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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2010

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements. , 2011 7/01 For the 2010 calendar year, or tax year beginning , 2010, and ending Check if applicable D Employer Identification Number Retired Public Employees of San Joaquin 77-0502858 Address change County Telephone number Name change P.O. Box 8556 (209) 931-5430 Initial return Stockton, CA 95208-0556 Terminated Amended return G Gross receipts \$ 46,241 H(a) Is this a group return for affiliates? F Name and address of principal officer Application pending Yes H(b) Are all affiliates included? Same As C Above No If 'No,' attach a list (see instructions) 501(c)(3) X 501(c) (4 4947(a)(1) or 527 Tax-exempt status) ◀ (insert no) Website: ► www.rpesjc.org H(c) Group exemption number X Corporation L Year of Formation 1999 M State of legal domicile Form of organization Other > Part I ☐ Summarv 1 Briefly describe the organization's mission or most significant activities <u>THE_OBJECTIVES_OF_RETIRED_PUBLIC</u> EMPLOYEES OF SAN JOAQUIN COUNTY ARE TO (1) PROMOTE THE WELFARE OF SAN JOAQUIN _ Governance COUNTY_RETIRED_PUBLIC_EMPLOYEES_AND_THEIR_BENEFICIARIES, (2) PROVIDE_CURRENT EDUCATION_AND_INFORMATION_FOR_EMPLOYEES_ABOUT_TO_RETIRE_AND_OTHER_MEMBERS,__(3)_ Check this box ► If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 11 3 Activities & Number of independent voting members of the governing body (Part VI, line 1b) 4 11 Total number of individuals employed in calendar year 2010 (Part V. line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7 a Ō. **b** Net unrelated business taxable income from Form 990-T. line 34 7b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 379 602. Revenue 9 Program service revenue (Part VIII, line 2q) 43,482 45,146. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 650 493. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 44,511 46,241 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 500 500. 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 40,940. 40,264. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) Total expenses Add lines 13-17 (must equal Part IX, column (A), line_25) 41,440. 40,764. Revenue less expenses Subtract line 18 from line 12 CCIN/FI 3,071. 5,477. **Beginning of Current Year** End of Year ഗ് 20 Total assets (Part X, line 16) 78,962 84,419. MAY 17 2012 21 Total liabilities (Part X, line 26) 20 0. Š 78,942 Net assets or fund balances Subtract line 21 from line 20 84,419. Part II 🦪 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based or all information of which preparer has any knowledge Signatur foffic Date Sign Here Type or Print/Type PTIN Vander Veen Paul N/A Paid self-employed Croce & Company Accetcy. Corp Preparer Use Only ► Post Office Box 1607 Firm's EIN N/A Firm's address Stockton, CA 95201-1607 (209)943-2222 Phone no No May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2010)

orm 990 (2010) Retired Public Employees of San Joaquin	77-05028	58 Page
art III Statement of Program Service Accomplishments		_
Check if Schedule O contains a response to any question in this Part III		<u> </u>
1 Briefly describe the organization's mission		
See Schedule 0		- -
2 Did the organization undertake any significant program services during the year which were not listed	d on the prior	
Form 990 or 990-EZ?		Yes X No
If 'Yes,' describe these new services on Schedule O	_	_
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	services?	Yes X No
If 'Yes,' describe these changes on Schedule O)	
4 Describe the exempt purpose achievements for each of the organization's three largest program serv	vices by expenses	Section 501(c)(3)
and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants expenses, and revenue, if any, for each program service reported	and allocations to	others, the total
4a (Code (Expenses \$ 13,098. including grants of \$) (Revenue \$	
BIMONTHLY NEWSLETTER AND NOTICES TO MEMBERS; MONTHLY LUNCHEON V		FOR
MEMBERS; EDUCATIONAL SEMINARS		
		
		- -
		- -
		
		- -
		- -
OTHER MEMBER ACTIVITIES		
		
c (Code) (Expenses \$ 500. including grants of \$ 500.) CHARITABLE CONTRIBUTIONS TO LOCAL ORGANIZATIONS) (Revenue \$	
		
		- <i></i>
		
		
		
		-
		
Id Other program services (Describe in Schedule O)		
(Expenses \$ including grants of \$) (Revenue	\$)
4e Total program service expenses ► 24,757.		Form 000 (001
TEEA0102L 10/06/10		Form 990 (201

			Yes	No
	Is the exposization decaybed in each of E01(a)(2) or 4047(a)(1) (ather there is never to undeten)? If IV(a) I consider		163	140
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
â	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ŧ	b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VII	11 b		Х
•	c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		Х
i	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	-	X
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ì	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		_ X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20	aDid the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		_ X
ŀ	If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 Ь		
			000	(0010)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26	_	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Χ_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х_
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V , line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38		Х
BAA		Form	990 ((2010)

77-050 (2010) Rectifed Fubic Employees of San Joaquin 77-050	12838		age:
Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response to any question in this Part V			, L
		Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	0		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gami (gambling) winnings to prize winners?	ng	- -	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	21	,	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		1	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	38		X
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule Q</i>	31		^
		1	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority ove financial account in a foreign country (such as a bank account, securities account, or other financial account)?	r, a 4a	1	Х
b If 'Yes,' enter the name of the foreign country			
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			<u> </u>
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 8	+	Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	51		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	_50	:	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	n 6a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts we not tax deductible?	re 61		
7 Organizations that may receive deductible contributions under section 170(c).		1	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 2		
	71	-	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to Form 8282?	THE 70		
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	76	.	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71	+	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899		1	
as required?	79	<u> </u>	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	71	1	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did	the		
supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.	<u> </u>	+-	
a Did the organization make any taxable distributions under section 4966?	9;		
b Did the organization make a distribution to a donor, donor advisor, or related person?	91		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12		1	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders			
		ŀ	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	128	1	-
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	ļ	-	ļ <u>.</u>
a Is the organization licensed to issue qualified health plans in more than one state?	138	4	<u> </u>
Note. See the instructions for additional information the organization must report on Schedule O			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		1	
c Enter the amount of reserves on hand		1	
14a Did the organization receive any payments for indoor tanning services during the tax year?	148		Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	141		1

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a 11 1ь b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors or trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents 4 since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х 6 X Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7 a governing body? 7 b X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a X a The governing body? X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 X organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Does the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b X 11 a 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O X 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts' c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c 13 Х 13 Does the organization have a written whistleblower policy? X 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х 15 a a The organization's CEO, Executive Director, or top management official **b** Other officers of key employees of the organization X 15_b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) **16a** Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a **b** If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply |X| Upon request Another's website Own website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Schedule O 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. Jerry Arnell 8741 Walnut Acres Stockton CA 95212 209-931-5430

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Form 990 (2010)	Retired	Public	Emplovees	οf	San	Joaquin

77-0502858

Form 990 (2010)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (A) (B) (C) (F) (D) Œ) Position (check all that apply) Reportable compensation from Reportable compensation from Average hours per week (describe Estimated amount of other Name and title Individual or director Institutional related organizations (W-2/1099-MISC) compensation from the employee Highest compensated employee organization hours for and related organizations related organiza trustee tions in trustee Schedule O) (1) Marcel Leduc Vice President 2 Х X 0. 0. 0. (2) Sally Tanaka 2 Х Х 0. 0. 0. Secretary (3) Jerry Arnell 2 Х Х 0. 0 0. Treasurer (4) Larry Mills President 2 Х Х 0. 0 0. (5) Linda Begley Director 1 Х 0. 0. 0. (6) Pat Lynch 0. Director Х 0. 0. _(7)_Joseph McKee 0. Director 1 Х 0 0. (8) Margaret Miller Director Х 0 0. 0. (9) Robert Palmer Director 1 Х 0 0 0. (10) Richard Callistro X 0. Past President 1 0 0. (11) Mike Smith Director X 0. 0. 0. (12) (13) (14) (15) (16) (17) BAA

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Form **990** (2010)

Part VIII Section A. Officers, Directors, Trus		(ey	En			es,	and			T
(A) Name and title	(B) Average	Posi	tion ((check	-	hat a	(vlgg	(D) Reportable	(E) Reportable	(F) Estimated
Name and the	hours per week (describe hours for related organi- zations in Sch O)			Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(18)										
(19)										
(20)										
21)						-				
[22]										
23)										
24)										
25)										
26)										
27)										
28)							_			
(29)										
1 b Sub-total	-							0.	0	·
c Total from continuation sheets to Part VII, Section	A						>	0.	0	. 0
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limite from the organization ► 0	d to tho	se li	isted	d ab	ove) wh	o re		L	-
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such it. 4 For any understand an line 1e is the sum of recommendation.	ndıvıdua	aL								Yes No.
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater to such individual	than \$15	50,00	mpe 00?	insa If 'Y	es'	con	nplet	te Schedule J for	ITOTTI	4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'	compens complet	satio e Sc	n fr chec	om a dule	any <i>J fo</i>	unre r su	elate ch p	ed organization or person	ındıvıdual	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensa compensation from the organization	ted inde	pen	den	t cor	ntra	ctors	s tha	at received more t	han \$100,000 of	
(A) Name and business addres	ss							Description) of services	(C) Compensation
2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶		lımı	ited	to t	hose	e lis	ted a	above) who receiv	red more than	

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Pai	t VIII Statement of Revenue					
	•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events. d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above					
N ON	g Noncash contributions included in lns 1a-1f	\$;
용론	h Total. Add lines 1a-1f		602.			
PROGRAM SERVICE REVENUE	2a Membership Dues & Assessments b		45,146.	45,146.		
AM SERVI	cd e					
OGR	f All other program service revenue					
<u> </u>	g Total. Add lines 2a-2f 3 Investment income (including dividen other similar amounts)	ds, interest and	45,146. 493.	* * *	3. ₩ ∨	493.
	4 Income from investment of tax-exem5 Royalties	ot bond proceeds				
	(i) Real	(II) Personal				
	b Less rental expenses c Rental income or (loss)					3
	d Net rental income or (loss)	•				
	7 a Gross amount from sales of assets other than inventory (i) Securities	(II) Other				
	b Less cost or other basis and sales expenses c Gain or (loss)					
	d Net gain or (loss)8a Gross income from fundraising event	•				
OTHER REVENUE	(not including \$	- a				
OTHER	b Less direct expenses	b				^ }
	 c Net income or (loss) from fundraising 9a Gross income from gaming activities See Part IV, line 19 		į			
	b Less direct expenses	a b				*
	c Net income or (loss) from gaming ac	ivities				
	10a Gross sales of inventory, less returns and allowances					
	b Less cost of goods soldc Net income or (loss) from sales of in	b entony				
	Miscellaneous Revenue	Business Code				
l	11ab	+-				
	c					-
	e Total. Add lines 11a-11d				· -	
	12 Total revenue. See instructions	•	46,241.	45,146.	0.	493.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising
1	Grants and other assistance to governments and organizations in the U.S. See Part IV,	E00	·	general expenses	expenses
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	500.	500.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	•			· · · · · · · · · · · · · · · · · · ·
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages.				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
t	Legal				
	: Accounting	573.		573.	
	Lobbying				
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
_	Other				
12	Advertising and promotion				
13	Office expenses	152.		152.	
14	Information technology				
15	Royalties	0 657		0.657	
16	Occupancy	2,657.		2,657.	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	8,144.		8,144.	
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	334.		334.	
	Insurance Other expenses Itemize expenses not	749.		749.	
24	covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)		:		
ā	MEMBER ACTIVITIES	11,159.	11,159.		
t	Postage and Shipping	9,754.	9,754.		
	Printing and Publications	2,057.	2,057.		
c	SUPPLIES	1,366.		1,366.	
•	DUES	1,287.	1,287.		•
f	All other expenses	2 <u>,</u> 032.		2,032.	
	Total functional expenses. Add lines 1 through 24f	40,764.	24,757.	16,007.	0.
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2010)

Part X **Balance Sheet** (A) Beginning of year **(B)** End of year 1 1 Cash - non-interest-bearing 2 78,148 83,102 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 6,716 5,399 10b 814 10 c 1,317. **b** Less accumulated depreciation 11 11 Investments - publicly traded securities. 12 Investments - other securities See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 78,962. 16 84,419 16 Total assets Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II 22 22 of Schedule L Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 20 Other liabilities Complete Part X of Schedule D 25 20 0. 26 Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here |X| and complete lines 27 through 29 and lines 33 and 34. 78,942 27 84,419. Unrestricted net assets 27 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 78,942. 84,419. 33 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 78,962. 34 84,419.

BAA

Form 990 (2010)

Forn	n 990 (2010) Retired Public Employees of San Joaquin 7	7-0502858		Pa	ge 12
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u> </u>	<u> 241.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		40,7	764.
3	Revenue less expenses Subtract line 2 from line 1	3		5,4	<u> 177.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4		78,9	942.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		84,4	119
Pa	rt XII Financial Statements and Reporting	1 0 1	-	04,	117.
<u> </u>	Check if Schedule O contains a response to any question in this Part XII				
	oncorring and a companies to any question in this rail and			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				- 110
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2:	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
1	b Were the organization's financial statements audited by an independent accountant?		2b		X
(c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain				
	ın Schedule O			1.	
(d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both	ssued on a		×	3, 1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,
	Separate basis Consolidated basis Both consolidated and separate basis		<u>;</u> ;		
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a		X
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	3 b		
BAA			Form	990	(2010)

SCHEDULE D (Form 990) ·

Supplemental Financial Statements

OMB No 1545-0047 2010

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Inspection

Employer identification number

	tired Public Employees of San	Joaquin	77 0500050
	unty	77-0502858	
Pa	the organizations Maintaining Dono	r Advised Funds or Other Similar Funds or Act to Form 990. Part IV. line 6.	counts. Complete if
			Funds and other accounts
1	Total number at end of year	(a) Bottot Bavisca farias (b)	Turius and other accounts
2	Aggregate contributions to (during year)		
3	Aggregate communitions to (during year)		
_			
4	Aggregate value at end of year	<u> </u>	
5	Did the organization inform all donors and do funds are the organization's property, subject	nor advisors in writing that the assets held in donor advise to the organization's exclusive legal control?	d Yes No
6	Did the organization inform all grantees, done used only for charitable purposes and not for purpose conferring impermissible private ben	ors, and donor advisors in writing that grant funds can be the benefit of the donor or donor advisor, or for any other efit?	☐Yes ☐ No
Pai		lete if the organization answered 'Yes' to Form	
_			990, Part IV, line 7.
1	Purpose(s) of conservation easements held b		
	Preservation of land for public use (e g ,	· · · · · · · · · · · · · · · · · · ·	
	Protection of natural habitat	Preservation of a certified	d historic structure
_	Preservation of open space		
2	last day of the tax year	ion held a qualified conservation contribution in the form of	
			Held at the End of the Tax Year
	Total number of conservation easements.	2a	
	Total acreage restricted by conservation ease		
•	Number of conservation easements on a cert	ified historic structure included in (a) 2c	
(d Number of conservation easements included structure listed in the National Register	ın (c) acquired after 8/17/06, and not on a historic 2d	
3	Number of conservation easements modified, tax year ►	transferred, released, extinguished, or terminated by the c	organization during the
4	Number of states where property subject to c	onservation easement is located >	
5	Does the organization have a written policy reand enforcement of the conservation easeme	egarding the periodic monitoring, inspection, handling of vionits it holds?	olations, Yes No
6	Staff and volunteer hours devoted to monitori	ng, inspecting, and enforcing conservation easements duri	ng the year
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing conservation easements during th	ne year
8	Does each conservation easement reported o 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of section	Yes No
9	include, if applicable, the text of the footnote conservation easements	s conservation easements in its revenue and expense statemer to the organization's financial statements that describes th	e organization's accounting for
Pa	Complete if the organization ans	ections of Art, Historical Treasures, or Other Si wered 'Yes' to Form 990, Part IV, line 8.	milar Assets.
1 8	a If the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its fina	er SFAS 116 (ASC 958), not to report in its revenue statem its held for public exhibition, education, or research in furthencial statements that describes these items	ent and balance sheet works of erance of public service, provide,
ı	b If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items	er SFAS 116 (ASC 958), to report in its revenue statement and for public exhibition, education, or research in furtheran	and balance sheet works of art, ce of public service, provide the
	(i) Revenues included in Form 990, Part VIII	, line 1	- \$
	(ii) Assets included in Form 990, Part X		► \$
	amounts required to be reported under SFAS		gain, provide the following
•	a Revenues included in Form 990, Part VIII, line	e 1	► \$
	Assets included in Form 990, Part X		▶ \$

Scriedule D (Form 990) 2010 Rect.				77-050	
Part III Organizations Mainta	ining Collectio	ns of Art, Histo	orical Treasures, or	r Other Similar Ass	ets (continued)
 Using the organization's acquisit items (check all that apply) 	ion, accession, and	other records, ch	eck any of the following	g that are a significant u	se of its collection
a Public exhibition		d Loan	or exchange programs		
b Scholarly research		e 🔲 Other			
c Preservation for future gener	ations				
4 Provide a description of the organ Part XIV		•			se in
5 During the year, did the organiza assets to be sold to raise funds in					Yes No
Part IV Escrow and Custodia	I Arrangement	. Complete if	organization answe	red 'Yes' to Form 9	90, Part IV, line
9, or reported an amo	unt on Form 99	0, Part X, line	21.		
1a Is the organization an agent, true included on Form 990, Part X?	stee, custodian, or	other intermediary	for contributions or oth	ner assets not	Yes No
b If 'Yes,' explain the arrangement	in Part XIV and co	emplete the follow	ing table		
					Amount
c Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year				1 e	
f Ending balance				1f	
2a Did the organization include an a	amount on Form 99	0. Part X. line 21?	,		Yes No
b If 'Yes,' explain the arrangement		0, 1 0.171, 111.0 21			
Part V Endowment Funds. Co		rganization and	swered 'Yes' to For	m 990 Part IV line	10
Tutt Endownent unus. Co	(a) Current year				
1. Decision of wear belows	(a) Current year	(b) Prior year	(c) Two years baci	k (a) Three years back	(e) Four years back
1 a Beginning of year balance.					, ,
b Contributions					1
c Net investment earnings, gains, and losses					* * :
d Grants or scholarships					** 4
 Other expenditures for facilities and programs 					* * * *
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentag	e of the year end b	alance held as			<u> </u>
a Board designated or guasi-endov	vment ►	8			
b Permanent endowment	%				
c Term endowment ►					
3a Are there endowment funds not	in the possession o	of the organization	that are held and admi	inistered for the	
organization by					Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If 'Yes' to 3a(II), are the related					3b
4 Describe in Part XIV the intende	d uses of the orgar	ization's endowm	ent funds		
Part VI Land, Buildings, and	Equipment . Se	e Form 990, Pa	art X, line 10.		
Description of investmen	(a) C	ost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				4	
b Buildings					
c Leasehold improvements					
d Equipment			6,716.	5,399.	1,317.
e Other	 		27.20.	2,333.	
Total. Add lines 1a through 1e (Colum	n (d) must equal F	orm 990 Part X /	column (R) line 10(c))	.	1,317.
BAA	(u) must equal t	onn 550, rait A, t	committee, mile ro(c)).	Sahaa	lule D (Form 990) 2010
				Sched	ule D (FUIII 330) 2010

77-0502858

		-0502	1858	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		I/A	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year. Subtract line 2 from line 1	Γ		
4	Net unrealized gains (losses) on investments	Γ		
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	N/A	
	Total revenue, gains, and other support per audited financial statements	1		
	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
	Net unrealized gains on investments			
	Donated services and use of facilities 2b			
	Recoveries of prior year grants			
	Other (Describe in Part XIV)	ŀ		
	Add lines 2a through 2d	2 e		
	Subtract line 2e from line 1	3		
	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
	Investments expenses not included on Form 990, Part VIII, line 7b.			
	Other (Describe in Part XIV)	i		
	Add lines 4a and 4b	4c		
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5		
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per I		n N/A	
	Total expenses and losses per audited financial statements	1	11 14/11	
	Amounts included on line 1 but not on Form 990, Part IX, line 25	-+		
	Donated services and use of facilities 2a			
	Prior year adjustments 2b			
	Other losses 2c			
	Other (Describe in Part XIV)			
	Add lines 2a through 2d	2e		
	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	 		
7	Investments expenses not included on Form 990, Part VIII, line 7b.	*		
	O Other (Describe in Part XIV)	,		
	Add lines 4a and 4b	4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	_	
	t XIV Supplemental Information			
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete additional information	lines 1 this pa	b and 2b, art to provide	
			· 	
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,	Schedule D (Form 990) 2010 Part XIV Supplementa	Retired Public	Employees of	San Joaquin	77-05	02858 F	Page 5
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TEEA3305L 07/16/10

Schedule **D** (Form 990) 2010

BAA

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Openito Public

Name of the organization Retired Public Employees of San Joaquin County	Employer identification number 77-0502858						
Form 990, Part III, Line 1 - Organization Mission							
THE OBJECTIVES OF RETIRED PUBLIC EMPLOYEES OF SAN JOAQUIN COUNTY ARE TO (1) PROMOTE							
THE WELFARE OF SAN JOAQUIN COUNTY RETIRED PUBLIC EMPLOYEES AND THEIR BENEFICIARIES,							
(2) PROVIDE CURRENT EDUCATION AND INFORMATION FOR EMPLOYEES ABOUT TO RETIRE AND							
OTHER MEMBERS, (3) ADVOCATE, PARTICIPATE IN AND OR PROMULGATE LEGISLATION AND POLICY							
AFFECTING RETIREES, (4) PUBLISH AND DISTRIBUTE A NEWSLETTER FOR THE BENEFIT OF THE							
MEMBERSHIP, AND (5) COORDINATE LEGISLATION AND POLICY AFFECTING	G_RETIREES.						
Form 990, Part VI, Line 11b - Form 990 Review Process							
KEY MEMBERS OF THE GOVERNING BODY REVIEWED FORM 990 PRIOR TO BE	EING FILED.						
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available							
No documents available to the public.							
	·						
	· 						
	·						
	·						
	·						