Department of the Treasury

EXTENDED TO NOVEMBER 15, 2018

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

inten	iai neve	Go to www.irs.gov/For	m990 for instructions an	d the lates	st information.	Inspection
<u>A F</u>	or the	2017 calendar year, or tax year beginning	and	ending		
В	Check if	C Name of organization			D Employer identific	ation number
		FIRST ENTERTAINMENT CREDIT UNION				
	Addre	FKA CREDIT UNIONS IN THE STATE OF CA			_	
	Name chang	Doing business as			95-2513	3485
	initial return	Number and street (or P.O. box if mail is not delivere	d to street address)	Room/suite	E Telephone number	
	Final return	6735 FOREST LAWN DRIVE	·	300	888-800)-3328
	termir ated	City or town, state or province, country, and ZIP	or foreign postal code		G Gross receipts \$	59,891,413,
	Amen		3-		H(a) Is this a group re	
	Applic		AGGON		for subordinates	
	pendi	SAME AS C ABOVE	.00011	- 17	H(b) Are all subordinates in	
1 1	Гах-өх		(insert no.) 4947(a)(1)	or 52	7 7 '	list (see instructions)
		e: Www.firstent.org	(11136111103)	<u> </u>	H(c) Group exemption	
		organization: Corporation Trust Associa	ation x Other	I Vest		State of legal domicile: CA
_	art I	Summary	anon (X) onto	<u> L real</u>	Oriorination, 1967 [W	State of legal doffliche. CA
	1		outroant actuation is grown			
Governance	'	Briefly describe the organization's mission or most sign		ERATIVE	ORGANIZED FOR THE	
an	_	PURPOSE OF PROMOTING THRIFT AND SAVINGS A				
ē	ı	Check this box if the organization discontinu		sea or mor	1 1	sets
်		Number of voting members of the governing body (Par	•		3	9
<u>«</u>	l	Number of independent voting members of the govern			4	9
Activities &	5	Total number of individuals employed in calendar year	2017 (Part V, line 2a)		5	258
Ξ		Total number of volunteers (estimate if necessary)	670 (亡り		6	19
Ą	7 a	Total unrelated business revenue from Part VIII, columi	n (C), FREE EIVED	_0	7a	3,798,854,
	b	Net unrelated business taxable income from Form 990	- I, line 34	고있	7 <u>b</u>	-124,123,
		Contributions and grants (Part VIII line 1b)	OCT 2 4 2018	RS-0	Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	2 001 2 4 2010	10	0.	0.
	9	Program service revenue (Part VIII, line 2g)		귀ㄸ! └	43,160,905.	47,339,109,
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and	17d)OGDEN, UT		9,081,786,	12,325,806,
<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c,	10c, and 11e)		229 720.	226,498,
	12	Total revenue - add lines 8 through 11 (must equal Part	t VIII, column (A), line 12)		52,472,411,	59,891,413,
	13	Grants and similar amounts paid (Part IX, column (A), li	nes 1-3)		9,167,	41,577,
	14	Benefits paid to or for members (Part IX, column (A), lir	0.	0,		
S	15	Salaries, other compensation, employee benefits (Part	•		17,851,718,	18,455,031,
ıse		Professional fundraising fees (Part IX, column (A), line			0.	0.
Expenses		Total fundraising expenses (Part IX, column (D), line 25	* .	0.		
Ä	l .	Other expenses (Part IX, column (A), lines 11a-11d, 11f			33,371,999,	35,027,396,
					51 232 884.	
	1	Total expenses Add lines 13-17 (must equal Part IX, co	olumn (A), line 25)	⊢		53 524 004
<u>-8</u>	19	Revenue less expenses Subtract line 18 from line 12			1,239,527,	6,367,409.
Net Assets or Fund Balances		Total assets (Dark V. har a 40)		B	eginning of Current Year	End of Year
SSE	20	Total assets (Part X, line 16)		 -	1,360,217,551.	1,455,630,830,
let /	21	Total liabilities (Part X, line 26)	••	<u> </u>	1,243,449,707.	1 335 429 376
픋	22	Net assets or fund balances Subtract line 21 from line	20		116,767,844.	120,201,454.
_	art II	Signature Block				
		Ities of perjury, I declare that I have examined this return, inclu				knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is	based on all information of wi	hich prepare		
			<u> </u>		1018/18	<u> </u>
Sig	n	Signature of officer			Date	
Her	e	ADDIE ALLISON VP FINANCE				
		Type or print name and title				
		Print/Type preparer's name Pre	parer's signature		Date Check	PTIN
Paid	l	VALENTINO CREUS CPA	IVI		/6/16/18 sett-employe	P01054153
Prep	arer	Firm's name TURNER WARREN HWANG & CON	RAD ACCTCY		Firm's EIN	95-4083485
Use	Only	Firm's address > 100 NORTH FIRST ST., STE 20				
	•	BURBANK, CA 91502	=		Phone no. (818	3) 954-9700
Mav	the IF	RS discuss this return with the preparer shown above?	(see instructions)			x Yes No
	01 11-2			ons.		Form 990 (2017)
						

Form 990 (2017) FKA CREDIT UNIONS IN THE STATE OF CA

	•		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_		<u>x</u> _
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u> </u>
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	_	1	
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
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		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			<u> </u>
•	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			
Ŭ	Schedule D, Part III	8		_ X _
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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	1	х
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		<u> </u>
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		ļ	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		ĺ	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		1	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	_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	44.1		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> </u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	_х	
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f		v
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111		<u> </u>
128	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	_	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	_15		<u>x_</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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	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		<u> </u>
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	000	Х

Form **990** (2017)

FKA CREDIT UNIONS IN THE STATE OF CA

Part IV	Checklist (of Requ	ired Sc	hedules	(continued)

domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II 2		•		<u>Yes</u>	No
21 Did the organization report more than \$5,000 of grafts or other assistance to any domestic organization or domestic government on Part X, column (A), line 27 (if "Yes," complete Schedule I, Part is and if II and to report more than \$5,000 of grafts or other assistance to or for domestic individuals on Part IX, column (A), line 27 (if "Yes," complete Schedule I, Part I and III and former officers, directors, trustees, key employees, and highest compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule II and the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule III and the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule III and the year that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule III and the year that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule III and III	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
domestic government on Part IX, column (A), line 17 if 11*es*, complete Schedule I, Parts I and if 2	b		20b		
22 Lot the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 22 If "Yes," complete Schedule I. Part I and III 22 Lot the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization is current and former officers, directors, trustees, key employees, and highest compensation of the organization is current and former officers, directors, trustees, key employees, and highest compensation of the organization is current and former officers, directors, trustees, key employees, and highest compensation of the organization of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule K. If "No", go to line 25a bit of the organization maintain an escrow account other than a retunding escrow at any time during the year to defease any tax-exempt bonds? 24b Did the organization maintain an escrow account other than a retunding escrow at any time during the year? 24c Did the organization aware that it engaged for severe the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II b is the organization aware that it engaged in an excess benefit transaction with a disqualified person or 3 in year. If yes, "complete Schedule L, Part II b did the organization in sort been reported on any of the organization sport or promer officers, directors, trustees, key employees, or disqualified persons? If "Yes," complete Schedule L, Part II b did the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If "Yes," complete Schedule L, Part IV b A nemtry of which a current or former officer, director, trustee, or key employees? If "Yes," complete Schedule L, Part IV b A nemtry of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A nemtry of whic	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX, column (A), line 27 iii "Yes." complete Schedule I, Parts I and III 2		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
23 Did the organization answer "Yes" to Parl VII, Section A, Ine 3, 4, or 5 about compensation of the organization's current and former officers, directors, fustees, key employees, and highest compensated employees? If "Yes," complete Schedule J and the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule K If "No", go to line 25s bill 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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25s bill the organization maintain an escrow account other than a refunding escrow at any time during the year of the 24a x years any tax-exempt bonds? Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d years any tax-exempt bonds? Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d years any tax-exempt bonds? It is be organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d years any tax-exempt bonds? It is be organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d years any tax-exempt bonds? It is be organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d years any tax-exempt bonds? It is be the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d years any tax-exempt bonds? It is be the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d years years any time during the year? 24d years ye	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	[]		
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24a 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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to here 25a bid the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization invest any an excess benefit transaction with a disqualified person act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25c Section 50 (F(08), 501(c)(4), and 501(c)(29) organizations. Did the organization are an excess benefit transaction with a disqualified person of uring the year? "If "Yes," complete Schedule L, Part I bid the organization aware that tengaged 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 E2? If "Yes," complete Schedule L, Part II Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, furstees, key employees, in the part of the following parties (see Schedule L, Part II) Did the organization prowde a grant or other assistance to an officer, director, furstee, key employee, substantial contribution or enployee 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 IV but the organization aparty to a business transaction with need the following parties (see Schedule L, Part IV A Tamily member of a current or former officer, director, furstee, or key employee? If "Yes," complete Schedule L, Part		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
Schedule / 24a Dit the organization have a fax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a bit the organization meant any proceeds of tax-exempt bonds beyond a temporary period exception? or bit the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? or bit the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defease any tax-exempt bonds? or bit the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defeated by the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defeated by the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defeated by the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defeated by the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defeated by the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defeated by the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defeated by the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defeated by the organization and act as an "on behalf of" issuer for bonds outstanding at any time during the year? defeated by the organization act as as an "on behalf of" issuer for bonds outstanding at any time during the year? defeated by the organization proved at the exemption of the organization or an excess benefit transaction with a disqualfied person in a proxy year, and that the transaction with a disqualfied person in a proxy year, and that the transaction with a d	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current)		
24a Dit 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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a bid the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
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Schedule K. II. No.1. go to line 25a Did the organization mivest any proceeds of tax exempt bonds beyond a temporary penod exception? Did the organization mivest any proceeds of tax exempt bonds beyond a temporary penod exception? Did the organization mivest any proceeds of tax exempt bonds beyond a temporary penod exception? Did the organization mivest any proceeds of tax exempt bonds beyond a temporary penod exception? Did the organization mivest any proceeds of tax exempt bonds outstanding at any time during the year? department of the organization and the second of the organization and the second of the organization of the organization with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction that the engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction that the engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction that the organization is pror Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part II Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, director, trustee, key employees, or disqualified persons? If "Yes," complete Schedule L, Part III Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributions for applicable fining thresholds; occidions, and exceptions). A current or former officer, director, frustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable fining thresholds; conditions, and exceptions.) A current or former officer, director, furstee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable fining thresholds; conditions, and exceptions? If "Yes," complete Schedule II, Part II is a family in the organization receive more than \$25,000 in non-cash contributions? If "Yes," c	24a		i i		
b Did the organization minest any proceeds of tax exempt bonds beyond a temporary peniod exception? Child the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax exempt bonds? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization with a disqualified person during the year? // "Yes," complete Schedule L, Part I 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 ryen Forms 990 or 950 E2? // "Yes," complete Schedule L, Part I 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? // "Yes," complete Schedule L, Part II Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A remitty of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A remitty of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A remitty of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A remitty of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A remitty of which a current or former officer, director, trustee, or key employee? If "		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization avaire that it engaged in an excess benefit transaction with a disqualified person unity transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization is prior forms 990 or 990-E27 if "Yes," complete Schedule L, Part II (1) and that the transaction report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer assistance to an officer, director, trustee, or disqualified persons? If "Yes," complete Schedule L, Part II (1) and the organization aparty 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 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 in the Organization receive more than 255 500 in non-ask northbutions? If "Yes," complete Schedule L, Part IV in instructions or interest. The part of the organization		•	24a		X
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If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, 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, Iine 2 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, Iine 2 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 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, Iines 11b and 19? Note. All Form 990 filers are required to complete Schedule O		contributions? If "Yes," complete Schedule M	30		х
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32	31	Did the organization liquidate, terminate, or dissolve and cease operations?			
Schedule N, Part II 32		If "Yes," complete Schedule N, Part I	31		X
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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, 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 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 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	32		ĺ		
sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35b If "Yes" to line 35a, 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 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 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 A X 38 Note. All Form 990 filers are required to complete Schedule O 38 X		·	_32_		X
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, 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 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 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	33	, , , , , , , , , , , , , , , , , , , ,			
Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, 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 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 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O			33		Х
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, 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 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 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 x	34				
b If "Yes" to line 35a, 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 2 356 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 Jud 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 Jud the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 X		·			
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 X			35a	_ X	
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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 x	D		256	v	
If "Yes," complete Schedule R, Part V, line 2 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 x	26		330_		
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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 x	30		36		
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 x	27	·	30		
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Note. All Form 990 filers are required to complete Schedule O	38		<u> </u>		
			38	x	
					(2017

Par				
	. Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 328	53		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	_0		İ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		l	l
0-	(gambling) winnings to prize winners?	1c	X_	-
	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		
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	58 2 b	x	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20_	 ^-	. —
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	x	ĺ
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	x	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	<u> </u>	 	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	ł	x
b	If "Yes," enter the name of the foreign country.			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a	L	х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	_5b	<u> </u>	х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886 T?	_5c	<u> </u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	ł		
	any contributions that were not tax deductible as charitable contributions?	_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). 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		1	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 7a 7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	75	 	
Ū	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	.7e	<u> </u>	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	_ 7f		
g	$If the \ organization \ received \ a \ contribution \ of \ qualified \ intellectual \ property, \ did \ the \ organization \ file \ Form \ 8899 \ as \ required?$	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C	7 7h	<u> </u>	_
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			ļ
	Did the sponsoring organization make any taxable distributions under section 4966?	9a	 	
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	_9b		
	Section 501(c)(7) organizations. Enter 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 10b	\dashv		ļ
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders		1	
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		1	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O		1	
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	_		
	Enter the amount of reserves on hand		├	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	<u> </u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	n 990	(2017)
		FULL	555	(2017)

FIRST ENTERTAINMENT CREDIT UNION Form 990 (2017) FKA CREDIT UNIONS IN THE STATE OF CA Page 6 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 or note to any line in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 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 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision 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 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 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? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a 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 operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 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 to conflicts? 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy? 14 15 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 х Other officers or key employees of the organization 15b X. 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 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 take steps to safeguard the organization's 16b 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 (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply x Another's website Lx_ Upon request Own website ___ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records 20 ADDIE ALLISON VP FINANCE - (323) 436-4219

732006 11-28-17

6735 FOREST LAWN DRIVE, SUITE 300 HOLLYWOOD, CA 90068

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

, Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line 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

(A) Name and Title	(B) Average			Pos				(D) Reportable	(E) Reportable	(F) Estimated	
	hours per	box	not c , unle	ss pe	rson	is bot	h an	compensation	compensation	amount of	
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key emptoyee	Highest compensated emptoyee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
(1) GARI ANN DOUGLAS	1.00	Ī		-			<u> </u>				
BOARD CHAIR		x				•		0.1	0.	0,	
(2) MICHAEL EDWARDS	1,00										
BOARD VICE-CHAIR		x							0.	0,	
(3) IRWIN JACOBSON	1,00										
TREASURER		х						0,	0,	0.	
(4) DENNIS TANGE	1.00										
SECRETARY		x						0,	0,	0.	
(5) ANDREW BENSON	1,00										
BOARD MEMBER		х				_	L	0.	0,	0,	
(6) LAURA VALAN	1.00			'							
BOARD MEMBER		х				<u> </u>		0,	0,	0,	
(7) STEPHEN RAYNES	1,00										
BOARD MEMBER		х	<u>L</u>			<u> </u>		0.	0,	0.	
(8) AKIHIKO WASHINGTON	1.00]	}		j	l	l		,		
BOARD MEMBER		х	ļ			<u></u>		0.	0.	0,	
(9) HOWARD WELINSKY	1,00		1				1				
BOARD MEMBER		x	<u> </u>		<u> </u>	_	_	0.	0.	0,	
(10) FRANK WASSON	40.00	ļ		ļ		1					
PRESIDENT/CEO				<u>x</u>		<u> </u>		393,595,	0,	46,670,	
(11) LISA LANDT	40,00]									
EVP/CFO/CXO		<u> </u>	<u> </u>	X			_	388,505,	0.	54,486,	
(12) JANET PHILLIPS	40.00	ļ	}	l	l		1				
CIO		<u> </u>		х	_	_	_	257,365,	0,	25,641,	
(13) MICHELLE FRATTOLIN	40,00	-	1								
VP OF HUMAN RESOURCES		<u> </u>	ļ	X_	<u> </u>	ļ.,	L	234,686,	0,	50,217,	
(14) JAMES MARCELLINO	40.00	<u> </u>							'		
VP OPERATIONS		<u> </u>	ļ_	x	<u> </u>	<u> </u>	_	223,348,	0.	46,528,	
(15) MICHAEL KIM (FORMER)	40,00	-									
VP LENDING		<u> </u>	<u> </u>	X	├-	├-	-	215,286.		19,089,	
(16) ADDIE ALLISON	40,00	1	ł	ł	ł	1	1			j	
VP FINANCE		-	 -	Х	<u> </u>	├	-	208,473,		44,829,	
(17) JASON THOMAS	40,00	4	1						_		
VP OF TREASURY			1	Х	<u> </u>	<u> </u>	L	201_038_	0.	38 071. Form 990 (2017)	

. (A)	(B)	<u> </u>	7003		C)	igne	31 ((D)	(E)	(F)
Name and title	Average	١		Pos	itior			Reportable	Reportable	Estimated
	hours per	box	c, unle	ss pe	erson	than is bo	th an	compensation	compensation	amount of
	week	\vdash	T -	nd a c	direct	or/trus	stee)	from	from related	other
	(list any hours for	recto				l		the	organizations	compensation
	related	0.0	ige	1		sated		organization	(W-2/1099-MISC)	from the
	organizations	ruste	l trus		8	mpen		(W-2/1099 MISC)		organization and related
	below	individual trustee or director	Institutional trustee	_	Key employee	Stcol				organizations
	line)	ng m	Instr	Office	Key e	Highest compensated employee	Former			
(18) RICHARD CADENA VP OF BRANCHES	40.00	}		x]		200 726	0	E4 800
(19) JIMMY LEE	40.00		╆	^-	 	\vdash	 	200,736,		54,809.
VP OF MARKETING/CMO	40.00	1		x			1	191,883.	0	18,669.
(20) KAREN WILLIS	40.00	┢	\vdash	^-	\vdash	+	 	191,663,		10,003.
DIRECTOR OF CONSUMER LENDING	40,00					x		150,309,	0	38,614,
(21) DAN KINNE	40.00		 	<u> </u>	-	┼		130,303.		30.014.
DIRECTOR OF BUSINESS INTELLIGENCE	40.00	1		ĺ	ĺ	x	ĺ	140,662,	0	28,564.
(22) KAARON L. WILLIAMS	40.00	\vdash	\vdash	-	十	╬	-	140,002,		20,304,
DIRECTOR OF REAL ESTATE	40.00	1				x		136,966,	0	17,753.
(23) JENNIFER JORDAN	40.00		\vdash		┢	<u> </u>	 "	130,300.		17,133.
DIRECTOR OF RISK MGT/LEGAL AFFAIRS	40.00	1		ļ		x		132,248,	0	35,097.
(24) NAS BIRMINGHAM	40.00	l	1-			<u> </u>		132,240,		33,037,
DIRECTOR OF DIGITAL EXPERI	40.00	1				x		129,666.	0	25,078,
ornation of profitting pin and	<u> </u>	ļ	1	1	T	†**				20,000
		1								
	<u> </u>		<u></u>	_	<u>L</u>	<u> </u>	Ļ	2 224 755		F.4. 445
1b Sub-total								3,204,766,	0	544,115.
c Total from continuation sheets to Part V	II, Section A							0,	<u>0</u> 0	0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but			. los		bou	ارد (د	ho .	3, 204, 766,		544,115.
2 Total number of individuals (including but compensation from the organization	iot iiriitea to ti	1056	: 11516	eu a	DOV	e) w	1101	eceived more man proo	,000 or reportable	26
Compensation from the organization										Yes No
3 Did the organization list any former officer	. director, or tri	ıste	e. ke	ev ei	olam	ovee	. or	highest compensated e	mplovee on	
line 1a? If "Yes," complete Schedule J for			-, -	, .	-	,	•	3	. ,	3 x
4 For any individual listed on line 1a, is the s			amo	ens	atıoı	n an	d ot	ther compensation from	the organization	
and related organizations greater than \$15			•					•	•	4 x
5 Did any person listed on line 1a receive or									dual for services	
rendered to the organization? If "Yes," cor	nplete Schedul	e J i	for s	uch	per	son	_			5 x
Section B. Independent Contractors										
1 Complete this table for your five highest co										sation from
the organization Report compensation for	the calendar y	ear	end	ing \	vith	or w	<u>/ithi</u>		/ear	
(A) Name and busines:	e address							(B) Description of s	enuces	(C) Compensation
								2000.19.10.10.10		
ALLIED UNIVERSAL SECURITY SERVICES								CECURITAL CERVICES		250 125
PO BOX 101034 PASADENA, CA 91189							_	SECURITY SERVICES		358,125,
PARTNERS IN LEADERSHIP, LLC PO BOX 776246, CHICAGO, IL 60677								TRAINING		227.482.
TURNER, WARREN, HWANG & CONRAD AC, 1	00							I KAINING	-	
NORTH FIRST STREET, SUITE 202, BURBA								CONSULTING	Ì	201,387,
THE STREET, SOITH BUE, DORDE										
2 Total number of independent contractors		ot li	mite	d to	the	se li	ste	d above) who received m	ore than	
\$100,000 of compensation from the organ	ization -					3				

Form **990** (2017)

				N THE STATE O	F CA		95-2513485	Page 9
Pa	rt VI	II Statement of Reve	nue					
		Check if Schedule O cont	tains a response	or note to any line	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo	nts, and nve 1f					
<u>ම් රි</u>	_	Total. Add lines 1a-1f		>				
Program Service Revenue	2 a	OTHER OPERATING INCOME FEE INCOME		Business Code 522100 522100 522100	32,057,326, 9,039,360, 6,242,423,	32,057,326, 9,001,930, 5,817,277,	37,430, 425,146,	
P. P	e	·						
۱ ۵	f	All other program service reve	enue	L				
	3	Total. Add lines 2a-2f Investment income (including other similar amounts)	dividends, inter	est, and	47,339,109, 12,325,806,	8,989,528,	3,336,278.	
	4 5	Income from investment of ta Royalties	x-exempt bond	proceeds (ii) Personal				
	6 a	Less rental expenses Rental income or (loss)	ly roas					
	7 a	Gross amount from sales of assets other than inventory Less cost or other basis	(i) Securities	(II) Other				
	c	and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraisin	ng events (not	D				
Other Revenue		including \$ contributions reported on line Part IV, line 18	of	,				
Oth	9 a	 Less direct expenses Net income or (loss) from fund Gross income from gaming ad Part IV, line 19 Less direct expenses 		>				
	10 a	 Net income or (loss) from gan Gross sales of inventory, less and allowances 	ning activities returns					
		Less cost of goods sold Net income or (loss) from sale	t es of inventory	· •				
		Miscellaneous Revenu	ie	Business Code 522100	226,498,	226,498.		
	t							
		All other revenue						
	42	Total revenue See instructions			226,498,	56 092 559	3 708 854	

2204___1

Form 990 (2017) FKA CREDIT UNIONS IN THE STATE OF CA
Part IX Statement of Functional Expenses

ection 501(c)(3) and 501(c)(4)	organizations r	nust complete a	Ill columns .	All other org	ganizations mu:	st complete columi	n (A)

Do i	Check if Schedule O contains a response	(A)	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	41,577.			
2	Grants and other assistance to domestic			ĺ	
	individuals. See Part IV, line 22			ļ	
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	·		 	
4 -	Benefits paid to or for members			 	
5	Compensation of current officers, directors,]	
	trustees, and key employees	3,204,766.		 	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			[
,	persons described in section 4958(c)(3)(B) Other salaries and wages	11 324 500		 	
7 8	Pension plan accruals and contributions (include	11,324,500.			
,	section 401(k) and 403(b) employer contributions)	1,229,321.			
9	Other employee benefits	1,229,321,		-	
)	Payroll taxes	1,061,521.			
1	Fees for services (non-employees)	1,001,321,		 · · - · · - · 	
' a	Management			[
ь	Legal	235,672,			
c	Accounting	38,000.			
d	· · · · · · · · · · · · · · · · ·	30,000,			
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		<u> </u>		
g	Other (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)	1,083,193,			
2	Advertising and promotion	1,580,684.			
3	Office expenses	6,492,074,			
4	Information technology	1,359,814.			
5	Royalties				
6	Occupancy	2,079,954.			
7	Travel	689,587.			
3	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
)	Interest	8,024,888,			
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	1,763,398,			
3	Insurance	320,721,		ļ	
4	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.)				
а	PROVISION FOR LOAN & LE	8,102,988,			
b	LOAN SERVICING EXPENSE	1,519,346.			
С	MISCELLANEOUS EXPENSES	1,161,515,			
d	ATM EXPENSES	399,750,		<u> </u>	
e	All other expenses	175,812.	<u> </u>		
<u> </u>	Total functional expenses Add lines 1 through 24e	53,524,004,			
3	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined			1	
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				Form 990 (2

Form **990** (2017)

FKA CREDIT UNIONS IN THE STATE OF CA Part X Balance Sheet

- Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year Cash - non-interest-bearing 1 6,004,982 6,234,129, 2 Savings and temporary cash investments 2 103 163 044 70,158,734, 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 3,775,000. 6 Loans and other 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 instr). Complete Part II of Sch L. 6 Assets Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 1,975,824 2,026,226. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 25,607,763. b Less accumulated depreciation 10b 16,281,369 10,468,557 10c 9 326 394. Investments - publicly traded securities 11 418,679,634 11 473 074 420. 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 791,929,759 859,454,002, 14 Intangible assets 14 15 Other assets See Part IV, line 11 27,995,751 15 31,581,925. 16 Total assets. Add lines 1 through 15 (must equal line 34) 1 360 217 551 16 1 455 630 830. 17 17 Accounts payable and accrued expenses 15,005,465 16,920,828. 18 Grants payable 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 25 Schedule D 1,228,444,242 1,318,508,548. 26 Total liabilities. Add lines 17 through 25 1 243 449 707. 1 335 429 376 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 28 Temporarily restricted net assets Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 0. 31 0. Retained earnings, endowment, accumulated income, or other funds 116 767 844 32 120,201,454, 33 33 Total net assets or fund balances 116,767,844 120,201,454, 34 Total liabilities and net assets/fund balances 1 360 217 551 1 455 630 830

Form 990 (2017)

FIRST ENTERTAINMENT CREDIT UNION

Form	990 (2017) FKA_CREDIT_UNIONS_IN_THE_STATE_OF_CA	95-2513485		Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	<u>59</u>	891	<u>413</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2	53	524	004,
3	Revenue less expenses Subtract line 2 from line 1	3	6	367	409,
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	116	767	844.
5	Net unrealized gains (losses) on investments	5	<u>-2</u>	779	477_
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		154	322,
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	120	201	454.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				x
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule C)	l		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis		Ì		
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both				
	Separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	·	2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched	dule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing				
	Act and OMB Circular A-133?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit			
-	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2017)

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

If the organization answered "Yes," on 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

If the organization answered "Yes," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Name of organization FIRST ENTE	RTAINMENT CREDIT UNION		E	mployer identification	number
FKA CREDIT	UNIONS IN THE STATE OF	CA		95-2513485	
Part I-A Complete if the org	ganization is exempt und	der section 501(c	or is a section 52	7 organization.	
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campa 	tures	cal campaign activities		\$	2,000.
Part I-B Complete if the org	ganization is exempt und	der section 501(c)(3).		
1 Enter the amount of any excise tax	incurred by the organization un-	der section 4955		\$	
2 Enter the amount of any excise tax	incurred by organization manag	jers under section 495		\$	
3 If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes	☐ No
4a Was a correction made?				Yes	☐ No
b If "Yes," describe in Part IV					
Part I-C Complete if the org	ganization is exempt und	der section 501(c	, except section 5	01(c)(3).	
1 Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities	\$	
2 Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for s	section 527		
exempt function activities)	> \$	2,000,
3 Total exempt function expenditures	s Add lines 1 and 2 Enter here a	and on Form 1120 POI			
line 17b)	▶ \$x Yes	2,000
4 Did the filing organization file Form	1120-POL for this year?			x Yes	L No
5 Enter the names, addresses and en made payments. For each organization contributions received that were propolitical action committee (PAC). If	ation listed, enter the amount pa comptly and directly delivered to	id from the filing organ a separate political or	ization's funds. Also ente ganization, such as a sep	er the amount of politic	al
(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization's funds If none, enter	s contributions rece	eived and irectly eparate zation
CALIFORNIA CREDIT UNION LEAGUE					
-PAC	SACRAMENTO CA 95814	94-0357265	2.0	00.	0,
	·				
			 		
	 	 		- 	
				,	
For Paperwork Reduction Act Notice,	cae the Instructions for Form	990 or 990-E7	Schodul	e C (Form 990 or 990-	EZ\ 2017
or raperwork neduction Act Hotice,	see the monuctions for Porm	330 01 330-EE.	Scriedui	C C (1 01111 990 01 990.	١١ تع رعب

LHA 732041 11-09-17 SEE PART IV FOR CONTINUATION

13

Schedule C (Form 990 or 990-EZ) 2017

f Grassroots lobbying expenditures

	On 1990 or 990-E	<u>-, -0 - F K A</u>	CKEDII	ONTONS I	N THE	STATE OF	
ochedule C IF	JIIII 990 OF 990-E	4)/UI/ BEX	COPDIM I	T DISCUTISES	N	CONTRACT OF	~ 2

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)).

For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b)
of th	e 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				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
9		<u> </u>			
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
1	Other activities?	 	-		
j	Total Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				—
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? † III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	ion 501(c)	(5), or se	ction	
	501(c)(6).		(0), 0: 00		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3_		the prior year	r? 3		
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				e 3, 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 expenditures)	tical			
	expenses for which the section 527(f) tax was paid).				
а	•		2a		
b	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
_	expenditure next year?		4		
5 Pai	Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information		5		
	ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated ground	up list), Part II	I-A, lines 1 a	and 2 (see	
nstr	uctions), and Part II-B, line 1. Also, complete this part for any additional information				
PART	I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFORMATION:		<u></u>		
CAL	FORNIA CREDIT UNION LEAGUE -PAC				
1 2 0 1	K STREET, #1050 SACRAMENTO, CA_95814				
1 Z U .	L A SINBEL, "IVOV SACRAMENIO, CA 33014		·		
				_ 	<u>-</u>

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete If the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Inspection

Name of the organization

FIRST ENTERTAINMENT CREDIT UNION

Employer identification number

	FKA CREDIT UNIONS IN THE STATE OF CA		95-2513485
Pa	rt I Organizations Maintaining Donor Advised Funds of	r Other Similar Funds or	r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6		
	(a) Do	onor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that the	e assets held in donor advised	funds
	are the organization's property, subject to the organization's exclusive leg		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in wri		
•	for charitable purposes and not for the benefit of the donor or donor advis	• •	•
	impermissible private benefit?	or, or lor any onto parpose our	Yes No
Pai		wered "Yes" on Form 990. Part	
1	Purpose(s) of conservation easements held by the organization (check all		
•	Preservation of land for public use (e.g., recreation or education)	Preservation of a historic	ally important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space	Treservation of a certified	Thistoric structure
2		tion contribution in the form of s	a consequetion occeptant on the last
2	Complete lines 2a through 2d if the organization held a qualified conserva	ion contribution in the form of a	Held at the End of the Tax Year
	day of the tax year		-
a	Total number of conservation easements		2a
þ	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure include	• •	2c
d	Number of conservation easements included in (c) acquired after 7/25/06,	and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, exting	uished, or terminated by the org	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation easement is loc		
5	Does the organization have a written policy regarding the periodic monitor	ing, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?		└─ Yes └─ No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of v	olations, and enforcing conserv	vation easements during the year
	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, handling of violation	ons, and enforcing conservation	n easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above satisfy the	requirements of section 170(h)(4	4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation easement	s in its revenue and expense sta	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial	I statements that describes the	organization's accounting for
	conservation easements		
Pa	t III Organizations Maintaining Collections of Art, Histo	orical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV,	line 8	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to	o report in its revenue statemen	t and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, educ	ation, or research in furtherance	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these ite	ns	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to re-	oort in its revenue statement an	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or re	esearch in furtherance of public	service, provide the following amounts
	relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical treasures, or other	er similar assets for financial oa	
~	the following amounts required to be reported under SFAS 116 (ASC 958)		···· , p ·· = 11 7 7
_	Revenue included on Form 990, Part VIII, line 1	reading to those norms	> \$
			\$
	Assets included in Form 990, Part X	n	Schedule D (Form 990) 2017
	For Paperwork Reduction Act Notice, see the Instructions for Form 99	·U.	Juliedale D (FUI 11 390) 20 17

Schedule D (Form 990) 2017

2,044,277,

<u>2,252,565.</u>

9 326 394.

4,807,564

6 125 343

c Leasehold improvements

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

d Equipment

Other

6,851,841

8 377 908

•			
FIRST ENTERTAINM	ENT CREDIT UNION		
Schedule D (Form 990) 2017 FKA CREDIT UNIONS	S IN THE STATE OF CA		Page :
Part VII Investments - Other Securities.			
. Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b See Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	ue
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
_ (A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c See Form 990, Part X, line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value	ue
(1) LOANS AND LEASES	838,069,415.	END-OF-YEAR MARKET VALUE	
(2) NCUA SHARE INSURANCE CAPITALIZATION			
(3) DEPOSIT	11,698,587,	END-OF-YEAR MARKET VALUE	
(4) ALL OTHER INVESTMENTS	8,694,000,	END-OF-YEAR MARKET VALUE	
(5) LOANS TO AND INVESTMENTS IN NATURAL			
(6) PERSON CU	992,000,	END-OF-YEAR MARKET VALUE	
(7)			
(8)			
(9)			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	859 454 002		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15)	<u> </u>

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

1	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	MEMBER DEPOSITS	1,318,508,548,
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col (B) line 25)	1,318,508,548,

^{2.} Liability for uncertain tax positions. In Part XIII, 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) Check here if the text of the footnote has been provided in Part XIII x

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

732054 10-09-17

MANAGEMENT HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX

POSITIONS, FOR THE YEAR ENDED SEPTEMBER 30, 2017 THE CREDIT UNION HAS NO

FIRST ENTERTAINMENT CREDIT UNION Schedule D (Form 990) 2017 FKA CREDIT UNIONS IN THE STATE OF CA Page 5 95-2513485 Part XIII Supplemental Information (continued) UNCERTAIN TAX POSITIONS AND ACCORDINGLY HAS NOT RECORDED A LIABILITY FOR THE PAYMENT OF INTEREST OR PENALTIES, STATE TAXES, IF APPLICABLE, ARE PAID ON INCOME EARNED BY THE CREDIT UNION IN CALIFORNIA, THE CREDIT UNION IS SUBJECT TO AND PAYS ALL STATE AND CITY TAXES ON GOODS AND SERVICES PURCHASED BY THE CREDIT UNION.

Schedule D (Form 990) 2017

SCHEDULE (Form 990)

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" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No 1545-0047	2017	Open to Public	Inspection

%

Employer identification number 95-2513485 X Yes 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 ► Go to www.irs.gov/Form990 for the latest information. FKA CREDIT UNIONS IN THE STATE OF CA FIRST ENTERTAINMENT CREDIT UNION General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Part

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monif	toring the use of grant	funds in the United	States			
≒	Domestic Organi	zations and Domestic	Governments. Co	omplete if the orga	nization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	5,000 Part II can	be duplicated if additi	onal space is need	pa	y - F - 117 - 147 - 147		
1 (a) Name and address of organization	(p) EIN	(c) IRC section	(d) Amount of	ď	(f) Method of valuation (book.	(g) Description of	(h) Purpose of grant
or government		(if applicable)	cash grant	non-cash assistance	FMV, appraisal, other)	noncash assistance	or assistance
						<u></u>	
CHILDREN'S MIRACLE NETWORK							TO PROVIDE THE BEST CARE
HOSPITAL - 2855 E GUASTI ROAD -			**				FOR KIDS IN CHILDREN'S
ONTABLO CA 91761	87-0387205	501(C)(3)	17,400,	0			HOSPITALS
				-			TO PROVIDE DISASTER
NOTIFICATION DONATION FOR CA							RELIEF FOR CREDIT UNION
WILDETRES - 5710 MINERAL POINT							PEOPLE AFFECTED BY
DOAD - WADISON WI 53705	39-1383650	501(C)(3)	10 000	0.			WILDIRES IN NORTHERN
- HADLISON							TO PROVIDE COMFORT, CARE
HOUSE A DON'T DON'T HOUSE	_						AND SUPPORT TO CHILDREN
TO COMMUNICATIONS AVENUE							AND FAMILIES IN SOUTHERN
DACADENA CA 91105	95-3167869	501(C)(3)	5,000	0.			CALIFORNIA
1							
	-						
5 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government o	rganizations listed in the	ne line 1 table				3,
	s listed in the line	1 table					0
3 Enter total number of other organization	2 13000 111 0000	2000					

Schedule I (Form 990) (2017)

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

FIRST ENTERTAINMENT CREDIT UNION

Schedule I (Form 990) (2017)

Part III

Page 2

95-2513485

FKA CREDIT UNIONS IN THE STATE OF CA

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed (d) Amount of non-cash assistance (c) Amount of cash grant NAME OF ORGANIZATION OR GOVERNMENT: NCUF-CUAID DONATION FOR CA WILDFIRES (H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE DISASTER RELIEF FOR CREDIT UNION PEOPLE AFFECTED BY WILDIRES IN NORTHERN CALIFORNIA (b) Number of recipients (a) Type of grant or assistance PART II, LINE 1, COLUMN (H):

Schedule I (Form 990) (2017)

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information

OMB No 1545-0047

Inspection

Name of the organization FIRST ENTERTAINMENT CREDIT UNION FKA CREDIT UNIONS IN THE STATE OF CA Employer identification number

95-2513485

Part 1 **Questions Regarding Compensation** Yes_ No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as, maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for mothods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III x Written employment contract Compensation committee x Compensation survey or study x Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 4c X If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5b Any related organization? If "Yes" on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of 6a The organization? Any related organization? If "Yes" on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments 7 not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958 4(a)(3)? If "Yes," describe in Part III R If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

Schedule J (Form 990) 2017

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

FIRST ENTERTAINMENT CREDIT UNION

FKA CREDIT UNIONS IN THE STATE OF CA

Schedule J (Form 990) 2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of W.2	W-2 and/or 1099-MIS	and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		io ilinopino (a)			other deferred	benefits	(D-(I)(B)	in column (B)
(A) Name and Title		(ı) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	}		reported as deferred on prior Form 990
(1) FRANK WASSON	ε	338 493.	40 000.	15,102.	8,100.	38,570.	440,265.	0.
SIDENT/CEO	3			0	0	0.	0	0
DT	Ξ	316,323.	60,102.	12,080.	27,283.	27,203.	442,991.	0.
/cro/cxo	€	0	0	0,	0	0	0	0.
PHILLIPS	Ξ	213,824.	40,068.	3,473.	23,841,	1,800.	283,006.	0.
	(E)		0	0.	0	0	0	0.
(4) MICHELLE FRATTOLIN	Θ	190,247.	38,231.	6,208,	23,142.	27,075.	284,903.	0.
OF HUMAN RESOURCES	€	0	0	0	0.	0	0.	0
(5) JAMES MARCELLINO	Ξ	188,187,	18,734.	16,427.	23,576.	22,952.	269,876.	0.
OPERATIONS	€	0	0.	0	0	0	0.	0
(6) MICHAEL KIM (FORMER)	Ξ	142,006.	18,918,	54,362.	4,947.	14,142.	234,375.	0.
ä	€	0	0.	0	0	0	0	0
(7) ADDIE ALLISON	(i)	168,474.	33,922.	6 077.	17,979.	26,850,	253,302.	0.
VP FINANCE	(ii)	0	0	0	0	0	0	0
(8) JASON THOMAS	(0)	169,546.	29,578.	1,914,	17,821.	20,250.	239,109.	0
Ö	(ii)	0	0	0	0.	0	0.	0.
(9) RICHARD CADENA	(1)	165,393.	23,296.	12,047,	19,542.	35,267.	255,545.	0.
VP OF BRANCHES	Ξ	0	0.	0.	0.	0.	0	0
(10) JIMMY LEE	Θ	167,834.	15,000.	9,049,	4,934.	13,735.	210,552.	0.
VP OF MARKETING/CMO	(ii)	0	0.	0.	0.	0	0	0.
(11) KAREN WILLIS	Ξ	125,638.	3,490.	21,181.	12,242.	26,372.	188,923.	0
DIRECTOR OF CONSUMER LENDING	(ii)	0	0.	0.	0	0,	0	0.
(12) DAN KINNE	Ξ	123,945.	4,800,	11,917.	11,939.	16,625.	169,226.	0
DIRECTOR OF BUSINESS INTELLIGENCE	Ξ	0.	0.	0	0.	0.	0.	0.
(13) KAARON L. WILLIAMS	Θ	126 004.	3,400.	7,562.	906.6	7,847,	154,719.	0.
DIRECTOR OF REAL ESTATE	Ξ	0.	0	0.	0.	0.	0	0
(14) JENNIFER JORDAN	Ξ	125,930.	4,800.	1,518,	10,581,	24,516,	167,345.	0.
DIRECTOR OF RISK MGT/LEGAL AFFAIRS	⊜	0	0.	0,	0	0	0.	0.
(15) NAS BIRMINGHAM	ε	120,118.	5,325.	4,223,	11,062.	14,016,	154,744.	0
DIRECTOR OF DIGITAL EXPERI	Ξ	0.	0.	0	0.	0	0.	0
-	Ξ							
	ᆗ							

Schedule J (Form 990) 2017

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information FKA CREDIT UNIONS IN THE STATE OF CA FIRST ENTERTAINMENT CREDIT UNION Part III | Supplemental Information Schedule J (Form 990) 2017

FROM THE POLICY TO SUPPLEMENT RETIREMENT INCOME, THE CREDIT UNION IS REPAID THE CREDIT UNION OFFERS A NONQUALIFIED RETIREMENT, 457(F) PLAN. THE PLAN IS UNFUNDED, THEREFORE BENEFITS ARE PAID FROM THE GENERAL ASSETS OF THE CREDIT LIFE INSURANCE POLICY PREMIUMS, THE EXECUTIVE ASSIGNS THE INSURANCE POLICY DURING THE YEAR ENDED SEPTEMBER 30, 2017, THE CREDIT UNION ENTERED INTO A ARRANGEMENT, THE CREDIT UNION MAKES A LOAN TO THE EXECUTIVE EQUAL TO THE CREDIT UNION ADVANCED \$3,775,000 TO THE EXECUTIVE IN ORDER TO COVER THE TO THE CREDIT UNION AS COLLATERAL FOR REPAYING THE PREMIUMS AND BORROWS ADVANCE, ANY PRINCIPAL OR INTEREST NOT REPAID UNDER THE ARRANGEMENTS IS TAXABLE TO THE EXECUTIVE, DURING THE YEAR ENDED SEPTEMBER 30, 2017, THE ACCRUES ON THE LOANS AT THE APPLICABLE FEDERAL RATE AT THE TIME OF THE RICHARD CADENA, AND JANET PHILLIPS WERE PARTICIPANTS AS OF DECEMBER 31 UNION, MICHELLE FRATTOLIN, MICHAEL KIM, LISA LANDT, JAMES MARCELLINO FROM THE POLICY'S DEATH PROCEEDS UNLESS EARLIER TERMINATED, INTEREST PREMIUMS, THE TOTAL FUNDING INCLUDED ONE YEAR OF PREMIUMS AND SIX SPLIT-DOLLAR AGREEMENT WITH A CREDIT UNION EXECUTIVE, UNDER THE PART I LINE 4B: 2017.

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Schedule J (Form 990) 2017

Schedule J (Form 990) 2017 Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information BEST COMPANY AN INSURANCE INDUSTRY RATING AGENCY, THE CREDIT UNION RECORDS SEVERANCE PAYMENT OF \$52,659 WAS MADE TO ONE OF THE OFFICERS, ADDITIONAL A LOAN RECEIVABLE AT THE LESSER OF THE CASH SURRENDER VALUE OF THE POLICY OR THE LOAN AMOUNT PLUS ACCRUED INTEREST, AS OF SEPTEMBER 30, 2017, THE MINNESOTA LIFE INSURANCE COMPANY, CURRENTLY RATED A+ (SUPERIOR) BY A.M. ADDITIONAL PREMIUM COMMITMENTS HELD IN A PREMIUM DEPOSIT ACCOUNT AT FKA CREDIT UNIONS IN THE STATE OF CA BALANCE OF THE LOAN TO THE EXECUTIVE UNDER THIS ARRANGEMENT, WAS INFORMATION IS AVAILABLE UPON REQUEST. Part III | Supplemental Information APPROXIMATELY \$3,775,000. Schedule J (Form 990) 2017

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-FZ, Part V, line 38a or 40b.

OMB No 1545-0047

2017

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ. Open To Public Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service Name of the organization Employer identification number FIRST ENTERTAINMENT CREDIT UNION CREDIT UNIONS IN THE STATE OF CA 95-2513485 Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (h) Approved (a) Name of (c) Purpose (d) Loan to or (e) Original (g) In (i) Written (b) Relationship (f) Balance due by board or committee? from the default? agreement? interested person with organization of loan principal amount organization? Y<u>es</u> Yes_ To From Yes No No No FRANK WASSON OFFICER FUND PUR Х 3,775,000 3,775,000 X .775,000 Total Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (c) Amount of (e) Purpose of (a) Name of interested person (b) Relationship between (d) Type of assistance assistance assistance interested person and the organization

Schedule L (Form 990 or 990-E2) 2017

SEE PART V FOR CONTINUATIONS

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

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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.

OMB No 1545-0047

Internal Revenue Service ► Go to www.irs.gov/Form990 for the latest information. Inspection Name of the organization FIRST ENTERTAINMENT CREDIT UNION Employer identification number FKA CREDIT UNIONS IN THE STATE OF CA 95-2513485 FORM 990 ITEM K OTHER FORM OF ORGANIZATION: CREDIT UNION FORM 990 PART III LINE 1 DESCRIPTION OF ORGANIZATION MISSION. FIRST ENTERTAINMENT CREDIT UNION IS A COOPERATIVE, ORGANIZED FOR THE PURPOSE OF PROMOTING THRIFT AND SAVINGS AMONG ITS MEMBERS, CREATING A SOURCE OF CREDIT FOR THEM AT RATES OF INTEREST SET BY THE BOARD OF DIRECTORS, AND PROVIDING AN OPPORTUNITY FOR THEM TO USE AND CONTROL THEIR OWN MONEY ON A DEMOCRATIC BASIS IN ORDER TO IMPROVE THEIR ECONOMIC AND SOCIAL CONDITIONS. AS A COOPERATIVE FIRST ENTERTAINMENT CREDIT UNION CONDUCTS ITS BUSINESS FOR THE MUTUAL BENEFIT AND GENERAL WELFARE OF ITS MEMBERS WITH THE EARNINGS, SAVINGS, BENEFITS, OR SERVICES OF THE CREDIT UNION BEING DISTRIBUTED TO ITS MEMBERS AS PATRONS. FORM 990, PART VI. SECTION A. LINE 6: FIRST ENTERTAINMENT CREDIT UNION IS A COOPERATIVE FINANCIAL INSTITUTION THAT IS OWNED AND CONTROLLED BY ITS MEMBERS. AND OPERATED FOR THE PURPOSE OF PROMOTING THRIFT AND SAVINGS TO ITS MEMBERS, FIRST ENTERTAINMENT CREDIT UNION DOES NOT HAVE STOCKHOLDERS FORM 990 PART VI SECTION A. LINE 7A: THE GOVERNING BOARD OF FIRST ENTERTAINMENT CREDIT UNION IS COMPRISED OF VOLUNTEER MEMBERS WHO ARE DIRECTLY ELECTED BY ITS MEMBERS. EACH MEMBER OF

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

THE GOVERNING BOARD SERVES FOR A PERIOD AS PRESCRIBED BY ITS BY-LAWS,

Schedule O (Form 990 or 990-EZ) (2017)

Schedule O (Form 990 or 9	90-EZ) (2017)	Page 2
Name of the organization	FIRST ENTERTAINMENT CREDIT UNION	Employer identification number
	FKA CREDIT UNIONS IN THE STATE OF CA	95-2513485
DODY OOD DARM WE O	CONTANT A LITTLE OF	
FORM 990, PART VI, S	ECTION A, LINE /B:	
AT THE END OF EACH T	ERM OF THE BOARD MEMBERS, ELECTIONS ARE HELD AND BOARD	
MEMBERS ARE VOTED BY	THE MEMBERS OF THE CREDIT UNION PURSUANT TO ITS	
DV LANG MEMBER HOW	76 AND AV 60 DOCUMENT TO DATE OF A POST OF A P	
BY-LAWS, MEMBER VOT	ES ARE ALSO REQUIRED TO RATIFY DECISIONS DEALING WITH	
REORGANIZATIONS AS I	N THE CASE OF MERGER OR DISSOLUTION,	
FORM 990 PART VI S	PORTON D. LIND 11D.	
FORM 950, FART VI, SI	ECTION B. BINE 11B:	
THE 990 IS PRESENTED	TO THE DOARD DURING ONE OF ITS BOARD MEETINGS, THE	
APPROVAL FOR FILING	IS THEN DOCUMENTED IN THE BOARD MINUTES.	
FORM 990 PART VI ST	ECTION B, LINE 12C;	
EMPLOYEES BOARD AND	VOLUNTEERS ARE REQUIRED TO REPORT KNOWN CONFLICTS OF	
INTEREST, EMPLOYEES	SIGN THE CONFLICT OF INTEREST POLICY AT THE TIME OF	
HIRE AND ANNUALLY AT	THE BEGINNING OF EACH YEAR.	
FORM 990 PART VI S	ECTION B LINE 15:	
THE BOARD CONDUCTS A	N EXECUTIVE COMMITTEE SESSION TO DETERMINE SALARY OF	
THE PRESIDENT/CEO. F	IRST ENTERTAINMENT CREDIT UNION ALSO HAS A COMPENSATION	
SYSTEM THAT COMPARES	SALARIES BASED ON OTHER CREDIT UNIONS, THEIR ASSET	
4117 N. 4744111114	A CALENDAY - DATE OF THE PROPERTY OF THE ABOVE OF THE ABO	
SIZE AND GEOGRAPHIC	LOCATION, FIRST ENTERTAINMENT CREDIT UNION USES RANGES	
FOR ALL OF THEIR POS	ITIONS, EACH POSITION IS THEN CAREFULLY REVIEWED.	
דרים אמר מון פורי	TION B LINE 15B: THE CEO EVALUATES EACH SENIOR	
PORT 330 PART VI SEC.	TION B BINE TIB: THE CEO EVADORIES BACK SERIOR	
EXECUTIVE POSITION IN	N ACCORDANCE WITH FIRST ENTERTAINMENT CREDIT UNION'S	
COMPENSATION GUIDELI	NES, THE COMPENSATION SYSTEM AND BASED ON THEIR OVERALL	
PERFORMANCE AS ASSESS	SED DURING THE FORMAL EVALUATION PROCESS WHICH IS	
viganios no noblo	AND A STORE DESIGNATION AND THE STORE DESIGNATION OF THE STORE DESIGNAT	
CONDUCTED ANNUALLY,		
		

<u>Schedule O (Form 990 or 990-EZ) (2017)</u>		Page 2
Name of the organization FIRST ENTERTAINMENT CREDIT UNION		Employer identification number
FKA CREDIT UNIONS IN THE STATE OF CA		95-2513485
BODY COO DIDE UT CECTOV C TIVE 10		
FORM 990, PART VI, SECTION C, LINE 19:		
FIRST ENTERTAINMENT CREDIT UNION MAKES ITS GOVERNING DOCUMENTS	FINANCIAL_	
STATEMENTS, AND CONFLICT OF INTEREST POLICY AVAILABLE TO ITS MEM	BERS UPON	
REQUEST.		
		
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:		
TORM 990, FART AT, BINE 9, CHANGES IN NET ASSETS:		
ADJUSTMENT TO UNDIVIDED EARNINGS	-154,322,	
		
FORM 990, PART XII, LINE 2C:		
THE ORGANIZATION HAS NOT CHANGED EITHER ITS OVERSIGHT PROCESS OR	·	
SELECTION PROCESS DURING THE TAX YEAR.		
SEEDELEN TROCEDO BORTRO TRE TERM		
		
	_ 	
		
		
		
		T. 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Partl

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number 95-2513485

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 FKA CREDIT UNIONS IN THE STATE OF CA FIRST ENTERTAINMENT CREDIT UNION Name of the organization

(g) Section 512(bX13) controlled Direct controlling entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. End-of-year assets <u>@</u> Total income ਉ Legal domicile (state or foreign country) Primary activity <u>@</u> Name, address, and EIN (if applicable) of disregarded entity Part II

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

732181 09-11-17 LHA

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Schedule R (Form 990) 2017

٥

Yes

entity?

Direct controlling

status (if section Public charity

Exempt Code

Legal domicile (state or

Primary activity

Name, address, and EIN of related organization

foreign country)

section

501(c)(3))

FIRST ENTERTAINMENT CREDIT UNION

Page 2

95-2513485

FKA CREDIT UNIONS IN THE STATE OF CA Schedule R (Form 990) 2017

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year Part III

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	Predomin (related, excluded fr	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income		(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Seneral or Ox managing Uile partner 65) Yes No	(i) (k) . General or Percentage managing ownership partner?
									<u> </u>			
								· · · · · ·				
Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year	Janizations Taxable a	as a Corport of the tax	oration or Trust. Co	omplete if th	he organizatio	n answerec	"Yes" on For	rm 990, Parl	t IV, line 3	4, because it h	ad one or	more related
(a) Name, address, and EIN of related organization	Z	Prim	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity		(e) Type of entity (C corp. S corp, or trust)	(f) Share of total Income		(g) Share of end-of-year assets	(h) Percentage ownership	Section Section Controlled entity? Yes No
MEDIA BENEFITS CORP 95-3974685 6735 FOREST LAWN DR. SUITE 300 HOLLYWOOD CA 90068		SALES		CA	FIRST ENT.	CU C CORP)RP	563	563,480.	94,595,	100.00\$	× ×
1												
732162 09-11-17				33						Sche	dule R (Fo	Schedule R (Form 990) 2017

Page 3

95-2513485

FKA CREDIT UNIONS IN THE STATE OF CA Schedule R (Form 990) 2017 Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	-, %
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	is with one or more re	lated organizations listed	ın Parts II-IV?		1	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	>			1 a		×
b Gift, grant, or capital contribution to related organization(s)				1		×
c Giff, grant, or capital contribution from related organization(s)				10		×
d Loans or loan guarantees to or for related organization(s)				10	×	
e Loans or loan guarantees by related organization(s)				1		×
f Dividends from related organization(s)				*		>
					╁	:
				6 ;	\dagger	× :
h Purchase of assets from related organization(s)				٤,	\dagger	× :
i Exchange of assets with related organization(s)				=	+	×
j Lease of facilities, equipment, or other assets to related organization(s)				;	+-	×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
1 Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			티	-	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uor			1n		×
 Sharing of paid employees with related organization(s) 				10		×
p Reimbursement paid to related organization(s) for expenses				đ		×
q Reimbursement paid by related organization(s) for expenses				19	+	×
 Other transfer of cash or property to related organization(s) 				÷	+	×
s Other transfer of cash or property from related organization(s)				1\$	7	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	is line, including covered	relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved		
(1) MEDIA BENEFITS CORPORATION	Ω	400,000	400 000 AMOUNT OF APPROVED CREDIT LINE			
(2) MEDIA BENEFITS CORPORATION	D	75,575.	BALANCE DRAWN FROM CREDIT LINE			
(3)						
(4)						
(5)						
•						
(9)						
732163 09-11-17	34		Schedule R (Form 990) 2017	R (Form	990)2	017

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37 FKA CREDIT UNIONS IN THE STATE OF CA Schedule R (Form 990) 2017

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

that was not a related organization, see instructions regarding exclusion for certain investment partnerships	structions regarding exclus	sion for certain inv	estment partnerships	13	9		3	3	;	,
(a) Name, address, and EIN	(b) Primary activity	(c) Legal domicile	Predominant income part	Are all Are all partners sec 501(c)(3)	Share of	(g) Share of	Orspropor- tonate	(1) Code V-UBI	General o	(K) rPercentage
Of entity		(state or foreign country)	excluded from fax under sections 512-514)	Yes No	rotal	end-or-year assets	Yes No	of Schedule K-1 (Form 1065)	Yes No	ownership
										
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