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#### **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)

OMB No 1545 0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

**SCANNEL BEC 2 0 2012** 

► The organization may have to use a copy of this return to satisfy state reporting requirements.

A	For the	2011 calend	lar year, or tax year beginning , 2011, and ending			,	
В	Check if a	applicable	С	D Empl	oyer Identi	fication Number	
	Addr	ess change	-2748	200			
	Nam	e change	E Telep	hone numb	ber		
	$\vdash$	l return	SANTA ANA, CA 92701	71.	4-836	-1211	
	$\vdash$	ninated		· · · -			
	$\vdash$	nded return		6 6 6 6 6 6 6	s receipts	\$ 616	5,187.
	$\vdash$	ication pending	F Name and address of principal officer JOHN FRANKS	i(a) is this a group rel	-		
	— <sub>М</sub> рріі	ication penting		I(b) Are all affiliates in		Ye	
_	Toy ove	empt status		If 'No,' attach a lis	st (see ins	tructions)	
<u>'</u>	Webs			***		_	
_				1074			7
K	art I	f organization	<u> </u>	on 1974 <b>  M</b>	State of le	egal domicile C.	<u>A</u>
		Summar		ANA DOLTO	- 000	TORRE	
			be the organization's mission or most significant activities. THE SANTA				
če			ION IS A NONPROFIT ORGANIZATION WHICH WAS INCOME.				
Та			TATE OF CALIFORNIA, ORGANIZED FOR THE PURPOSE (		¥2212	STTMG WINT	'
ě	1	heck this bo	G_THE_GENERAL_WELFARE_OF_ITS_MEMBERS_AND_THEIR_ x ► if the organization discontinued its operations or disposed of more				
ဗိ	l .		ting members of the governing body (Part VI, line 1a)	111111111111111111111111111111111111111	3	:15.	15
<b>ಿ</b> ೮			dependent voting members of the governing body (Part VI, line 1b)		4		15
ĕ	1		of individuals employed in calendar year 2011 (Part V, line 2a)		5		3
Activities & Governance	6 To	otal number	of volunteers (estimate if necessary)		6		0
⋖			d business revenue from Part VIII, column (C), line 12		7a		<u>9,200.</u>
	<b>b</b> N	et unrelated	business taxable income from Form 990-T, line 34	,	7 b		0,828.
				Prior Yea		Current \	
0	1		and grants (Part VIII, line 1h)		560.		2,000.
ž	1	-	ice revenue (Part VIII, line 2g)		846.		7,294.
Revenue	1		come (Part VIII, column (A), lines 3, 4, and 7d)		937.		1,493.
α.			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		400.		2,400.
_	1		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		743.		7, 187.
			milar amounts paid (Part IX, column (A), lines 1-3)		514.		7,952.
			to or for members (Part IX, column (A), line 4)		540.		677.
ø	<b>15</b> \$:	alaries, othe	er compensation, employee benefits (Part IX, column (A), lines 5-10)	177,	132.	185	5,418.
Expenses	<b>16a</b> Pi	rofession <b>al</b> ¶	undrasing tees (Part IX) column (A), line 11e)			<del></del>	
ğ	<b>b</b> To	otal fundrays	ling expenses (Part IX, column (D) line 25)				
ű	1 <b>17</b> 0	ther expend	est(Park X) column (A) tipes 11a Jld 11f-24e)	378,	097.	366	5,997.
	18 To	otal expense	s. Add lines 13 (Knust equal Part IX, column (A), line 25)	604,	883.		5,044.
	19 R	evenue less	expenses Subtract line 18 from line 12	63,	860.	11	.,143.
8 8				Beginning of Curre	ent Year	End of Y	ear
Net Assets or Fund Balancos	20 To	otal assets (	Part X, line 16)	1,891,			2,710.
A B	<b>21</b> To	otal liabilitie:	s (Part X, line 26)	-6,	552.	-6	871.
훏	22 N	et assets or	fund balances Subtract line 21 from line 20	1,897,	781.	1.899	,581.
Pa	rt II	Signatur	,	,, ,			,
				the best of my knowle	edge and be	elief, it is true, cor	rect and
con	plete Deci	laration of preparation	eclare that I have examined this return, including accompanying schedules and statements, and to arer (other than officer) is based on all information of which preparer has any knowledge				
				111	3 20	コン	
Sig	an a	Signatu	of officer	Date	. ·		
He	re	<b>▶</b> JOH	FRANKS DID THE	PRESIDENT			
		Type or	print name and title		•		
	•	Print/Type p	reparer's name Prebaser's signature Date	Check	ıf F	PTIN	
Pa	id	PAUL A	. TREINEN, CPA PAUL A. TREINEN, CPA US	Self emplo	yed ]	P00234080	)
Pro	eparer	Firm's name	► WHITE NELSON DIEHL EVANS LLP				
Use Only   Firm's address   ► 2875 MICHELLE DRIVE, SUITE 300   Firm's EIN ► 33-06863						-0686301	
			IRVINE, CA 92606	Phone no	(714		00
Ma	the IRS	discuss thi	s return with the preparer shown above? (see instructions)		<u>, . = -</u>	X Yes	No

	n 990 (2011) SANTA ANA POLICE OFFICERS ASSOCIATION	95-2748200	Page 2
Pa	rt III   Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission. SEE SCHEDULE O		
	SEE SCHEDULE O		
2	Did the organization undertake any significant program services during the year which were not listed on the	ne 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 service	ces? Yes X	No
4	If 'Yes,' describe these changes on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program service	es, as measured by expen	ses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount others, the total expenses, and revenue, if any, for each program service reported.	unt of grants and allocation	ns to
4	a (Code) (Expenses \$ 470,193. including grants of \$ 27,952.) (Re		
	TO REPRESENT LAW ENFORCEMENT INDIVIDUALS IN THEIR EMPLOYMENT WITH	THE CITY OF SAN	<u>TA</u>
	<u>ANA</u>		
		- <b></b>	
		<del></del>	
		<del>-</del>	
41	(Code) (Expenses \$ including grants of \$) (Re	venue \$	)
	<b></b>		
		<del></del> -	
4.	: (Code) (Expenses \$ including grants of \$) (Re	venue Š	
7.	(Code:) (Expenses $\varphi$ ) (ne	veriue v	
		<b></b>	
4 d	Other program services. (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	• Total program service expenses ► 470,193.		

Part IV Checklist of Required Schedules

			Yes	No
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_1_		Х
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 for which 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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
á	a 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	<u> </u>
ŀ	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		X
	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		<u>X</u>
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		<u>X</u>
	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		<u>X</u>
	a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If 'Yes,' complete Schedule D, Parts XI, XII, and XIII</i>	12a		<u>X</u>
	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		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
146	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
ŀ	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		<u>x</u>
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		<u> </u>
6	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		X
7	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
8	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	
	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		<u>X</u>
	aDid the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u>X</u>
Ŀ	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

			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	Χ_	
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
<b>24</b> a	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	<b>24</b> a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
ď	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		_
c	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		
t	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		
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
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).			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	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		Х
29	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		_X
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		Х
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 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_X_
b	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	35b		Х
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	
AA		Form	990 (	2011)

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	m 990 (2011) SANTA ANA POLICE OFFICERS ASSOCIATION 95-274820	10	F	<sup>2</sup> age
a	rt V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<u>'</u>		
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b (	)		
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х	
2	a 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	3		
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	1
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<del> </del>
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	х	1
	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
		55	<del>                                     </del>	
	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		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	-{		
_				٠,
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		├^
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?  a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	5c		
	solicit any contributions that were not tax deductible?	6a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
′	Organizations that may receive deductible contributions under section 170(c).			
i	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?	7a		
-	<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
•	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
(	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?	7e		
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
1	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
_				
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.			
i	a Did the organization make any taxable distributions under section 4966?	9a		
	b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter.			
á	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	a Gross income from members or shareholders			
ı	Gross income from other sources (Do not net amounts due or paid to other sources			
12:	against amounts due or received from them.)  a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	124		-
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a is the organization licensed to issue qualified health plans in more than one state?	13a		
•	Note. See the instructions for additional information the organization must report on Schedule O	134		
	·			
ľ	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			
•	Enter the amount of reserves on hand			
4	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
ŀ	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q	14b		
-				

Form 990 (2011) SANTA ANA POLICE OFFICERS ASSOCIATION 95-2748200 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. X Check if Schedule O contains a response to any question in this Part VI 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 15 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 15 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision Х 3 of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a X 8ь b Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a X 10a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes.' describe in Schedule O how this is done 12c 13 13 Did the organization have a written whistleblower policy? X 14 14 Did the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official 15a b Other officers of key employees of the organization 15b 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 16a Х taxable entity during the year? b If 'Yes,' did the organization follow 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 organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > CA 18 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 Another's website |X| Upon request Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization

## 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.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

M Officer this box if fletther the organization	ii iioi aily	Clarec	4 OI Ç	jariiz	Lunc	/11 001	nper	isated any carrent on	cer, director, or trust	
		(C)								
(A)	(B)	Position (do not check more than one box,		(D)	(E)	_ (F)				
Name and title	Average hours	`unless person is both an officer' and a director/trustee)		Reportable compensation from	Reportable compensation from	Estimated amount of other				
	per week (describe	8 5	5	Q	\$	3 ∓	7	the organization (W 2/1099 MISC)	related organizations (W 2/1099 MISC)	compensation from the
	hours for related	Former Highest compose employee  Key employee  Key employee  Officer Institutional trustor individual trustor or director				organization and related				
	organiza tions in Schedule	6 t	iona		oldi	t cor				organizations
	O)	Individual trustee or director	nstitutional trustee		ee	npen				
		e	tee			Highest compensated employee				
(1) JIM ARMSTRONG										
DIRECTOR	1	Х						0.	0.	0.
(2) MICHAEL GONZALEZ										
VICE PRESIDENT	5	Х		X				0.	0.	0.
(3) JOHN FRANKS										
PRESIDENT	3	Х		X				0.	0.	0.
(4) BO HERTER	_									
TREASURER	3	Х		X				0.	0.	0.
(5) JOHNNY QUIJAS										
DIRECTOR	1	Х						0.	0.	0.
(6) RON STIRES										
SGT. AT ARMS	3	X		Χ				0.	0.	0.
(7) BRIAN BOOKER	1								•	
SECRETARY	5	Х						0.	0.	0.
(8) DAVE LAMPMAN	_									
DIRECTOR	5	X						0.	0.	0.
(9) GALEN DIAZ										
DIRECTOR	5	Х						0.	0.	0.
(10) WESTON HADLEY	_									
DIRECTOR	1	X						0.	0.	0.
(11) FRANK FAJARDO	]									
DIRECTOR	5	Х						0.	0.	0.
(12) LAURA CANALES										
DIRECTOR	5	X						0.	0.	0.
(13) RUDY REYNOSO	] .									
DIRECTOR	1	Х						0.	0.	0.
(14) TINA HORNER	]									
DIRECTOR	1	Х			]			0.	0.	0.

Part VII Section A. Officers, Directors, Trus	iees,	ney	E			<del>:e</del> 5,	an	u nignest coi	npensateu Emj	ployees (cont)
(A) Name and title	(B) Average hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)				ıs bot	h an	(D) Reportable compensation from	<b>(E)</b> Reportable compensation from	(F) Estimated amount of other
	l	8 5		Officer		Highest compensated employee		the organization (W 2/1099 MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15) LEONARD CORREA DIRECTOR	5	х						0.	0.	0.
(16) MAGDALENO RODRIGUEZ DIRECTOR	5	Х						0.	0.	0.
(17)	<u> </u>							Ŭ.	<u></u>	<u> </u>
<u>(18)</u>										
<u>(19)</u>										
(20)			-							
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)							<b>A A</b>	0.	0. 0. 0.	0.
2 Total number of individuals (including but not limited from the organization ► 0	to thos	se lis	tea 	abo	ve)	wno 	rece	eived more than \$		
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or trusto	ee, k	еу е	empl	loye	e, or	hig	hest compensated	i employee	Yes No
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th such individual	ortable	con	nper 02 <i>l</i> .	satı f 'Ye	on a	nd c	the <i>lete</i>	r compensation fro Schedule J for	om	4 X
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co	mpens omplete	atıor Ə Sci	n fro hedu	m ai ile J	ny u I for	nrela suci	ated 1 pe	l organization or ir	ndıvıdual	5 X
Section B. Independent Contractors										
1 Complete this table for your five highest compensate compensation from the organization Report compen	d inder sation	oend for tl	ent ne c	cont alen	ract dar	ors t year	hat end	received more that ding with or within	n \$100,000 of the organization's	ax year.
(A) Name and business address	5							(B) Description o	of services	(C) Compensation
LAW OFFICE OF CHARLES GOLDWASSER 5858 WILSHIE	E BLV	D.,	ST	E 20	05	LOS	AN	LEGAL SERVICE	S	114,880.
	-						_			
2 Total number of independent contractors (including to \$100,000 in compensation from the organization	ut not	limite	ed to	thc	se l	ısted	i ab	ove) who received	i more than	

	* The Statement of Resende	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
NTS	1a Federated campaigns 1a		revenue		312, 313, 01 314
GRAI	b Membership dues  c Fundraising events  1b  1c  31,000.				
IFTS,	d Related organizations 1d				
IS, G	e Government grants (contributions) 1 e				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 1,000.				
ND	g Noncash contributions included in lns 1a-1f* \$				
2 4	h Total. Add lines 1a-1f  Business Code	32,000.			
ENUE	2a MEMBERSHIP DUES & ASSMTS 900099	354,023.	354,023.		
REVI	2a MEMBERSHIP DUES & ASSMTS 900099 b TRUST ADMIN FEE INCOME 900099	194,071.	194,071.	-	
3	c ADVERTISING - RELIABLE SO	19,200.	134,011.	19,200.	
ERV	d				
AM S	e				
JGR/	f All other program service revenue				
PRC	g Total. Add lines 2a-2f	567,294.			
	3 Investment income (including dividends, interest and	14 402			14 402
	other similar amounts)	14,493.			14,493.
	<ul><li>Income from investment of tax-exempt bond proceeds</li><li>Royalties</li></ul>				
	(i) Real (ii) Personal			······································	
	6a Gross rents 2,400.				
	b Less. rental expenses				
	c Rental income or (loss) 2,400.				
	d Net rental income or (loss)	2,400.			2,400.
	7a 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)				
ENUE	8a Gross income from fundraising events (not including \$\frac{31,000}{}.				
Æ	of contributions reported on line 1c) See Part IV, line 18 a				
OTHER REVEN	b Less. direct expenses.				
6	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19				
	b Less. direct expenses. b				
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances a				
	b Less. cost of goods sold b				
	c Net income or (loss) from sales of inventory				
ŀ	Miscellaneous Revenue Business Code	-			
ŀ	11a b				
					<del></del>
	d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	616,187.	548,094.	19,200.	16,893.

Page 10

#### 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)

Check if Schedule O contains a re  Do not include amounts reported on lines	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
6b, 7b, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	14,177.	14,177.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	13,775.	13,775.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members	24,677.	24,677.		
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	136,926.	102,695.	34,231.	
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	37,191.	27,893.	9,298.	
10 Payroll taxes	11,301.	8,476.	2,825.	
11 Fees for services (non-employees):				
a Management	114,880.	114,880.		
<b>b</b> Legal	114,880.	114,000.		
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
<b>g</b> Other				
12 Advertising and promotion			12 22	
13 Office expenses	13,858.		13,858.	
14 Information technology	4,071.	3,053.	1,018.	
15 Royalties				
16 Occupancy				
17 Travel	3,244.	2,433.	811.	
Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings 20 Interest	16,742.	16,742.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	36,875.	27,656.	9,219.	**
23 Insurance	29,113.	12,835.	16,278.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	23/113.	12/000.	10/2/01	
a TELEPHONE AND UTILITIES	26,875.	20,157.	6,718.	<u></u> -
b TAXES AND LICENSES	24,705.		24,705.	
c GENERAL AWARDS	18,941.		18,941.	
d GENERAL DONATIONS	18,719.	18,719.		
e All other expenses	58,974.	43,085.	15,889.	
25 Total functional expenses. Add lines 1 through 24e.	605,044.	451,253.	153,791.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here	, , , , , , ,			
SOP 98-2 (ASC 958-720)				
30F 30-2 (M3C 330-720)	L			

			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		1	62,815
	2	Savings and temporary cash investments	629,304.	2	603,960
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
4	6	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 organizations (see instructions)		6	
A S E	7	Notes and loans receivable, net	361.	7	361
S E	8	Inventories for sale or use		8	
T S	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment, cost or other basis  Complete Part VI of Schedule D  1,510,286.			
	Ь	Less. accumulated depreciation 10b 284,712.	1,261,564.	10 c	1,225,574
	11	Investments – publicly traded securities	,,	11	
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,891,229.	16	1,892,710
	17	Accounts payable and accrued expenses	-6,552.	17	-6,871
	18	Grants payable	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	18	
	19	Deferred revenue		19	
Ļ	20	Tax-exempt bond liabilities		20	
A B	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ļ	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Ţ	23	Secured mortgages and notes payable to unrelated third parties		23	
E S	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	-6,552.	26	-6,871
N E		Organizations that follow SFAS 117, check here ► and complete lines	-,		-,
Ť		27 through 29 and lines 33 and 34.			
A S	27	Unrestricted net assets		27	
ASSETS	28	Temporarily restricted net assets .		28	
Š	29	Permanently restricted net assets		29	
O R		Organizations that do not follow SFAS 117, check here ► X and complete			<del> </del>
		lines 30 through 34.			
02C	30	Capital stock or trust principal, or current funds		30	
В	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
۲į	32	Retained earnings, endowment, accumulated income, or other funds	1,897,781.	32	1,899,581
Ç		Total net assets or fund balances	1,897,781.	33	1,899,581
٤	34	Total liabilities and net assets/fund balances	1,891,229.	34	1,892,710
A			_, _, _,		Form <b>990</b> (201

Forr	990 (2011) SANTA ANA POLICE OFFICERS ASSOCIATION	95-274820	0	Р	age 12
Pa	Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6	16,	<u> 187.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	6	05,	044.
3	Revenue less expenses. Subtract line 2 from line 1	3		11,	<u>143.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,8	97,	781.
5	Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE O	5		-9,	<u>343.</u>
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	1.8	99.	581.
Pa	t XII Financial Statements and Reporting				
-	Check if Schedule O contains a response to any question in this Part XII				$\Box$
				Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	Were the organization's financial statements audited by an independent accountant?		2b		X
•	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight or 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 in Schedule O.				
(	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is separate basis, consolidated basis, or both.	sued on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
3	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	ne Single	3a		х
	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the r or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired audit	3b		
BAA			Form	1 990	(2011)

Form **990** (2011)

#### SCHEDULE C (Form 990 or 990-EZ).

**Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2011

Department of the Treasury Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations. Complete Part I-A only.

• Section 501(c)(4), (5), or (6) organizations: Complete Part III

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

Name	Name of organization Employer identification number							
	NTA ANA POLICE OFFI			95-274820				
Pa	t I-A Complete if the o	rganization is exempt under sect	ion 501(c) or is a	section 527 organ	ization.			
1	Provide a description of the o	organization's direct and indirect political ca	impaign activities in F	art IV.				
2	Political expenditures			►\$				
3	Volunteer hours							
Pa	rt I-B Complete if the o	rganization is exempt under sect	ion 501(c)(3).					
1	Enter the amount of any exci	ise tax incurred by the organization under s	ection 4955	▶\$				
2	Enter the amount of any exci	ise tax incurred by organization managers i	under section 4955	▶\$				
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for t	hıs year?		Yes No			
4:	a Was a correction made?				Yes No			
	If 'Yes,' describe in Part IV.							
Pa	t I-C Complete if the o	rganization is exempt under sect	on 501(c), exce					
1	Enter the amount directly exp	pended by the filing organization for section	527 exempt function	activities ►\$				
2	Enter the amount of the filing function activities	g organization's funds contributed to other o	organizations for secti	on 527 exempt ►\$				
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b							
4	Did the filing organization file	Form 1120-POL for this year?			Yes X No			
5	organization made payments amount of political contribution	and employer identification number (EIN) on the control of the con	nount paid from the fill y delivered to a separ	ing organization's funds ate political organization	: Also enter the			
	(a) Name	<b>(b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter 0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter 0			
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								

Schedule C (Form 990 or 990-EZ) 201				95-2748	
Part II-A   Complete if section 501		n is exempt under se	ection 501(c)(3) an	d filed Form 5768 (e	election under
A Check ► If the filli	ng organization belo	ings to an affiliated group (	and list in Part IV each	affiliated group member	s name,
address,	, EIN, expenses, an	d share of excess lobbying	expenditures).		
B Check ► I if the filii	ng organization che	cked box A and 'limited cor	ntrol' provisions apply.		
(The term		ving Expenditures ans amounts paid or incurr	ed.)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a Total lobbying expenditi	ures to influence pu	blic opinion (grass roots lot	obying).		
<b>b</b> Total lobbying expenditi	ures to influence a l	egislative body (direct lobb	ying)		
c Total lobbying expendit	ures (add lines 1a a	nd 1b)			
d Other exempt purpose		·			
e Total exempt purpose e	•	nes 1c and 1d)			
* * *	•	ount from the following tab	le ın		
If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxable a	mount is:		······································
Not over \$500,000		20% of the amount on line 1e		1	
Over \$500,000 but not over \$1	000 000	\$100,000 plus 15% of the excess	over \$500,000.	1	
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess	<del></del>	1	
Over \$1,500,000 but not over \$		\$225,000 plus 5% of the excess of		1	
Over \$17,000,000	¥17,000,000	\$1,000,000.	γι, ουσ, ουσ.	1	
g Grassroots nontaxable :	amount (enter 25%		·		
h Subtract line 1g from lin	=	·			·
i Subtract line 1f from lin					
1 Subtract line 11 from lin	le IC II Zelo of less	, enter -u-			
j If there is an amount ot section 4911 tax for this		her line 1h or line 1i, did th	e organization file Forn	n 4720 reporting	Yes No
(Soi	me organizations th colum	4-Year Averaging Period I at made a section 501(h) el ns below. See the instructi	ection do not have to o	omplete all of the five h 2f.)	
	Lob	bying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	(e) Total
2a Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))			‡ ‡ ‡ ‡ ‡		
f Grassroots lobbying expenditures				Sohodula 6 /	n 990 or 990-EZ) 2011
BAA				Schedule C (Forr	ii ララひ Of タタひ・ヒム) 2011

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	<b>(</b> a	)	(b	)	
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amo	unt	
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?	i				
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?		T I			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total. Add lines 1c through 1:	_				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	Ī	1		•••••	
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912	_				
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	Ī	1			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	ŧ	1			
Part III-A   Complete if the organization is exempt under section 501(c)(4), section 501(	C)(5	Or			
section 501(c)(6).	,c)(J	,, 01			
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1	Х	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			. 2		Х
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	-	X
Part III-B   Complete if the organization is exempt under section 501(c)(4), section 501(	c)(5)	or:			
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' O answered 'Yes.'	R (b)	Par	t III-A, lin	e 3, i	is
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year	- 1	2a			
<b>b</b> Carryover from last year	ſ	2b			
c Total	Ī	2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	Ī	3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politica expenditure next year?	,	4			0.
5 Taxable amount of lobbying and political expenditures (see instructions)	Ī	5			0.
Part IV Supplemental Information					
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part I Also, complete this part for any additional information	I-A, a	nd Pa	rt II-B, line	1.	
					_
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			<b></b> -		
		. <u></u>			_ <b></b>
			- <i></i> -		
	_		<b>-</b>		

Part IV   Supplemental Information (continued)	Schednie C (Loum aan of aan-fs) Shill Sahata Way LOFTCE OLLICEVS V22OCTVIION	93-2/40200	Page 4
	Part IV   Supplemental Information (continued)		
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## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

#### **Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions. OMB No 1545 0047 **2011** 

Open to Public Inspection

Employer identification number

	NTA ANA POLICE OFFICERS ASSOCI				5-2748200	
Pa	TI Organizations Maintaining Dono the organization answered 'Yes'	or Advised Funds or Oth	ner Similar Funds	or Acco	<b>unts.</b> Comple	ete if
	the organization answered Tes	T	<del></del>		<del> </del>	<del> </del>
_	<b>-</b>	(a) Donor advised	tunds	<b>(b)</b> Fund	ds and other acc	ounts
1	Total number at end of year					<del></del> -
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					··· <u>-</u>
4	Aggregate value at end of year					
5	Did the organization inform all donors and don funds are the organization's property, subject			dvised	Yes	No No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for t purpose conferring impermissible private bene	the benefit of the donor or don	ng that grant funds car or advisor, or for any	n be other	∏Yes	Пио
Par	rt II Conservation Easements. Comp		answered 'Yes' to	Form 990		
	Purpose(s) of conservation easements held by	<del></del>		יכב ווווט ו	<u>, i ait iv, iii i</u>	<del>67.</del>
•	Preservation of land for public use (e.g., re		Preservation of an	historically	important land a	rea
	Protection of natural habitat	ecreation of education,	Preservation of a	-		irea
	Preservation of open space		reservation of a t	erunea msu	oric structure	
2	Complete lines 2a through 2d if the organization	on held a qualified conservation	n contribution in the fo	rm of a con	servation easem	ent on the
_	last day of the tax year.	on held a quamica conservation			Servation casem	
				Held	at the End of th	ne Tax Year
á	Total number of conservation easements			2a		
ŀ	Total acreage restricted by conservation easer	ments		2b		
•	Number of conservation easements on a certif	ied historic structure included	ın (a)	2c		
C	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, ar	nd not on a historic	2d		
3	Number of conservation easements modified, tax year ►	transferred, released, extingui	shed, or terminated by	the organiz	zation during the	!
4	Number of states where property subject to co	nservation easement is located	d ►			
5	Does the organization have a written policy regard enforcement of the conservation easemen	garding the periodic monitoring	g, inspection, handling	of violations	S, Yes	No
6	Staff and volunteer hours devoted to monitorin	ng, inspecting, and enforcing co	onservation easement	s during the	year	
7	Amount of expenses incurred in monitoring, in	specting, and enforcing conse	rvation easements dur	ing the year	•	
8	Does each conservation easement reported or 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the red	quirements of section		Yes	No
9	In Part XIV, describe how the organization repinclude, if applicable, the text of the footnote to	orts conservation easements i	n its revenue and expo	ense statem	ent, and balance	e sheet, and
	conservation easements					
Par	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historica swered 'Yes' to Form 990	Treasures, or On O, Part IV, line 8.	ther Simil	ar Assets.	
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finan-	s held for public exhibition, edu	ication, or research in			
b	If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items.	SFAS 116 (ASC 958), to repo d for public exhibition, educati	rt in its revenue stater on, or research in furtl	ment and ba herance of p	lance sheet work oublic service, pr	ks of art, ovide the
	(i) Revenues included in Form 990, Part VIII,	line 1			<b>►</b> \$	
	(ii) Assets included in Form 990, Part X.				►\$	
2	If the organization received or held works of ar amounts required to be reported under SFAS			ancial gain,	provide the follow	wing
а	Revenues included in Form 990, Part VIII, line	1			►\$	
L.	Assets included in Form 990. Part X				<b>▶</b> ♦	

Schedule <b>D</b> (Form 990) 2011 SANT.	a ana po	T.TCE (	OFFICERS A	2200	TATTON	95-	2748200	1	Page 2
Part III Organizations Mainta									
Using the organization's acquisititems (check all that apply).									
a Public exhibition			d Loan	or ex	change programs				
b Scholarly research			e Other		• • •				
c Preservation for future gener	ations								
4 Provide a description of the orga Part XIV.		lections a	and explain how	they	further the organi	zation's exempt pur	pose in		
5 During the year, did the organiza assets to be sold to raise funds r	ather than to	be main	tained as part o	of the	organization's coll	ection?	Ye		No
Part IV Escrow and Custodia line 9, or reported an	al Arrange amount or	ments.	Complete if 990. Part X	the Lline	organization a	nswered 'Yes' to	o Form 9	90, Pa	art IV,
	-					or accets not	-		
1a is the organization an agent, trus included on Form 990, Part X?	stee, custodia		er intermediary	ior co	ontributions or oth	er assets not	Ye	s	No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV a	and comp	olete the follows	ng tab	le.				
							Amou	<u>nt</u>	
c Beginning balance						1 c			
d Additions during the year						1 d			
e Distributions during the year						1 e			
f Ending balance						1 f			
2a Did the organization include an a	mount on Foi	rm 990. F	Part X. line 21?			L	Ye	s	No
<b>b</b> If 'Yes,' explain the arrangement		,					□	•	
Part V Endowment Funds. C		the orc	anization ar	ISWE	red 'Yes' to Fo	orm 990 Part IV	line 10		
	(a) Current		(b) Prior yea		(c) Two years bac	I		: ) Four yea	rs hack
1a Beginning of year balance	(a) odiren	t your	(b) i noi yea		(c) Two years bac	(u) Three years t	AUN (E.	) Tour yea	13 Dack
<b>b</b> Contributions							<del></del>	••••••	<del></del>
<b>b</b> Contributions									
<ul> <li>c Net investment earnings, gains, and losses</li> </ul>								*******	
d Grants or scholarships			. <u> </u>						
<ul> <li>Other expenditures for facilities and programs</li> </ul>									
f Administrative expenses									
g End of year balance									
2 Provide the estimated percentage	e of the curre	nt year e	end balance (line	e 1g,	column (a)) held a	ns.			
a Board designated or quasi-endov	vment ►	-	8	-					
<b>b</b> Permanent endowment ►		5	<del></del>						
c Temporarily restricted endowmer	nt ►		8						
The percentages in lines 2a, 2b,		d equal 1	_						
3a Are there endowment funds not a organization by	n the possess	sion of th	e organization	that a	re held and admin	istered for the		Yes	No
(i) unrelated organizations							3a(i)		<b>—</b>
(ii) related organizations							3a(ii)		1
<b>b</b> If 'Yes' to 3a(ıı), are the related of	roanizations l	listad as	required on Sci	hedula	R2		3b	<del> </del>	†
4 Describe in Part XIV the intended							30	1	
Part VI Land, Buildings, and									
Description of property	<u> - quipilieli</u>	(a) Cost	or other basis	(b)	Cost or other casis (other)	(c) Accumulated depreciation	(d)	Book v	alue
1a Land		("'	189,250.		22312 (301101)	aspicolation		180	,250.
<b>b</b> Buildings		<u> </u>	283,876.			63,69	<del></del>		, <u>230.</u> ,186.
c Leasehold improvements			997,633.			188,09			,542.
c reasenoid imbrosements		1	771,033.			100,09.	<b>⊥ •  </b>	009	, 544.

Part VI Land, Buildings, and Equi	pment. See Form 990, Pa	art X, line 10.		
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	189,250.			189,250.
<b>b</b> Buildings	283,876.		63,690.	220,186.
c Leasehold improvements	997,633.		188,091.	809,542.
<b>d</b> Equipment	21,756.		19,326.	2,430.
e Other	17,771.		13,605.	4,166.
Total. Add lines 1a through 1e. (Column (d) i	must equal Form 990, Part X, co	olumn (B), line 10(c).)	<b>&gt;</b>	1,225,574.

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Schedule **D** (Form 990) 2011

Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)

2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

(10) (11)

	edule D (Form 990) 2011 SANTA ANA POLICE OFFICERS ASSUCTA		95-2748200	Page 4
Pa	*XI   Reconciliation of Change in Net Assets from Form 990 to Audited Fin	nancial Statements	N/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		_	<del></del>
4	Net unrealized gains (losses) on investments			
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			
	Excess or (deficit) for the year per audited financial statements. Combine lines			
	t XII Reconciliation of Revenue per Audited Financial Statem	ents With Revenue	_	
	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.	1 - 1		
	Net unrealized gains on investments	2a		
	Donated services and use of facilities	2b		
	Recoveries of prior year grants	2c		
	Other (Describe in Part XIV.)	2d		
	Add lines 2a through 2d			
	Subtract line 2e from line 1	1 1	3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
- 1	Other (Describe in Part XIV )	4b		
	: Add lines <b>4a</b> and <b>4b</b>		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 Statemen	ts With Expenses p	er Return N/A	
	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	1 1		
	Donated services and use of facilities	2a		
	Prior year adjustments	2b		
•	Other losses	2c		
•	Other (Describe in Part XIV.)	2d		
•	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	1 1	3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 . 1		
_	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIV)	4Ы		
	Add lines 4a and 4b  Total expenses Add lines 3 and 4a. (This must equal Form 990, Part I, line 18	1	4c 5	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18. <b>TXIV</b> Supplemental Information	·)		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, P V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, I additional information.	Part III, lines 1a and 4, Pines 2d and 4b. Also co	'art IV, lines 1b and 2b, mplete this part to provid	e
	- <b> </b>			
				- <b>-</b>
	- <b></b>	<del></del>		
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Schedule **D** (Form 990) 2011

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Schedule D (Form 990) 2011 SANTA ANA POLICE OFFICERS ASSOCIATION	93-2140200	Page 5
Part XIV Supplemental Information (continued)		
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#### **SCHEDULE G** (Form 990 or 990-EZ)

## Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18,

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OMB No 1545 0047

or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Department of the Treasury Internal Revenue Service Employer identification number Name of the organization 95-2748200 SANTA ANA POLICE OFFICERS ASSOCIATION Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations a е Solicitation of non-government grants b Internet and email solicitations f Solicitation of government grants C Phone solicitations g X Special fundraising events d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? X Yes No b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (ni) Did fundraiser (i) Name and address of individual (ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to (or retained by) or entity (fundraiser) have custody or control (or retained by) from activity of contributions? fundraiser listed in organization column (i) Yes No J&J ADVERTISING 1775 E BENEFIT X 140,200 109,200 31,000. LINCOLN ANAHEIM CA 92605 SHOW 2 3 4 5 6 7 8 9 10 109,200 Total 140,200. 31,000. 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing CA

Pa	đ II	Fundraising Events. Complete if the more than \$15,000 of fundraising List events with gross receipts gr	ı event contributior	wered 'Yes' to Forn as and gross incom	n 990, Part IV, line e on Form 990-EZ	18, or reported , lines 1 and 6b.
	_	cist events with gross receipts gr	(a) Event #1 BENEFIT SHOW	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add column (a) through column (c))
R E V E N U E	1	Gross receipts	(event type) 31,000.	(event type)	(total number)	31,000.
E	2	Less. Charitable contributions	31,000.			31,000.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
DIRECT	6	Rent/facility costs				
	7	Food and beverages				
X	8	Entertainment				
EXPENSES	9	Other direct expenses				
3	10 11	Direct expense summary Add lines 4 throws Net income summary. Combine line 3, co	• • • • • • • • • • • • • • • • • • • •		<b>&gt;</b>	
Pai		<b>Gaming.</b> Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye	es' to Form 990, Pa	ort IV, line 19, or re	eported more than
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
	1	Gross revenue				
E	2	Cash prizes				
D P E N S E S	3	Non-cash prizes				
C S T E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d)		•	
	8	Net gaming income summary Combine li	nes 1, column (d) and I	ine 7	<b>•</b>	
a	ls th	er the state(s) in which the organization op ie organization licensed to operate gaming o,' explain.	activities in each of the	ese states?		
		e any of the organization's gaming licenseses,' explain.	s revoked, suspended o	-	•	Yes No
BAA			TEEA3702L C	01/24/12	Schedule G (Fo	rm 990 or 990-EZ) 2011

95-2748200

Schedule G (Form 990 or 990-EZ) 2011 SANTA ANA POLICE OFFICERS ASSOCIATION

Sche	edule G (Form 990 or 990-EZ) 2011 SANTA ANA POLICE OFFICERS ASSOCIATION	95-2/48	200	Page <b>3</b>
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity administer charitable gaming?	formed to	Yes	No
13	Indicate the percentage of gaming activity operated in:			
	The organization's facility	13a		8
Ŀ	b An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books	and records.		
	Name •			<b>.</b>
	Address ►			
15 a	a Does the organization have a contact with a third party from whom the organization receives gaming reve	enue?	Yes	∏No
	b If 'Yes,' enter the amount of gaming revenue received by the organization ► \$ a			
	of gaming revenue retained by the third party > \$			
c	c If 'Yes,' enter name and address of the third party.			
	Name •			. <b></b>
	Address ►			 
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
а	a Is the organization required under state law to make charitable distributions from the gaming proceeds to state gaming license?	retain the	Yes	□No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations	or spent in the		ш
	organization's own exempt activities during the tax year 🕨 \$			
Par	<b>Supplemental Information.</b> Complete this part to provide the explanations req columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as a this part to provide any additional information (see instructions).	uired by Pa pplicable. A	rt I, line Iso com	2b, plete
				<del>_</del>
		<del> </del>		
			-	

# SCHEDULE I

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

OMB No 1545 0047 2011 Open to Public Inspection

**≗** Employer identification number X Yes 95-2748200 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance? and the selection criteria used to award the grants or assistance? Part | General Information on Grants and Assistance SANTA ANA POLICE OFFICERS ASSOCIATION Name of the organization

Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to SEE PART IV 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	() Method of valuation (book, FMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
(2)							
(4)							
(5)							
( <u>9</u> )							
<i>ω</i>							
		_					
<u>(8)</u>							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government orga	anizations listed in t	he line 1 table			:	0
3 Enter total number of other organizations listed in the line 1 table	ns listed in the line 1	table					

Schedule I (Form 990) (2011)

TEEA3901L 06/01/11

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2 Schedule 1 (Form 990) (2011) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (f) Description of non cash assistance Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information 95-2748200 (e) Method of valuation (book, FMV, appraisal, other) THE ORGANIZATION HAS A FORMAL APPLICATION PROCESS WHICH MUST BE COMPLETED BEFORE (d) Amount of non cash assistance PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S. 5,600 SANTA ANA POLICE OFFICERS ASSOCIATION (c) Amount of cash grant (a) Type of grant or assistance Schedule I (Form 990) (2011) GRANT IS GIVEN 1 VARIOUS Part III BAA 8 m 5 ဖ

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

2011

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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.

Employer identification number Name of the organization 95-2748200 SANTA ANA POLICE OFFICERS ASSOCIATION FORM 990, PART VI, SECTION B, LINE 12A THE BOARD OF DIRECTORS IS IN THE PROCESS OF INSTITUTING THE CONFLICT OF INTEREST POLICY, WHICH SHOULD BE COMPLETED SOMETIME IN 2012. FORM 990, PART VI, SECTION B, LINE 13 THE BOARD OF DIRECTORS IS IN THE PROCESS OF INSTITUTING THE WHISTLERBLOWER POLICY, WHICH SHOULD BE COMPLETED SOMETIME IN 2012. FORM 990, PART VI, SECTION B, LINE 14 THE BOARD OF DIRECTORS IS IN THE PROCESS OF INSTITUTING THE DOCUMENT RETENTION AND DESTRUCTION POLICY, WHICH SHOULD BE COMPLETED SOMETIME IN 2012. PART 990, PART VI, SECTION B, LINE 15 AN INSIDER COMPENSATION REASONABLENESS POLICY IS NOT APPLICABLE AS THERE IS NO COMPENSATION PAID. FORM 990, PART III, LINE 1 - ORGANIZATION MISSION THE SANTA ANA POLICE OFFICERS ASSOCIATION IS A NONPROFIT ORGANIZATION WHICH WAS INCORPORATED ON JULY 24, 1948, IN THE STATE OF CALIFORNIA, ORGANIZED FOR THE PURPOSE OF AIDING, ASSISTING AND IMPROVING THE GENERAL WELFARE OF ITS MEMBERS AND THEIR FAMILIES. FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS A COPY OF THE TAX RETURN IS PROVIDED TO EACH MEMBER OF THE GOVERNING BODY BEFORE THE TAX RETURN IS FILED. SAPOA'S PRESIDENT IS DELEGATED THE RESPONSIBILITY TO REVIEW THE FORM 990 BEFORE REVIEWING AND SIGNING THE RETURN. FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE THE ORGANIZATION DISCLOSES GOVERNING DOCS, POLICIES, AND FINANCIAL STATEMENTS AS REQUIRED BY LAW. AVAILABLE BY REQUEST.

2011

#### **SCHEDULE O - SUPPLEMENTAL INFORMATION**

PAGE 2

**CLIENT 076174** 

SANTA ANA POLICE OFFICERS ASSOCIATION

95-2748200

11/09/12

11 55AM

FORM 990, PART XI, LINE 5 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

PRIOR PERIOD ADJUSTMENT

TOTAL \$