting required for post-employment benefits, this method does not recognize remeasurements in net assets/equity.
149. ...

Recognition and Measurement

Paragraph 150 is deleted. Paragraph 150A is added. Paragraphs 151 and 152 are amended. New text is underlined and deleted text is struck through.

- ~~150. The amount recognized as a liability for other long-term employee benefits shall be the net total of the following amounts:~~
- ~~(a) The present value of the defined benefit obligation at the reporting date (see paragraph 77);~~
 - ~~(b) Minus the fair value at the reporting date of plan assets (if any) out of which the obligations are to be settled directly (see paragraphs 118–120).~~
- ~~In measuring the liability, an entity shall apply paragraphs 55–104, excluding paragraphs 65 and 74. An entity shall apply paragraph 121 in recognizing and measuring any reimbursement right.~~
- 150A. In recognizing and measuring the surplus or deficit in another long-term employee benefit plan, an entity shall apply paragraphs 60–96K and 118–120. An entity shall apply paragraphs 121–124 in recognising and measuring any reimbursement right.**

151. For other long-term employee benefits, an entity shall recognize the net total of the following amounts ~~as expense or (subject to paragraph 69) revenue in surplus or deficit, except to the extent that another IPSAS requires or permits their inclusion in the cost of an asset:~~
- (a) ~~Current s~~Service cost (see paragraphs 76–116D);
 - (b) ~~Interest cost~~ Net interest on the net defined benefit liability (asset) (see paragraphs 135D-135G);
 - (c) ~~The expected return on any plan assets (see paragraphs 125–127) and on any reimbursement right recognized as an asset (see paragraph 121)~~ Remeasurements of the net defined benefit liability (asset) (see paragraphs 135H–135K);
 - (d) ~~Actuarial gains and losses, which shall all be recognized immediately;~~
 - (e) ~~Past service cost, which shall all be recognized immediately; and~~
 - (f) ~~The effect of any curtailments or settlements (see paragraphs 129 and 130).~~
152. One form of other long-term employee benefit is long-term disability benefit. If the level of benefit depends on the length of service, an obligation arises when the service is rendered. Measurement of that obligation reflects the probability that payment will be required, and the length of time for which payment is expected to be made. If the level of benefit is the same for any disabled employee regardless of years of service, the expected cost of those benefits is recognized when an event occurs that causes a long-term disability. ~~Paragraph 149 highlights the possibility that long-term disability benefit payments may be subject to a higher degree of uncertainty than other long-term employee benefits.~~

Disclosure

Paragraph 153 is amended. New text is underlined and deleted text is struck through.

153. Although this Standard does not require specific disclosures about other long-term employee benefits, other IPSASs may require disclosures; ~~for example, where the expense resulting from such benefits is material, and so would require disclosure in accordance with IPSAS 1. When required by IPSAS 20, an entity discloses information about other long-term employee benefits for key management personnel. For example, IPSAS 20 requires disclosures about employee benefits for key management personnel. IPSAS 1 requires disclosure of employee benefits expense.~~

Termination Benefits

Paragraph 154 is amended. Paragraphs 154A-154E are added. New text is underlined and deleted text is struck through.

154. This Standard deals with termination benefits separately from other employee benefits, because the event ~~which~~ that gives rise to an obligation is the termination of employment rather than employee service. Termination benefits result from either an entity's decision to terminate the employment or an employee's decision to accept an entity's offer of benefits for termination of employment.

- 154A. Termination benefits do not include employee benefits resulting from termination of employment at the request of the employee without an entity's offer, or as a result of mandatory retirement requirements, because those benefits are post-employment benefits. Some entities provide a lower level of benefit for termination of employment at the request of the employee (in substance, a post-employment benefit) than for termination of employment at the request of the entity. The difference between the benefit provided for termination of employment at the request of the employee and a higher benefit provided at the request of the entity is a termination benefit.
- 154B. The form of the employee benefit does not determine whether it is provided for service or for termination of the employee's employment. Termination benefits are typically lump sum payments, but sometimes also include:
- (a) Enhancement of post-employment benefits, either indirectly through an employee benefit plan or directly.
 - (b) Salary until the end of a specified notice period if the employee renders no further service that provides economic benefits to the entity.
- 154C. Indicators that an employee benefit is provided for services include the following:
- (a) The benefit is conditional on future service being provided (including benefits that increase if further service is provided).
 - (b) The benefit is provided in accordance with the terms of an employee benefit plan.
- 154D. Some termination benefits are provided in accordance with the terms of an existing employee benefit plan. For example, they may be specified by statute, employment contract or union agreement, or may be implied as a result of the employer's past practice of providing similar benefits. As another example, if an entity makes an offer of benefits available for more than a short period, or there is more than a short period between the offer and the expected date of actual termination, the entity considers whether it has established a new employee benefit plan and hence whether the benefits offered under that plan are termination benefits or post-employment benefits. Employee benefits provided in accordance with the terms of an employee benefit plan are termination benefits if they both result from an entity's decision to terminate an employee's employment and are not conditional on future service being provided.
- 154E. Some employee benefits are provided regardless of the reason for the employee's departure. The payment of such benefits is certain (subject to any vesting or minimum service requirements) but the timing of their payment is uncertain. Although such benefits are described in some jurisdictions as termination indemnities or termination gratuities, they are post-employment benefits rather than termination benefits, and an entity accounts for them as post-employment benefits.

Recognition

Paragraphs 155-159 are deleted. Paragraphs 159A-159C are added. Paragraph 160 is amended. New text is underlined and deleted text is struck through.

155. ~~An entity shall recognize termination benefits as a liability and an expense when, and only when, the entity is demonstrably committed to either:~~

- ~~(a) Terminate the employment of an employee or group of employees before the normal retirement date; or~~
- ~~(b) Provide termination benefits as a result of an offer made in order to encourage voluntary redundancy.~~
156. ~~An entity is demonstrably committed to a termination when, and only when, the entity has a detailed formal plan for the termination, and is without realistic possibility of withdrawal. The detailed plan shall include, as a minimum:~~
- ~~(a) The location, function, and approximate number of employees whose services are to be terminated;~~
- ~~(b) The termination benefits for each job classification or function; and~~
- ~~(c) The time at which the plan will be implemented. Implementation shall begin as soon as possible and the period of time to complete implementation shall be such that material changes to the plan are not likely.~~
157. ~~An entity may be committed, (a) by legislation, (b) by contractual or other agreements with employees or their representatives, or (c) by a constructive obligation based on business practice, custom, or a desire to act equitably, to make payments (or provide other benefits) to employees when it terminates their employment. Such payments are termination benefits. Termination benefits are typically lump-sum payments, but sometimes also include:~~
- ~~(a) Enhancement of retirement benefits or of other post-employment benefits, either indirectly through an employee benefit plan or directly; and~~
- ~~(b) Salary until the end of a specified notice period if the employee renders no further service that provides economic benefits to the entity.~~
158. ~~Some employee benefits are payable regardless of the reason for the employee's departure. The payment of such benefits is certain (subject to any vesting or minimum service requirements) but the timing of their payment is uncertain. Although such benefits are described in some countries as termination indemnities, or termination gratuities, they are post-employment benefits rather than termination benefits, and an entity accounts for them as post-employment benefits. Some entities provide a lower level of benefit for voluntary termination at the request of the employee (in substance, a post-employment benefit) than for involuntary termination at the request of the entity. The additional benefit payable on involuntary termination is a termination benefit.~~
159. ~~Termination benefits do not provide an entity with future economic benefits, and are recognized as an expense immediately.~~
- 159A. An entity shall recognize a liability and expense for termination benefits at the earlier of the following dates:**
- (a) When the entity can no longer withdraw the offer of those benefits; and**
- (b) When the entity recognizes costs for a restructuring that is within the scope of IPSAS 19 and involves the payment of termination benefits.**
- 159B. For termination benefits payable as a result of an employee's decision to accept an offer of benefits for the termination of employment, the time when an entity can no longer withdraw the offer of termination benefits is the earlier of:

- (a) When the employee accepts the offer; and
- (b) When a restriction (eg a legal, regulatory or contractual requirement or other restriction) on the entity's ability to withdraw the offer takes effect. This would be when the offer is made, if the restriction existed at the time of the offer.
- 159C. For termination benefits payable as a result of an entity's decision to terminate an employee's employment, the entity can no longer withdraw the offer when the entity has communicated to the affected employees a plan of termination meeting all of the following criteria:
- (a) Actions required to complete the plan indicate that it is unlikely that significant changes to the plan will be made.
- (b) The plan identifies the number of employees whose employment is to be terminated, their job classifications or functions and their locations (but the plan need not identify each individual employee) and the expected completion date.
- (c) The plan establishes the termination benefits that employees will receive in sufficient detail that employees can determine the type and amount of benefits they will receive when their employment is terminated.
160. ~~Where~~ When an entity recognizes termination benefits, the entity may also have to account for a plan amendment or a curtailment of retirement benefits or other employee benefits (see paragraph 113B).

Measurement

Paragraphs 161 and 162 are deleted. Paragraphs 162A-162B are added. New text is underlined and deleted text is struck through.

161. ~~Where termination benefits fall due more than 12 months after the reporting date, they shall be discounted using the discount rate specified in paragraph 91.~~
162. ~~In the case of an offer made to encourage voluntary redundancy, the measurement of termination benefits shall be based on the number of employees expected to accept the offer.~~
- 162A. An entity shall measure termination benefits on initial recognition, and shall measure and recognize subsequent changes, in accordance with the nature of the employee benefit, provided that if the termination benefits are an enhancement to post-employment benefits, the entity shall apply the requirements for post-employment benefits. Otherwise:
- (a) If the termination benefits are expected to be settled wholly before twelve months after the end of the reporting period in which the termination benefit is recognized, the entity shall apply the requirements for short-term employee benefits.
- (b) If the termination benefits are not expected to be settled wholly before twelve months after the end of the reporting period, the entity shall apply the requirements for other long-term employee benefits.
- 162B. Because termination benefits are not provided for service, paragraphs 80–83 relating to the attribution of the benefit to periods of service are not relevant.

Disclosure

Paragraphs 163-165 are deleted. Paragraph 165A is added. New text is underlined and deleted text is struck through.

- ~~163. Where there is uncertainty about the number of employees who will accept an offer of termination benefits, a contingent liability exists. As required by IPSAS 19, an entity discloses information about the contingent liability unless the possibility of an outflow in settlement is remote.~~
- ~~164. As required by IPSAS 1, an entity discloses the nature and amount of an expense if it is material. Termination benefits may result in an expense needing disclosure in order to comply with this requirement.~~
- ~~165. Where required by IPSAS 20, an entity discloses information about termination benefits for key management personnel.~~
- 165A. Although this Standard does not require specific disclosures about termination benefits, other IPSASs may require disclosures. For example, IPSAS 20 requires disclosures about employee benefits for key management personnel. IPSAS 1 requires disclosure of employee benefits expense.

First time adoption of this Standard

- 166. ...
- 167. ...
- 168. ...
- 169. ...
- 170. ...
- 171. ...
- 172. ...
- 173. ...
- 174. ...
- 175. ...
- 176. ...

The heading “Transitional Provisions” above paragraph 176A is added. Paragraph 176A is added. New text is underlined.

Transitional Provisions

- 176A. An entity shall apply this Standard retrospectively, in accordance with IPSAS 3 *Accounting Policies, Changes in Accounting Estimates and Errors*, except that:

- (a) An entity need not adjust the carrying amount of assets outside the scope of this Standard for changes in employee benefit costs that were included in the carrying amount before the date of initial application. The date of initial application is the beginning of the earliest prior period presented in the first financial statements in which the entity adopts this Standard.
- (b) In financial statements for periods beginning before DD/MM/YY, an entity need not present comparative information for the disclosures required by paragraph 144K about the sensitivity of the defined benefit obligation.

Effective Date

Paragraph 177C is added. New text is underlined and deleted text is struck through. Paragraphs 177, 177A, 177B and 178 are retained and not amended.

177. ...

177A. ...

177B. ...

177C. This Standard was amended by *Amendments to IPSAS 25, Employee Benefits* issued in MM/YY. An entity shall apply these amendments for annual financial statements covering periods beginning on or after DD/MM/YY. Earlier application is encouraged. If an entity applies these amendments for annual financial statements covering periods on or after DD/MM/YY, it shall disclose that fact.

178. ...

Appendix A: Application Guidance

This Appendix is an integral part of IPSAS 25.

Paragraphs AG13A and AG13B are added. Paragraphs AG3 and AG14-AG18 are deleted. Paragraphs AG2, AG4, AG5, AG7-AG10 and AG12 are amended. The headings, “Example Illustrating Paragraphs 96E and 96F: Contributions from employees or third parties” and “Example Illustrating Paragraph 154-162B: Termination Benefits” above paragraphs AG13A and AG13B, respectively, are added. The headings, “Example Illustrating Paragraph 73: Limits on Recognition of Plan Asset”, “Example Illustrating Paragraph 113: Accounting for Past Service Cost”, “Example Illustrating Paragraphs 121–123: Reimbursements”, “Example Illustrating Paragraph 125–127: Return on Plan Assets”, “Example Illustrating Paragraph 135: Accounting for a Curtailment Without a Settlement” and “Example Illustrating Paragraphs 166 to 168: Determining the Initial Liability” above paragraphs AG3, AG14, AG15, AG16, AG17 and AG18, respectively, are deleted. New text is underlined and deleted text is struck through. Paragraphs AG1, AG6, AG11 and AG13 are retained and not amended.

Example Illustrating Paragraph 21: Accounting for Performance-Related Bonus Plan

AG1. ...

Example Illustrating Paragraph 36: Accounting for a Multi-Employer Plan

AG2. Along with similar entities in State X, Local Government Unit A participates in a multi-employer defined benefit plan. Because the plan exposes the participating entities to actuarial risks associated with the current and former employees of other local government units participating in the plan, there is no consistent and reliable basis for allocating the obligation, plan assets, and cost to individual local government units participating in the plan. Local Government Unit A therefore accounts for the plan as if it were a defined contribution plan. A funding valuation, which is not drawn up on the basis of assumptions compatible with the requirements of this Standard, shows a deficit of CU480 million^(a) ~~currency units~~ in the plan. The plan has agreed, under a binding arrangement, a schedule of contributions with the participating employers in the plan that will eliminate the deficit over the next five years. Local Government Unit A's total contributions under the contract are CU40 million ~~currency units~~.

The entity recognizes a liability for the contributions adjusted for the time value of money and an equal expense in surplus or deficit.

(a) In this Standard monetary amounts are denominated in “currency units (CU)”.

Example Illustrating Paragraph 73: Limits on Recognition of Plan Asset

AG3. ~~_____~~ A defined benefit plan has the following characteristics:

Present value of the obligation	1100
Fair value of plan assets	(1190)
	(90)
Unrecognized actuarial losses	(110)
Unrecognized past service cost	(70)

Negative amount determined under paragraph 65	(270)
Present value of available future refunds and reductions in future contributions	60
<i>The limit under paragraph 69(b) is computed as follows:</i>	
Unrecognized actuarial losses	110
Unrecognized past service cost	70
Present value of available future refunds and reductions in future contributions	60
Limit	240

~~240 is less than 270. Therefore, the entity recognizes an asset of 240 and discloses that the limit in paragraph 69(b) reduced the carrying amount of the asset by 30 (see paragraph 141(f)(iii)).~~

Example Illustrating Paragraph 78: Projected Unit Credit Method

AG4. A lump sum benefit is payable on termination of service and equal to 1% of final salary for each year of service. The salary in year 1 is CU10,000 and is assumed to increase at 7% (compound) each year. The discount rate used is 10% per annum. The following table shows how the obligation builds up for an employee who is expected to leave at the end of year five, assuming that there are no changes in actuarial assumptions. For simplicity, this example ignores the additional adjustment needed to reflect the probability that the employee may leave the entity at an earlier or later date.

Year	1	2	3	4	5
<i>Benefit attributed to:</i>					
– prior years	0	131	262	393	524
– current year (1% of final salary)	<u>131</u>	<u>131</u>	<u>131</u>	<u>131</u>	<u>131</u>
– current and prior years	<u>131</u>	<u>262</u>	<u>393</u>	<u>524</u>	<u>655</u>
Year	1	2	3	4	5
Opening obligation	–	89	196	324	476
Interest at 10%	–	9	20	33	48
Current service cost	<u>89</u>	<u>98</u>	<u>108</u>	<u>119</u>	<u>131</u>
Closing obligation	<u>89</u>	<u>196</u>	<u>324</u>	<u>476</u>	<u>655</u>

Note:

1. The opening obligation is the present value of benefit attributed to prior years.
2. The current service cost is the present value of benefit attributed to the current year.
3. The closing obligation is the present value of benefit attributed to current and prior years.

Examples Illustrating Paragraph 81: Attributing Benefit to Years of Service

AG5. A defined benefit plan provides a lump sum benefit of CU100 payable on retirement for each year of service.

A benefit of CU100 is attributed to each year. The current service cost is the present value of CU100. The present value of the defined benefit obligation is the present value of CU100, multiplied by the number of years of service up to the end of the reporting period.

If the benefit is payable immediately when the employee leaves the entity, the current service cost and the present value of the defined benefit obligation reflect the date at which the employee is expected to leave. Thus, because of the effect of discounting, they are less than the amounts that would be determined if the employee left at the end of the reporting period.

AG6. ...

Examples Illustrating Paragraph 82: Vesting and Non-Vesting Benefits

AG7. A plan pays a benefit of CU100 for each year of service. The benefits vest after 10 years of service.

A benefit of CU100 is attributed to each year. In each of the first 10 years, the current service cost and the present value of the obligation reflect the probability that the employee may not complete ~~ten~~ 10 years of service.

AG8. A plan pays a benefit of CU100 for each year of service, excluding service before the age of 25. The benefits vest immediately.

No benefit is attributed to service before the age of 25, because service before that date does not lead to benefits (conditional or unconditional). A benefit of CU100 is attributed to each subsequent year.

Examples Illustrating Paragraph 83: Attributing Benefits to Accounting Periods

AG9. A plan pays a lump sum benefit of CU1,000 that vests after 10 years of service. The plan provides no further benefit for subsequent service.

A benefit of CU100 (CU1,000 divided by 10) is attributed to each of the first 10 years. The current service cost in each of the first 10 years reflects the probability that the employee may not complete 10 years of service. No benefit is attributed to subsequent years.

AG10. A plan pays a lump sum retirement benefit of CU2,000 to all employees who are still employed at the age of 55 after 20 years of service, or who are still employed at the age of 65, regardless of their length of service.

For employees who join before the age of 35, service first leads to benefits under the plan at the age of 35 (an employee could leave at the age of 30 and return at the age of 33, with no effect on the amount or timing of benefits). Those benefits are conditional on further service. Also, service beyond the age of 55 will lead to no material amount of further benefits. For these employees, the entity attributes benefit of CU100 (CU2,000 divided by 20) to each year from the age of 35 to the age of 55.

For employees who join between the ages of 35 and 45, service beyond twenty years will lead to no material amount of further benefits. For these employees, the entity attributes benefit of 100 (CU2,000 divided by 20) to each of the first ~~twenty~~ 20 years.

For an employee who joins at the age of 55, service beyond ~~ten~~ 10 years will lead to no material amount of further benefits. For this employee, the entity attributes benefit of CU200 (CU2,000 divided by 10) to each of the first 10 years.

For all employees, the current service cost and the present value of the obligation reflect the probability that the employee may not complete the necessary period of service.

AG11. ...

AG12. A post-employment medical plan reimburses 10% of an employee’s post-employment medical costs if the employee leaves after more than 10 and less than 20 years of service, and 50% of those costs if the employee leaves after 20 or more years of service.

Service in later years will lead to a materially higher level of benefit than in earlier years. Therefore, for employees expected to leave after 20 or more years, the entity attributes benefit on a straight-line basis under paragraph 881. Service beyond 20 years will lead to no material amount of further benefits. Therefore, the benefit attributed to each of the first 20 years is 2.5% of the present value of the expected medical costs (50% divided by 20).

For employees expected to leave between 10 and 20 years, the benefit attributed to each of the first 10 years is 1% of the present value of the expected medical costs. For these employees, no benefit is attributed to service between the end of the ~~ten~~ 10th year and the estimated date of leaving.

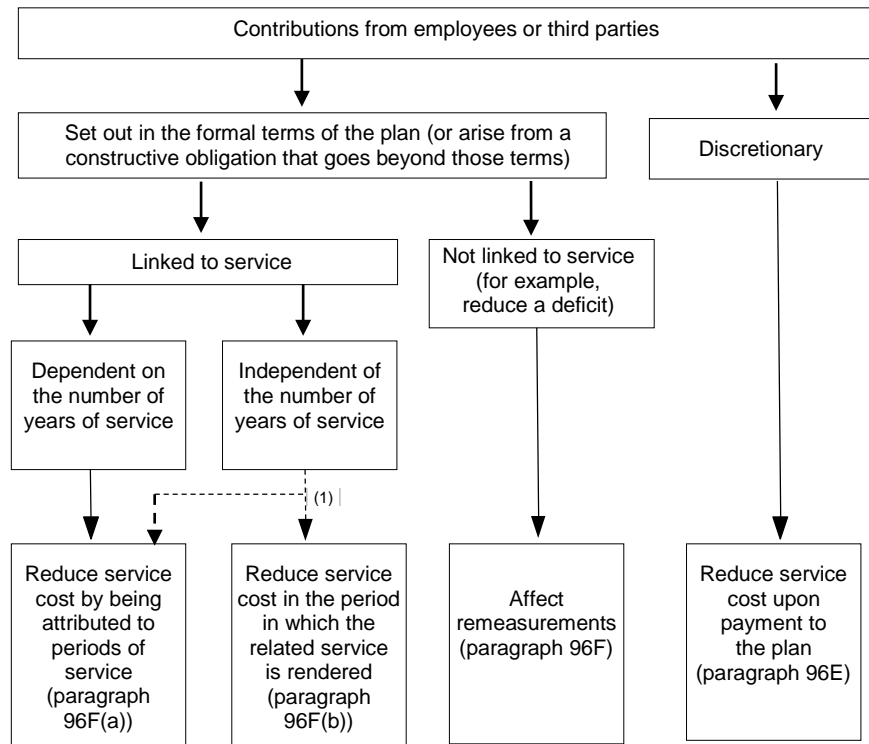
For employees expected to leave within 10 years, no benefit is attributed.

Example Illustrating Paragraph 84: Attributing Benefits to Accounting Periods

AG13. ...

Example Illustrating Paragraphs 96E and 96F: Contributions from employees or third parties

AG13A. The accounting requirements for contributions from employees or third parties are illustrated in the diagram below.



(1) This dotted arrow means that an entity is permitted to choose either accounting

Example Illustrating Paragraph 154-162B: Termination Benefits

AG13B. Background

As a result of a recent acquisition, an entity plans to close a factory in 10 months and, at that time, terminate the employment of all of the remaining employees at the factory. Because the entity needs the expertise of the employees at the factory to complete some contracts, it announces a plan of termination as follows.

Each employee who stays and renders service until the closure of the factory will receive on the termination date a cash payment of CU30,000. Employees leaving before closure of the factory will receive CU10,000.

There are 120 employees at the factory. At the time of announcing the plan, the entity expects 20 of them to leave before closure. Therefore, the total expected cash outflows under the plan are CU3,200,000 (i.e., 20 × CU10,000 + 100 × CU30,000). As required by paragraph 154A, the entity accounts for benefits provided for termination of employment as termination benefits and accounts for benefits provided for services as short-term employee benefits.

Termination benefits

The benefit provided for termination of employment is CU10,000. This is the amount that an entity would have to pay for terminating the employment regardless of whether the employees stay and render service until closure of the factory or they leave before closure. Even though the employees can leave before closure, the termination of all employees' employment is a result of the entity's decision to close the factory and terminate their employment (i.e., all employees will leave employment when the factory closes). Therefore the entity recognizes a liability of CU1,200,000 (i.e., 120 × CU10,000) for the termination benefits provided in accordance with the employee benefit plan at the earlier of when the plan of termination is announced and when the entity recognizes the restructuring costs associated with the closure of the factory.

Benefits provided for service

The incremental benefits that employees will receive if they provide services for the full ten-month period are for services provided over that period. The entity accounts for them as short-term employee benefits because the entity expects to settle them before twelve months after the end of the reporting period. In this example, discounting is not required, so an expense of CU200,000 (i.e., CU2,000,000 ÷ 10) is recognized in each month during the service period of 10 months, with a corresponding increase in the carrying amount of the liability.

Example Illustrating Paragraph 113: Accounting for Past Service Cost

~~AG14. An entity operates a pension plan that provides a pension of 2% of final salary for each year of service. The benefits become vested after five years of service. On January 1, 20X9, the entity improves the pension to 2.5% of final salary for each year of service starting from January 1, 20X5. At the date of the improvement, the present value of the additional benefits for service from January 1, 20X5 to January 1, 20X9 is as follows:~~

Employees with more than five years service at 1/1/X9	150
Employees with less than five years service at 1/1/X9 (average period until vesting: three years)	120

270

The entity recognizes 150 immediately because those benefits are already vested. The entity recognizes 120 on a straight-line basis over three years from January 1, 20X9.

Example Illustrating Paragraphs 121–123: Reimbursements

AG15.—— Reimbursements:

Present value of obligation	1,244
Unrecognized actuarial gains	<u>—17</u>
Liability recognized in statement of financial position	<u><u>1,258</u></u>

Rights from insurance policies that exactly match the amount and timing of some of the benefits payable under the plan. Those benefits have a present value of 1,092.	1,092
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The unrecognized actuarial gains of 17 are the net cumulative actuarial gains on the obligation and on the reimbursement rights.

Example Illustrating Paragraph 125–127: Return on Plan Assets

AG16.—— At January 1, 20X7, the fair value of plan assets was 10,000, and net cumulative unrecognized actuarial gains were 760. On June 30, 20X7, the plan paid benefits of 1,900 and received contributions of 4,900. At December 31, 20X7, the fair value of plan assets was 15,000, and the present value of the defined benefit obligation was 14,792. Actuarial losses on the obligation for 20X7 were 60.

At January 1, 20X7, the reporting entity made the following estimates, based on market prices at that date:

	%
Interest and dividend income, after tax payable by the fund	9.25
Realized and unrealized gains on plan assets (after tax)	2.00
Administration costs	<u>(1.00)</u>
Expected rate of return	<u><u>10.25</u></u>

For 20X7, the expected and actual return on plan assets are as follows:

Return on 10,000 held for 12 months at 10.25%	1,025
Return on 3,000 held for six months at 5% (equivalent to 10.25% annually, compounded every six months)	150
Expected return on plan assets for 20X7	<u><u>1,175</u></u>
Fair value of plan assets at December 31, 20X7	15,000
Less fair value of plan assets at January 1, 20X7	(10,000)
Less contributions received	(4,900)
Add benefits paid	<u>1,900</u>

Actual return on plan assets	2,000
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The difference between the expected return on plan assets (1,175) and the actual return on plan assets (2,000) is an actuarial gain of 825. Therefore, the cumulative net unrecognized actuarial gains are 1,525 (760 plus 825 minus 60). Under paragraph 105, the limits of the corridor are set at 1,500 (greater of: (i) 10% of 15,000 and (ii) 10% of 14,792). In the following year (20X8), the entity recognizes in surplus or deficit an actuarial gain of 25 (1,525 minus 1,500) divided by the expected average remaining working life of the employees concerned.

The expected return on plan assets for 20X8 will be based on market expectations at January 1 20X8 for returns over the entire life of the obligation.

Example Illustrating Paragraph 135: Accounting for a Curtailment Without a Settlement

AG17. An entity is required by legislation to discontinue the direct provision of waste collection and waste disposal services. Employees of this discontinued segment will earn no further benefits. This is a curtailment without a settlement. Using current actuarial assumptions (including current market interest rates and other current market prices) immediately before the curtailment, the entity has a defined benefit obligation with a net present value of 1,000, plan assets with a fair value of 820, and net cumulative unrecognized actuarial gains of 50. The curtailment reduces the net present value of the obligation by 100 to 900.

Of the previously unrecognized actuarial gains, 10% (100/1,000) relates to the part of the obligation that was eliminated through the curtailment. Therefore, the effect of the curtailment is as follows:

	<i>Before curtailment</i>	<i>Curtailment gain</i>	<i>After curtailment</i>
<i>Net present value of obligation</i>	1000	(100)	900
<i>Fair value of plan assets</i>	(820)	—	(820)
	<u>180</u>	<u>(100)</u>	<u>80</u>
<i>Unrecognized actuarial gains</i>	50	(5)	45
<i>Net liability recognized in statement of financial position</i>	<u>230</u>	<u>(105)</u>	<u>125</u>

Example Illustrating Paragraphs 166 to 168: Determining the Initial Liability

AG18. At December 31 2010, an entity's statement of financial position includes a pension liability of 400. The entity adopts this Standard as of January 1 2011, when the present value of the obligation under the Standard is 1,300 and the fair value of plan assets is 1,000. On January 1 2005, the entity had improved pensions (cost for non-vested benefits: 160; and average remaining period at that date until vesting: 10 years).

The initial effect is as follows:

<i>Present value of the obligation</i>	1,300
<i>Fair value of plan assets</i>	(1,000)
<i>Minus: past service cost to be recognized in later periods (160 × 4/10)</i>	(64)
<i>Initial liability</i>	<u>236</u>
<i>Liability already recognized under previous policy</i>	(100)
<i>Additional liability</i>	<u><u>136</u></u>

The entity recognizes the additional liability of 136 in opening accumulated surpluses or deficits

Appendix B: Amendments to Other IPSASs

Paragraphs 102 and 104-107 are amended. New text is underlined and deleted text is struck through. Paragraph 103 is retained and not amended.

IPSAS 33, *First Time Adoption of Accrual Basis IPSASs*

Defined Benefit Plans and Other Long-Term Employee Benefits

102. **On the date of adoption of IPSASs, or where a first-time adopter takes advantage of the three year transitional exemption, the date on which the exemption expires, or when the relevant liabilities are recognized and/or measured in the financial statements (whichever is earlier), a first-time adopter shall determine its initial liability for defined benefit plans and other long-term employee benefits at that date as:**
- (a) **The present value of the obligation at the date of adoption of IPSASs, or where a first-time adopter takes advantage of the three year transitional relief period, the date on which the exemption expires, or when the relevant liabilities are recognized and/or measured in the financial statements (whichever is earlier), by using the Projected Unit Credit Method;**
 - (b) **Minus the fair value, at the date of adoption of IPSASs, or where a first-time adopter takes advantage of the three year transitional relief period, the date on which the exemption expires, or when the relevant liabilities are recognized and/or measured in the financial statements (whichever is earlier) of plan assets (if any) out of which the obligations are to be settled directly; and**
 - ~~(c) Minus any past service cost that shall be recognized in later periods as an expense on a straight-line basis over the average period until the benefits become vested.~~
103. ...
104. The effect of the change in the accounting policy to IPSAS 25 includes any ~~actuarial gains and losses~~ remeasurements that arose, if any, in earlier periods, ~~even if they fall outside the corridor specified in IPSAS 25.~~ Under its previous basis of accounting, a first-time adopter may not have recognized and/or measured any liability, in which case the increase in the liability will represent the full amount of the liability minus the fair value, at the date of adoption of IPSASs or where a first-time adopter takes advantage of the three year transitional relief period, the date on which the exemption expires, or when the relevant liabilities are recognized and/or measured in the financial statements (whichever is earlier), of any plan assets in accordance with paragraph 102(b) and ~~any past service cost to be recognized in later periods in accordance with paragraph 402(c).~~ This increased liability is recognized in opening accumulated surplus or deficit in the period in which the items are recognized and/or measured.
105. **~~A first-time adopter shall not separate the cumulative actuarial gains and losses from the inception of the defined benefit plan(s), until the date of adoption of IPSASs into a recognized and unrecognized portion.~~ All cumulative actuarial gains and losses remeasurements shall be recognized in opening accumulated surplus or deficit in the period in which the items are recognized and/or measured.**
106. ~~A first-time adopter is not permitted to separate cumulative actuarial gains and losses into recognized and unrecognized portions on adoption of IPSAS 25. All cumulative actuarial gains~~

~~and losses~~ remeasurements shall be recognized in opening accumulated surplus or deficit in the period in which the items are recognized and/or measured. ~~This requirement does however not preclude a first-time adopter electing to recognize only parts of its actuarial gains and losses in accordance with paragraphs 105–107 of IPSAS 25 in subsequent reporting periods.~~

~~107. A first-time adopter shall disclose information on experience adjustments in accordance with paragraph 141(p) of IPSAS 25 prospectively on the date of adoption of IPSASs.~~

Basis for Conclusions

This Basis for Conclusions accompanies, but does not form part of, IPSAS 25.

Paragraphs BC10A, BC21A and BC23-BC30 are added. Paragraphs BC7, BC8 and BC20-BC21 are amended. New text is underlined and deleted text is struck through. Paragraphs BC1-BC6, BC9-BC10, BC11-BC19 and paragraph BC22 are retained and not amended.

Development of IPSAS 25 based on the IASB's revised version of IAS 19 issued in 2004

Introduction

BC1. ...

BC2. ...

BC3. ...

Composite Social Security Programs and State Plans

BC4. ...

BC5. ...

BC6. ...

Defined Benefit Plans with Participating Entities under Common Control

BC7. In the public sector, there are likely to be many cases where entities under common control participate in defined benefit plans. IAS 19 includes commentary on defined benefit plans that share risks between entities under common control. The IPSASB considered that the requirements in IAS 19 are appropriate in the public sector. The IPSASB also considered it appropriate to emphasize that, unless there is a contractual agreement, binding arrangement, or stated policy for charging the net defined benefit cost for the plan as a whole to an individual entity, it is inappropriate for controlled entities to account on a defined benefit basis. In such cases, the controlling entity should account for such plans on a defined benefit basis in its consolidated financial statements. Controlled entities (a) account on a defined contribution basis, (b) identify the controlling entity, and (c) disclose that the controlling entity is accounting on a defined benefit basis in its consolidated financial statements. This is reflected in paragraph 41. Controlled entities also make the disclosures specified in paragraph 42 ~~144O~~.

Discount Rates

BC8. IAS 19 requires adoption of a discount rate based on the market yields at the reporting date on high quality corporate bonds. The IPSASB decided that the discount rate should reflect the time value of money, and considered that entities should be left to determine the rate that best achieves that objective. The IPSASB considered that the time value of money may be best reflected by reference to market yields on government bonds, high quality corporate bonds, or any other financial instrument. The discount rate used is not intended to incorporate the risk associated with defined benefit obligations or entity-specific credit risk. There is an additional disclosure requirement at paragraph ~~141(n)(ii)~~ 144E(d) informing users of the basis on which the discount rate has been determined.

BC9. ...

Actuarial Gains and Losses—the Corridor

BC10. ...

BC10A. In 2011, the IASB amended IAS 19 to eliminate the “corridor approach” and require the immediate recognition of actuarial gains and losses. The IPSASB considered that the immediate recognition of actuarial gains and losses provides information that better meets the qualitative characteristics of information included in general purpose financial reports. The IPSASB concluded that there is no public sector specific reason to maintain the corridor provisions. Therefore, the IPSASB decided to eliminate the “corridor approach” and require the immediate recognition of actuarial gains and losses.

Actuarial Gains and Losses: Presentation where Recognition is Outside the Statement of Financial Performance

BC11. ...

BC12. ...

Reimbursements

BC13. ...

Other Long-Term Employee Benefits: Long-Term Disability Benefits

BC14. ...

BC15. ...

Other Long-Term Employee Benefits: Compensation Payable by the Reporting Entity until an Individual Enters New Employment

BC16. ...

Implementation Arrangements

BC17. ...

BC18. ...

BC19. ...

BC20. When IPSAS 25 was issued it had transitional requirements for first time adopters. In paragraph 166, this Standard required ed entities to determine an initial liability for defined benefit plans. Because entities do not have ed to adopt the Standard until reporting periods commencing on or after January 1 2011, the IPSASB concluded that it ~~is~~ was not necessary to introduce a transitional provision permitting entities to expense over a period any difference between the initial liability and the liability that would have been recognized under the previous accounting policy. In order to avoid a potential distortion of financial performance in the first year of adoption, and, for consistency with IPSAS 3, *Accounting Policies, Changes in Accounting Estimates and Errors*, this Standard required ed the difference between the initial liability and the liability that would have been recognized at the same date under the previous accounting policy to be taken to opening accumulated surpluses or deficits.

BC21. The IPSASB also considered whether, in the light of possible difficulties for reporting entities in assembling information, it would be appropriate to provide relief from certain disclosure requirements in paragraph 141 of this Standard. These disclosures required ed opening balances relating to a number of components of obligations and plan assets or trend information covering the current reporting period and previous four reporting periods. The IPSASB concluded that,

because some entities may require the full lead-in period to develop systems, such relief ~~is~~ was appropriate. It ~~is~~ was therefore included in the Standard in paragraphs 173 and 175.

BC21A. When the IPSASB approved IPSAS 33, *First-time Adoption of Accrual Basis International Public Sector Accounting Standards*, it agreed to remove the section on *First Time Adoption of this Standard* (paragraphs 166-176) of IPSAS 25.

Revision of IPSAS 25 as a result of the IASB's Improvements to IFRSs issued in 2008

BC22. ...

Revision of IPSAS 25 based on the IASB's revised version of IAS 19 (issued in 2004, including amendments up to December 31, 2015)

Main Revisions Drawn from IAS 19

BC23. In addition to the elimination of the corridor option and in order to maintain convergence with IAS 19, the IPSASB considered other revisions made by the IASB to IAS 19 in 2011 and up to the approval of ED 59, *Amendments to IPSAS 25, Employee Benefits*:

- (a) Excluding changes in the defined benefit obligation that result from changes in demographic assumptions from the service cost component;
- (b) Remeasurements will comprise (i) actuarial gains and losses on the defined benefit obligation, (ii) return on plan assets, excluding amounts included in net interest on the defined benefit liability (asset) and, (iii) any change in the effect of the asset ceiling, excluding amounts included in net interest on the defined liability (asset);
- (c) Maintaining the recognition of the service cost and net interest components in surplus or deficit;
- (d) Recognizing remeasurements in net assets/equity instead of in surplus or deficit;
- (e) Recognizing immediately the unvested past service cost, with consequential amendments to the definitions of curtailments, service cost and settlement, instead of the current recognition as an expense on a straight-line basis over the average period until the benefits become vested;
- (f) Recognizing termination benefits when the entity has communicated its plan of termination to each of the affected employees, instead of the current requirement when the entity is demonstrably committed to provide those benefits;
- (g) Changing the definition of short-term employee benefits (other than termination benefits) to refer to employee benefits (other than termination benefits) that are expected to be settled wholly before twelve months after the end of the reporting period in which the employees render the related service, rather than those expected to be settled within twelve months after the end of the period in which the employees render the related service;
- (h) Including a new section in IPSAS 25 called "Actuarial assumptions: mortality" with wording making explicit that the mortality assumptions used to determine the defined benefit obligation are current estimates of the expected mortality rates of plan members, both during and after employment;

- (i) Clarifying that taxes related to service and administration costs related to benefit payments are included in the estimate of present value of the defined benefit obligation and that other taxes and administration costs related to the management of plan assets are deducted from the return on plan assets;
- (j) Clarifying that contributions from employees or third parties reduce the ultimate cost to the entity of those benefits;
- (k) Clarifying that linked service contributions from employees or third parties reduce service cost (if they are linked to service) or affect remeasurements of the net defined benefit liability (asset) (if they are not linked to service);
- (l) Including requirements on conditional indexation that the measurement of the obligation reflects the best estimate of the effect of the performance target or other criteria; and
- (m) Clarifying that the measurement of an entity's defined benefit obligations reflects the limits on the legal and constructive obligation to pay additional contributions.

Requirements of Government Finance Statistics Reporting Guidelines

- BC24. The IPSASB considered the requirements of Government Finance Statistics (GFS) reporting guidelines on the classification, presentation, recognition, measurement and disclosure of employee benefits and identified some differences with both the revised IAS 19 and of IPSAS 25.
- BC25. GFS reporting guidelines do not apply the net interest approach, but rather recognize proceeds on fund assets and interest on fund liabilities according to the economic nature of those revenues and expenses. GFS then attributes the property income and the increase in the liability for benefit entitlements due to the passage of time through an entry in "property expense for investment income disbursements". In IPSAS 25 equivalent entries are presented in *surplus or deficit*.
- BC26. For autonomous funds recognized outside the employer's accounts, GFS recognizes a claim of the pension fund on the pension manager for deficits of the pension fund in specific circumstances. In these cases, GFS does not require the recognition of an interest expense in the employers' accounts due to the passage of time of recognizing that claim.
- BC27. In GFS, the plan assets are generally measured on the same basis as other assets, which is normally market values. Therefore, unlike IPSAS 25, no additional calculation to include the discount rate in the plan assets as a whole is necessary to estimate present value. However, in GFS some assets are not measured at market values. This may give raise to different valuations between IPSAS 25 and GFS (for example: loans are measured at nominal values in GFS and usually at amortized cost in IPSAS).
- BC28. In GFS, any changes in the volume or value of assets that do not result from transactions are recorded in the Statement of Other Economic Flows, which includes the effect of the passage of time. In GFS, the pension fund only records actual revenue from transactions such as interest, dividends and rents in the Statement of Operations.
- BC29. GFS does not disaggregate employee benefits into short-term and long-term employee benefits and does not require specific disclosures on employee benefits, except for the supplementary table on pension schemes in social insurance specified in the System of National Accounts 2008.

BC30. The IPSASB concluded that these differences are due to the different objectives and presentational frameworks of IPSASs and GFS. They do not constitute public sector specific reasons that warrant departure from IAS 19.

Appendix C: Amendments to the Basis for Conclusions on other IPSASs

IPSAS 33, *First Time Adoption of Accrual Basis IPSASs*

Paragraph BC60 is deleted. Deleted text is struck through.

BC60. — ~~The IPSASB further noted that full retrospective application of IPSAS 25 would require a first-time adopter to determine actuarial gains or losses for each year since the inception of the plan in order to determine the net cumulative unrecognized gains or losses at the date of adoption of IPSASs. It was concluded that this would be costly and would not benefit users. A first-time adopter is therefore not required to separate cumulative actuarial gains and losses into recognized and unrecognized portions. All cumulative actuarial gains and losses should be recognized in opening accumulated surplus or deficit.~~

Appendix D: Amendments to the Implementation Guidance on other IPSASs

IPSAS 33, *First Time Adoption of Accrual Basis IPSASs*

Paragraph IG59 and IG62 are amended. New text is underlined and deleted text is struck through. Paragraphs IG60 and IG61 are retained and not amended.

- IG59. At the date of adoption of IPSASs, a first-time adopter applies IPSAS 25 in measuring defined benefits plans and other long-term employee benefits, and recognizes all cumulative ~~actuarial gains or losses~~ remeasurements from the inception of the plan until the date of adoption of IPSASs, or where the first-time adopter takes advantage of the exemption that provides a three year transitional relief period from the recognition of defined benefit plans and other long-term employee benefits, the date on which the exemptions expire or when the defined benefits plans and other long-term employee benefits are recognized and/or measured in accordance with IPSAS 25 (whichever is earlier), ~~even if its accounting policy in accordance with IPSAS 25 will involve leaving some later actuarial gains and losses unrecognized (see paragraph 105 of IPSAS 33).~~
- IG60. ...
- IG61. ...
- IG62. In many cases, a first-time adopter's transitional IPSAS financial statements or its first IPSAS financial statements will reflect measurements of employee benefit obligations at three dates (where a first-time adopter elects to present comparative information in accordance with paragraph 78 of IPSAS 33): the end of the first reporting period, the date of the comparative statement of financial position (where the first-time adopter elects to present comparative information) and the date of adoption of IPSASs, or where the first-time adopter takes advantages of the exemptions that provide relief from the recognition of defined benefit plans and other long-term employee benefits, the date on which the exemptions expire or when the defined benefits plans and other long-term employee benefits are recognized and/or measured in accordance with IPSAS 25 (whichever is earlier). IPSAS 25 encourages the first-time adopter to involve a qualified actuary in the measurement of all material post-employment benefit obligations. To minimize costs, a first-time adopter may request a qualified actuary to carry out a detailed actuarial valuation at one or two of these dates and roll the valuation(s) forward or back to the other date(s). Any such roll forward or roll back reflects any material transactions and other material events (including changes in market prices and interest rates) between those dates (paragraph ~~68~~61B of IPSAS 25).

The section Illustrative Examples is deleted. Deleted text is struck through.

Illustrative Examples

These examples accompany, but are not part of, IPSAS 25.

Funded Defined Benefit Plan

Extracts from statements of financial performance and statements of financial position are provided to show the effects of the transactions described below. These extracts do not necessarily conform with all the disclosure and presentation requirements of other Standards.

Background Information

IE1. ~~The following information is given about a funded defined benefit plan. To keep interest computations simple, all transactions are assumed to occur at the year end. The present value of the obligation and the fair value of the plan assets were both 1,000 at January 1, 20X7. Net cumulative unrecognized actuarial gains at that date were 140.~~

	20X7	20X8	20X9
Discount rate at start of year	10.0%	9.0%	8.0%
Expected rate of return on plan assets at start of year	12.0%	11.1%	10.3%
Current service cost	130	140	150
Benefits paid	150	180	190
Contributions paid	90	100	110
Present value of obligation at December 31	1,141	1,197	1,295
Fair value of plan assets at December 31	1,092	1,109	1,093
Expected average remaining working lives of employees (years)	40	40	40

IE2. ~~In 20X8, the plan was amended to provide additional benefits with effect from January 1, 20X8. The present value as at January 1, 20X8 of additional benefits for employee service before January 1, 20X8 was 50 for vested benefits and 30 for non-vested benefits. As at January 1, 20X8, the entity estimated that the average period until the non-vested benefits would become vested was three years; the past service cost arising from additional non-vested benefits is therefore recognized on a straight-line basis over three years. The past service cost arising from additional vested benefits is recognized immediately (paragraph 112 of the Standard). The entity has adopted a policy of recognizing actuarial gains and losses under the minimum requirements of paragraph 106.~~

Changes in the Present Value of the Obligation and in the Fair Value of the Plan Assets

IE3. ~~The first step is to summarize the changes in the present value of the obligation and in the fair value of the plan assets and use this to determine the amount of the actuarial gains or losses for the period. These are as follows:~~

	20X7	20X8	20X9
Present value of obligation, January 1	1,000	1,141	1,197
Interest cost	100	103	96
Current service cost	130	140	150
Past service cost — non-vested benefits	—	30	—
Past service cost — vested benefits	—	50	—

Benefits paid	(150)	(180)	(190)
Actuarial (gain) loss on obligation (balancing figure)	61	(87)	42
Present value of obligation, December 31	<u>1,144</u>	<u>1,197</u>	<u>1,295</u>
Fair value of plan assets, January 1	1,000	1,092	1,109
Expected return on plan assets	120	121	114
Contributions	-90	100	110
Benefits paid	(150)	(180)	(190)
Actuarial gain (loss) on plan assets (balancing figure)	32	(24)	(50)
Fair value of plan assets, December 31	<u>1,092</u>	<u>1,109</u>	<u>1,093</u>

Limits of the Corridor

~~IE4. The next step is to determine the limits of the corridor, and then compare these with the cumulative unrecognized actuarial gains and losses in order to determine the net actuarial gain or loss to be recognized in the following period. Under paragraph 105 of this Standard, the limits of the corridor are set at the greater of:~~

- ~~(a) 10% of the present value of the obligation before deducting plan assets; and~~
~~(b) 10% of the fair value of any plan assets.~~

~~IE5. These limits, and the recognized and unrecognized actuarial gains and losses, are as follows:~~

	20X7	20X8	20X9
Net cumulative unrecognized actuarial gains (losses) at January 1	140	107	170
Limits of corridor at January 1	100	114	120
Excess [A]	<u>40</u>	<u>-</u>	<u>50</u>
Average expected remaining working lives (years) [B]	10	10	10
Actuarial gain (loss) to be recognized [^A / _B]	4	-	5
Unrecognized actuarial gains (losses) at January 1	140	107	170
Actuarial gain (loss) for year—obligation	(61)	87	(42)
Actuarial gain (loss) for year—plan assets	32	(24)	(50)
Subtotal	<u>111</u>	<u>170</u>	<u>78</u>
Actuarial (gain) loss recognized	<u>(4)</u>	<u>-</u>	<u>(5)</u>
Unrecognized actuarial gains (losses) at December 31	<u>107</u>	<u>170</u>	<u>73</u>

Amounts Recognized in the Statement of Financial Position and Statement of Financial Performance, and Related Analyses

~~IE6. The final step is to determine the amounts to be recognized in the statement of financial position and the statement of financial performance, and the related analyses to be disclosed in accordance with paragraph 141(f), (g), and (m) of the Standard (the analyses required to be disclosed in accordance with paragraph 141(c) and (e) are given in the section of this Illustrative Example, “Changes in the Present Value of the Obligation and in the Fair Value of the Plan Assets.” These are as follows.~~

	20X7	20X8	20X9
Present value of the obligation	1,141	1,197	1,295
Fair value of plan assets	(1,092)	(1,109)	(1,093)
	49	88	202
Unrecognized actuarial gains (losses)	107	170	73
Unrecognized past service cost—non-vested benefits	–	(20)	(10)
Liability recognized in statement of financial position	156	238	265
Current service cost	130	140	150
Interest cost	100	103	96
Expected return on plan assets	(120)	(121)	(114)
Net actuarial (gain) loss recognized in year	(4)	–	(5)
Past service cost—non-vested benefits	–	10	10
Past service cost—vested benefits	–	50	–
Expense recognized in statement of financial performance	106	182	137
<i>Actual return on plan assets</i>			
Expected return on plan assets	120	121	114
Actuarial gain (loss) on plan assets	-32	(24)	(50)
Actual return on plan assets	152	97	64

Note: see example illustrating paragraphs 121–123 for presentation of reimbursements.

Disclosures

Extracts from notes show how the required disclosures may be aggregated in the case of an entity that provides a variety of employee benefits. These extracts do not necessarily conform with all the disclosure and presentation requirements of IPSAS 25 and other standards. In particular, they do not illustrate the disclosure of:

- (a) Accounting policies for employee benefits (see IPSAS 1, Presentation of Financial Statements.) Paragraph 141(a) of this Standard requires this disclosure to include the entity's accounting policy for recognizing actuarial gains and losses;*
- (b) A general description of the type of plan (paragraph 141(b));*
- (c) A narrative description of the basis used to determine the overall expected rate of return on assets (paragraph 141(l)).*
- (d) Employee benefits granted to key management personnel (see IPSAS 20, Related Party Disclosures); or*
- (e) Share-based employee benefits (see the international or national accounting standard dealing with share-based payments).*

IE7. Illustrative disclosures are as follows.

Employee Benefit Obligations

The amounts recognized in the statement of financial position are as follows:

	Defined benefit pension plans		Post-employment medical benefits	
	20X8	20X7	20X8	20X7
Present value of funded obligations	20,300	17,400	—	—
Fair value of plan assets	(18,420)	(17,280)	—	—
	1,880	120	—	—
Present value of unfunded obligations	2,000	1,000	7,337	6,405
Unrecognized actuarial gains (losses)	(1,605)	840	(2,707)	(2,607)
Unrecognized past service cost	(450)	(650)	—	—
Net liability	1,825	1,310	4,630	3,798
Amounts in the statement of financial position:				
liabilities	1,825	1,400	4,630	3,798
assets	—	(90)	—	—
Net liability	1,825	1,310	4,630	3,798

The pension plan assets include ordinary shares issued by [name of reporting entity] with a fair value of 317 (20X7: 281). Plan assets also include property occupied by [name of reporting entity] with a fair value of 200 (20X7: 185).

The amounts recognized in surplus or deficit are as follows:

	Defined benefit pension plans		Post-employment medical benefits	
	20X8	20X7	20X8	20X7
Current service cost	850	750	479	411
Interest on obligation	950	1,000	803	705
Expected return on plan assets	(900)	(650)		
Net actuarial losses (gains) recognized in year	(70)	(20)	150	140
Past service cost	200	200		
Losses (gains) on curtailments and settlements	175	(390)		
Total, included in employee benefits expense	1,205	890	1,432	1,256
Actual return on plan assets	600	2,250	—	—

Changes in the present value of the defined benefit obligation are as follows:

	Defined benefit pension plans		Post-employment medical benefits	
	20X8	20X7	20X8	20X7
Opening defined benefit obligation	18,400	11,600	6,405	5,439
Service cost	850	750	479	411
Interest cost	950	1,000	803	705
Actuarial losses (gains)	2,350	950	250	400
Losses (gains) on curtailments	(500)	—		
Liabilities extinguished on settlements	—	(350)		
Liabilities assumed in an entity combination	—	5,000		
Exchange differences on foreign plans	900	(150)		

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Benefits paid	(650)	(400)	(600)	(550)
Closing defined benefit obligation	22,300	18,400	7,337	6,405

Changes in the fair value of plan assets are as follows:

	Defined benefit pension plans	
	20X8	20X7
Opening fair value of plan assets	17,280	9,200
Expected return	900	650
Actuarial gains (losses)	(300)	1,600
Assets distributed on settlements	(400)	—
Contributions by employer	700	350
Assets acquired in an entity combination	—	6,000
Exchange differences on foreign plans	890	(120)
Benefits paid	(650)	(400)
	18,420	17,280

The entity expects to contribute 900 to its defined benefit pension plans in 20X9.

The major categories of plan assets as a percentage of total plan assets are as follows:

	20X8	20X7
European equities	30%	35%
North American equities	16%	15%
European bonds	31%	28%
North American bonds	18%	17%
Property	5%	5%

Principal actuarial assumptions at the reporting date (expressed as weighted averages):

	20X8	20X7
Discount rate at December 31	5%	6.5%
Expected return on plan assets at December 31	5.4%	7%
Future salary increases	5%	4%
Future pension increases	3%	2%
Proportion of employees opting for early retirement	30%	30%
Annual increase in healthcare costs	8%	8%
Future changes in maximum state healthcare benefits	3%	2%

Assumed healthcare cost trend rates have a significant effect on the amounts recognized in surplus or deficit. A one percentage point change in assumed healthcare cost trend rates would have the following effects:

	One percentage point increase	One percentage point decrease
Effect on the aggregate of the service cost and interest cost	190	(150)
Effect on defined benefit obligation	1,000	(900)

Amounts for the current and previous four periods are as follows:

Defined benefit pension plans

	20X8	20X7	20X6	20X5	20X4
Defined benefit obligation	(22,300)	(18,400)	(11,600)	(10,582)	(9,144)
Plan assets	18,420	17,280	9,200	8,502	10,000
Surplus (deficit)	(3,880)	(1,120)	(2,400)	(2,080)	856
Experience adjustments on plan liabilities	(1,111)	(768)	(69)	543	(642)
Experience adjustments on plan assets	(300)	1,600	(1,078)	(2,890)	2,777

Post-employment medical benefits

	20X8	20X7	20X6	20X5	20X4
Defined benefit obligation	7,337	6,405	5,439	4,923	4,221
Experience adjustments on plan liabilities	(232)	829	490	(174)	(103)

The reporting entity also participates in a defined benefit plan for all local government units in Jurisdiction Y that provides pensions linked to final salaries and is funded on a pay-as-you-go basis. It is not practicable to determine the present value of the economic entity's obligation or the related current service cost, as the plan computes its obligations on a basis that differs materially from the basis used in [name of reporting entity]'s financial statements. [describe basis] On that basis, the plan's financial statements to June 30 20X6 show an unfunded liability of 27,525. The unfunded liability will result in future payments by participating employers. The plan has approximately 75,000 members, of whom approximately 5,000 are current or former employees of [name of reporting entity] or their dependants. The expense recognized in the statement of financial performance, which is equal to contributions due for the year, and is not included in the above amounts, was 230 (20X7: 215). The reporting entity's future contributions may be increased substantially if other entities withdraw from the plan.

Illustration of the Application of Paragraph 70

The Issue

IE8. Paragraph 69 of this Standard imposes a ceiling on the defined benefit asset that can be recognized.

69. **The amount determined under paragraph 65 may be negative (an asset). An entity shall measure the resulting asset at the lower of:**

(a) **The amount determined under paragraph 65 [i.e., the surplus/deficit in the plan plus (minus) any unrecognized losses (gains)]; and**

(b) **The total of:**

(i) **Any cumulative unrecognized net actuarial losses and past service cost (see paragraphs 105, 106 and 112); and**

(ii) **The present value of any economic benefits available in the form of refunds from the plan or reductions in future contributions to the plan. The present value of these economic benefits shall be determined using the discount rate specified in paragraph 91.**

IE9. Without paragraph 70 (see below), paragraph 69(b)(i) has the following consequence: sometimes deferring the recognition of an actuarial loss (gain) in determining the amount specified by paragraph 65 leads to a gain (loss) being recognized in the statement of financial performance.

~~IE10. The following example illustrates the effect of applying paragraph 69 without paragraph 70. The example assumes that the entity's accounting policy is not to recognize actuarial gains and losses within the corridor, and to amortize actuarial gains and losses outside the corridor. (Whether the corridor is used is not significant. The issue can arise whenever there is deferred recognition under paragraph 65.)~~

~~Example 1—Effect of applying paragraph 69 without paragraph 70~~

	A	B	C	D=A+C	E=B+C	F=lower of D and E	G
Year	Surplus in plan	Economic benefits available (paragraph 69(b)(iii))	Losses unrecognized under paragraph 65	Paragraph 65	Paragraph 69(b)	Asset ceiling, i.e., recognized asset	Gain recognized in year 2
1	100	0	0	100	0	0	—
2	70	0	30	100	30	30	30

~~IE11. At the end of year 1, there is a surplus of 100 in the plan (column A in the table above), but no economic benefits are available to the entity either from refunds or reductions in future contributions (column B). (column C). So, if there were no asset ceiling, an asset of 100 would be recognized, being the amount specified by paragraph 65 (column D). The asset ceiling in paragraph 69 restricts the asset to nil (column F).~~

~~IE12. In year 2, there is an actuarial loss in the plan of 30 that reduces the surplus from 100 to 70 (column A), the recognition of which is deferred under paragraph 65 (column C). So, if there were no asset ceiling, an asset of 100 (column D) would be recognized. The asset ceiling without paragraph 70 would be 30 (column E). An asset of 30 would be recognized (column F), giving rise to an increase in revenue (column G), even though all that has happened is that a surplus from which the entity cannot benefit has decreased.~~

~~IE13. A similarly counter intuitive effect could arise with actuarial gains (to the extent that they reduce cumulative unrecognized actuarial losses).~~

Paragraph 70

~~IE14. Paragraph 70 prohibits the recognition of gains (losses) that arise solely from past service cost and actuarial losses (gains).~~

~~70. The application of paragraph 69 shall not result in a gain being recognized solely as a result of an actuarial loss or past service cost in the current period, or in a loss being recognized solely as a result of an actuarial gain in the current period. The entity shall therefore recognize immediately under paragraph 65 the following, to the extent that they arise while the defined benefit asset is determined in accordance with paragraph 69(b):~~

- ~~(a) Net actuarial losses of the current period and past service cost of the current period to the extent that they exceed any reduction in the present value of the economic benefits specified in paragraph 69(b)(ii). If there is no change or an increase in the present value of the economic benefits, the entire net actuarial~~

~~losses of the current period and past service cost of the current period shall be recognized immediately under paragraph 65.~~

- ~~(b) Net actuarial gains of the current period after the deduction of past service cost of the current period to the extent that they exceed any increase in the present value of the economic benefits specified in paragraph 69(b)(ii). If there is no change or a decrease in the present value of the economic benefits, the entire net actuarial gains of the current period after the deduction of past service cost of the current period shall be recognized immediately under paragraph 65.~~

~~IE15. The following examples illustrate the result of applying paragraph 70. As above, it is assumed that the entity's accounting policy is not to recognize actuarial gains and losses within the corridor, and to amortize actuarial gains and losses outside the corridor. For the sake of simplicity, the periodic amortization of unrecognized gains and losses outside the corridor is ignored in the examples.~~

~~Example 1 continued—Adjustment when there are actuarial losses and no change in the economic benefits available~~

	A	B	C	D=A+C	E=B+C	F= lower of D and E	G
Year	Surplus in plan	Economic benefits available (paragraph 69(b)(ii))	Losses un-recognized under paragraph 65	Paragraph 65	Paragraph 69(b)	Asset ceiling, i.e., recognized asset	Gain recognized in year 2
1	100	0	0	100	0	0	—
2	70	0	0	70	0	0	0

~~IE16. The facts are as in example 1 above. Applying paragraph 70, there is no change in the economic benefits available to the entity* so the entire actuarial loss of 30 is recognized immediately under paragraph 65 (column D). The asset ceiling remains at nil (column F) and no gain is recognized.~~

~~IE17. In effect, the actuarial loss of 30 is recognized immediately, but is offset by the reduction in the effect of the asset ceiling.~~

	Asset in Statement of Financial Position under paragraph 65 (column D above)	Effect of the asset ceiling	Asset ceiling (column F above)
Year 1	100	(100)	0
Year 2	70	(70)	0
Gain (loss)	(30)	(30)	0

~~IE18. In the above example, there is no change in the present value of the economic benefits available to the entity. The application of paragraph 70 becomes more complex when there are changes in present value of the economic benefits available, as illustrated in the following examples.~~

*—The term "economic benefits available to the entity" is used to refer to those economic benefits that qualify for recognition under paragraph 69(b)(ii).

Example 2—Adjustment when there are actuarial losses and a decrease in the economic benefits available

	A	B	C	D=A+C	E=B+C	F=lower of D and E	G
Year	Surplus in-plan	Economic benefits available (paragraph 69(b)(ii))	Losses un-recognized under paragraph 65	Paragraph 65	Paragraph 69(b)	Asset ceiling, i.e., recognized asset	Gain recognized in year 2
1	60	30	40	100	70	70	–
2	25	20	50	75	70	70	0

IE19. At the end of year 1, there is a surplus of 60 in the plan (column A) and economic benefits available to the entity of 30 (column B). There are unrecognized losses of 40 under paragraph 65 (column C). So, if there were no asset ceiling, an asset of 100 would be recognized (column D). The asset ceiling restricts the asset to 70 (column F).

IE20. In year 2, an actuarial loss of 35 in the plan reduces the surplus from 60 to 25 (column A). The economic benefits available to the entity fall by 10 from 30 to 20 (column B). Applying paragraph 70, the actuarial loss of 35 is analyzed as follows:

Actuarial loss equal to the reduction in economic benefits	40
Actuarial loss that exceeds the reduction in economic benefits	25

IE21. In accordance with paragraph 70, 25 of the actuarial loss is recognized immediately under paragraph 65* (column D). The reduction in economic benefits of 10 is included in the cumulative unrecognized losses that increase to 50 (column C). The asset ceiling, therefore, also remains at 70 (column E) and no gain is recognized.

IE22. In effect, an actuarial loss of 25 is recognized immediately, but is offset by the reduction in the effect of the asset ceiling.

	Asset in Statement of Financial Position under paragraph 65 (column D above)	Effect of the asset ceiling	Asset ceiling (column F above)
Year 1	100	(30)	70
Year 2	75	(5)	70
Gain (loss)	(25)	25	0

Example 3—Adjustment when there are actuarial gains and a decrease in the economic benefits available to the entity

*—The application of paragraph 70 allows the recognition of some actuarial gains and losses to be deferred under paragraph 65 and, hence, to be included in the calculation of the asset ceiling. For example, cumulative unrecognized actuarial losses that have built up while the amount specified by paragraph 69(b) is not lower than the amount specified by paragraph 65 will not be recognized immediately at the point that the amount specified by paragraph 69(b) becomes lower. Instead, their recognition will continue to be deferred in line with the entity's accounting policy. The cumulative unrecognized losses in this example are losses the recognition of which is deferred even though paragraph 70 applies.

	A	B	C	D=A+C	E=B+C	F= lower of D and E	G
Year	Surplus in-plan	Economic benefits available (paragraph 69(b)(ii))	Losses un-recognized under paragraph 65	Paragraph 65	Paragraph 69(b)	Asset ceiling, i.e., recognized asset	Gain recognized in year 2
1	60	30	40	100	70	70	—
2	110	25	40	150	65	65	(5)

IE23. At the end of year 1, there is a surplus of 60 in the plan (column A) and economic benefits available to the entity of 30 (column B). There are unrecognized losses of 40 under paragraph 65 that arose before the asset ceiling had any effect (column C). So, if there were no asset ceiling, an asset of 100 would be recognized (column D). The asset ceiling restricts the asset to 70 (column F).

IE24. In year 2, an actuarial gain of 50 in the plan increases the surplus from 60 to 110 (column A). The economic benefits available to the entity decrease by 5 (column B). Applying paragraph 70, there is no increase in economic benefits available to the entity. Therefore, the entire actuarial gain of 50 is recognized immediately under paragraph 65 (column D) and the cumulative unrecognized loss under paragraph 65 remains at 40 (column C). The asset ceiling decreases to 65 because of the reduction in economic benefits. That reduction is not an actuarial loss as defined by IPSAS 25 and therefore does not qualify for deferred recognition.

IE25. In effect, an actuarial gain of 50 is recognized immediately, but is (more than) offset by the increase in the effect of the asset ceiling.

	Asset in Statement of Financial Position under paragraph 65 (column D above)	Effect of the asset ceiling	Asset ceiling (column F above)
Year 1	100	(30)	70
Year 2	150	(85)	65
Gain (loss)	50	(55)	(5)

IE26. In both examples 2 and 3, there is a reduction in economic benefits available to the entity. However, in example 2 no loss is recognized whereas, in example 3, a loss is recognized. This difference in treatment is consistent with the treatment of changes in the present value of economic benefits before application of paragraph 70. The purpose of paragraph 70 is solely to prevent gains (losses) being recognized because of past service cost or actuarial losses (gains). As far as is possible, all other consequences of deferred recognition and the asset ceiling are left unchanged.

Example 4—Adjustment in a period in which the asset ceiling ceases to have an effect

	A	B	C	D=A+C	E=B+C	F= lower of D and E	G
Year	Surplus in plan	Economic benefits available (paragraph 69(b)(iii))	Losses unrecognized under paragraph 65	Paragraph 65	Paragraph 69(b)	Asset ceiling, i.e., recognized asset	Gain recognized in year 2
1	-60	-25	-40	100	-65	65	-
2	(50)	-0	115	-65	115	65	0

IE27. At the end of year 1, there is a surplus of 60 in the plan (column A) and economic benefits are available to the entity of 25 (column B). There are unrecognized losses of 40 under paragraph 65 that arose before the asset ceiling had any effect (column C). So, if there were no asset ceiling, an asset of 100 would be recognized (column D). The asset ceiling restricts the asset to 65 (column F).

IE28. In year 2, an actuarial loss of 110 in the plan reduces the surplus from 60 to a deficit of 50 (column A). The economic benefits available to the entity decrease from 25 to 0 (column B). To apply paragraph 70, it is necessary to determine how much of the actuarial loss arises while the defined benefit asset is determined in accordance with paragraph 69(b). Once the surplus becomes a deficit, the amount determined by paragraph 65 is lower than the net total under paragraph 69(b). So, the actuarial loss that arises while the defined benefit asset is determined in accordance with paragraph 69(b) is the loss that reduces the surplus to nil, i.e., 60. The actuarial loss is, therefore, analyzed as follows:

Actuarial loss that equals the reduction in economic benefits	25
Actuarial loss that exceeds the reduction in economic benefits	35
	<u>60</u>
Actuarial loss that arises while the defined benefit asset is measured under paragraph 65	50
Total actuarial loss	<u><u>110</u></u>

IE29. In accordance with paragraph 70, 35 of the actuarial loss is recognized immediately under paragraph 65 (column D); 75 (25 plus 50) of the actuarial loss is included in the cumulative unrecognized losses, which increase to 115 (column C). The amount determined under paragraph 65 becomes 65 (column D), and under paragraph 69(b) becomes 115 (column E). The recognized asset is the lower of the two, i.e., 65 (column F), and no gain or loss is recognized (column G).

IE30. In effect, an actuarial loss of 35 is recognized immediately, but is offset by the reduction in the effect of the asset ceiling.

	Asset in Statement of Financial Position under paragraph 65 (column D above)	Effect of the asset ceiling	Asset ceiling (column F above)
Year 1	100	(35)	65
Year 2	65	0	65
Gain (loss)	(35)	35	0

Notes

1. ~~In applying paragraph 70 in situations when there is an increase in the present value of the economic benefits available to the entity, it is important to remember that the present value of the economic benefits available cannot exceed the surplus in the plan.*~~
2. ~~In practice, benefit improvements often result in a past service cost and an increase in expected future contributions, due to increased current service costs of future years. The increase in expected future contributions may increase the economic benefits available to the entity in the form of anticipated reductions in these future contributions. The prohibition against recognizing a gain solely as a result of past service cost in the current period does not prevent the recognition of a gain because of an increase in economic benefits. Similarly, a change in actuarial assumptions that causes an actuarial loss may also increase expected future contributions and, hence, the economic benefits available to the entity in the form of anticipated reductions in future contributions. Again, the prohibition against recognizing a gain solely as a result of an actuarial loss in the current period does not prevent the recognition of a gain because of an increase in economic benefits.~~

* ~~In the example illustrating paragraph 73 of IPSAS 25, the present value of available future refunds in contributions could not exceed the surplus in the plan of 90.~~

Comparison with IAS 19

IPSAS 25 is drawn primarily from IAS 19 (2004) and ~~includes amendments made to IAS 19 as part of the *Improvements to IFRSs* issued in May 2008 (issued in 2004, including amendments up to December 31, 2015).~~ The main differences between IPSAS 25 and IAS 19 are as follows:

- IPSAS 25 contains additional guidance on public sector bonus plans.
- IPSAS 25 contains a specific section on Composite Social Security Schemes [see Specific Matter for Comment 2 in this Exposure Draft].
- For discounting post-employment obligations, IAS 19 requires entities to apply a discount rate based on yields on high quality corporate bonds consistent with the currency and estimated term of the post-employment benefit obligations. The requirement in IPSAS 25 is that entities apply a rate that reflects the time value of money. IPSAS 25 also contains a requirement that entities disclose the basis on which the discount rate has been determined.
- IPSAS 25 includes a rebuttable presumption that long-term disability payments are not usually subject to the same degree of uncertainty as the measurement of post-employment benefits. Where this presumption is rebutted, the entity considers whether some or all long-term disability payments should be accounted for in the same way as for post-employment benefits. IAS 19 does not include such a rebuttable presumption.
- IPSAS 25 uses different terminology, in certain instances, from IAS 19. The most significant examples are the use of the terms “revenue,” and ~~“statement of financial performance.”~~ “controlling” and “controlled entities”. The equivalent terms in IAS 19 are “income,” and ~~“income statement,”~~ “parent” and “subsidiaries”.

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