

Form **990**
Department of the Treasury
Internal Revenue Service

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
Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2016
Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 01-01-2016, and ending 12-31-2016

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Final
 Return/terminated
 Amended return
 Application pending

C Name of organization
SCHOOLS FINANCIAL CREDIT UNION

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
1485 RESPONSE ROAD NO 126

City or town, state or province, country, and ZIP or foreign postal code
SACRAMENTO, CA 95815

D Employer identification number
94-1189841

E Telephone number
(916) 569-5400

G Gross receipts \$ 133,637,540

F Name and address of principal officer
TIMOTHY MARRIOTT
1485 RESPONSE ROAD NO 126
SACRAMENTO, CA 95815

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status 501(c)(3) 501(c) (14) ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ WWW.SCHOOLS.ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1933

M State of legal domicile CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO PROVIDE MEMBERS WITH BETTER VALUE AND OUTSTANDING SERVICE

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	7
4 Number of independent voting members of the governing body (Part VI, line 1b)	7
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	361
6 Total number of volunteers (estimate if necessary)	22
7a Total unrelated business revenue from Part VIII, column (C), line 12	398,752
7b Net unrelated business taxable income from Form 990-T, line 34	-367,773

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	0	0
9 Program service revenue (Part VIII, line 2g)	47,325,794	54,373,789
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	11,856,484	12,172,385
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	498,746	438,149
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	59,681,024	66,984,323
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	24,161	28,925
14 Benefits paid to or for members (Part IX, column (A), line 4)	3,277,610	3,737,339
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	22,312,555	23,764,187
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	20,758,121	23,470,229
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	46,372,447	51,000,680
19 Revenue less expenses Subtract line 18 from line 12	13,308,577	15,983,643

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	1,614,809,830	1,783,183,316
21 Total liabilities (Part X, line 26)	1,444,720,374	1,600,037,027
22 Net assets or fund balances Subtract line 21 from line 20	170,089,456	183,146,289

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer
Date 2017-11-01
TIMOTHY MARRIOTT PRESIDENT/CEO
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: GERALD B KISSELL
Preparer's signature: GERALD B KISSELL
Date: 2017-11-01
Check if self-employed
PTIN: P00092658
Firm's name: RSM US LLP
Firm's EIN: 42-0714325
Firm's address: 801 NICOLLET MALL SUITE 1100
Phone no: (612) 332-4300
MINNEAPOLIS, MN 55402

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III **1** Briefly describe the organization's mission

TO PROMOTE THRIFT AND SAVING AMONG MEMBERS, TO CREATE A SOURCE OF CREDIT FOR MEMBERS AT INTEREST RATES SET BY THE BOARD OF DIRECTORS, AND TO PROVIDE MEMBERS WITH AN OPPORTUNITY TO USE AND CONTROL THEIR MONEY ON A DEMOCRATIC BASIS IN ORDER TO IMPROVE THEIR ECONOMIC AND SOCIAL CONDITIONS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
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? <i>If "Yes," complete Schedule C, Part II</i>		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		No
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? <i>If "Yes," complete Schedule D, Part I</i>		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		No
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? <i>If "Yes," complete Schedule D, Part IV</i>	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		No
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	Yes	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	Yes	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		
26 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, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	Yes	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		No
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with columns for question ID, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited tax shelter transactions, deductible contributions, and 501(c)(7), (12), and (29) organizations.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 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?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following; 8a The governing body?; 8b Each committee with authority to act on behalf of the governing body?; 9 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.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b 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 exempt status with respect to such arrangements?

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply; 19 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; 20 State the name, address, and telephone number of the person who possesses the organization's books and records.

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, or 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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARIE B SMITH CHAIR	1 00	X		X				0	0	0
(2) EUGENE J HOUGHTON JR VICE CHAIR	1 00	X		X				0	0	0
(3) THERESA MATISTA TREASURER	1 00	X		X				0	0	0
(4) DOLORES BLEEKMAN SECRETARY	1 00	X		X				0	0	0
(5) LUTHER NOLEN DIRECTOR	1 00	X						0	0	0
(6) DOUGLAS SATO DIRECTOR	1 00	X						0	0	0
(7) EMILIO MARTINEZ DIRECTOR	1 00	X						0	0	0
(8) JAMES P JORDAN III PRESIDENT/CEO (RETIRED JAN 2016)	40 00			X				76,884	0	4,557
(9) TIMOTHY MARRIOTT PRESIDENT/CEO	40 00			X				516,412	0	1,012,559
(10) TODD DEVOOGD SVP FINANCE/CFO	40 00			X				222,721	0	21,476
(11) ERIC LINDSTROM SVP INFORMATION SERVICES/CIO	40 00				X			230,452	0	56,314
(12) STEVE LANGLEY SVP MEMBER SERVICES/CHIEF RETAIL OFFICER	40 00				X			213,809	0	33,872
(13) LINDSAY SHORES LOAN COUNSELOR	40 00					X		279,084	0	38,424
(14) MELINDA BROWNING LOAN COUNSELOR	40 00					X		270,501	0	34,228
(15) TOM KUANG VP TECHNOLOGY/CTO	40 00					X		186,325	0	19,708
(16) LISA MACKAY VP HUMAN RESOURCES AND COMPLIANCE	40 00					X		183,094	0	20,357
(17) ROCHELLE SMITH VP LOSS PREVENTION & SECURITY	40 00					X		177,517	0	19,062

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line 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	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f \$ _____					
	h Total. Add lines 1a-1f					
Program Service Revenue		Business Code				
	2a LOAN INTEREST INCOME	522100	35,643,639	35,643,639		
	b FEE & SERVICE CHARGE INCOME	522100	15,094,657	14,994,253	100,404	
	c OTHER INCOME	522100	3,635,493	3,337,145	298,348	
	d _____					
	e _____					
	f All other program service revenue					
g Total. Add lines 2a-2f		54,373,789				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		11,177,861		11,177,861	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real				
		(ii) Personal				
			1,161,911			
		b Less rental expenses		723,762		
	c Rental income or (loss)		438,149			
	d Net rental income or (loss)		438,149		438,149	
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
			66,923,979			
		b Less cost or other basis and sales expenses		65,891,829	37,626	
	c Gain or (loss)		1,032,150	-37,626		
	d Net gain or (loss)		994,524		994,524	
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
b Less direct expenses	b					
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code					
11a _____						
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See Instructions		66,984,323	53,975,037	398,752	12,610,534	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	6,160			
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	22,765			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.	3,737,339			
5 Compensation of current officers, directors, trustees, and key employees.	2,391,638			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	16,644,152			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	958,320			
9 Other employee benefits.	2,381,639			
10 Payroll taxes.	1,388,438			
11 Fees for services (non-employees)				
a Management.				
b Legal.	447,691			
c Accounting.	21,177			
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	164,833			
12 Advertising and promotion.	769,892			
13 Office expenses.	1,715,471			
14 Information technology.	3,147,201			
15 Royalties.				
16 Occupancy.	2,192,702			
17 Travel.	67,855			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	293,413			
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	804,578			
23 Insurance.	311,738			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OUTSIDE SERVICERS	6,252,262			
b PROVISION FOR LOAN LOSS	5,000,000			
c DUES & EXAM FEES	255,071			
d				
e All other expenses	2,026,345			
25 Total functional expenses. Add lines 1 through 24e.	51,000,680			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	130,506,284	1	99,554,874
	2 Savings and temporary cash investments	1,000,000	2	1,000,000
	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	7,800,000
	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 instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	866,979,338	7	1,087,213,399
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,181,850	9	1,232,130
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	59,864,969		
	b Less accumulated depreciation	38,646,189		
		21,398,967	10c	21,218,780
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11	540,545,637	12	508,080,855
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets See Part IV, line 11	53,197,754	15	57,083,278	
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,614,809,830	16	1,783,183,316	
Liabilities	17 Accounts payable and accrued expenses	9,196,510	17	13,787,696
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D	1,185,932	21	1,481,367
	22 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	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	1,434,337,932	25	1,584,767,964
	26 Total liabilities. Add lines 17 through 25	1,444,720,374	26	1,600,037,027
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34. Capital stock or trust principal, or current funds	0	30	0
	31 Paid-in or capital surplus, or land, building or equipment fund	0	31	0
	32 Retained earnings, endowment, accumulated income, or other funds	170,089,456	32	183,146,289
	33 Total net assets or fund balances	170,089,456	33	183,146,289
	34 Total liabilities and net assets/fund balances	1,614,809,830	34	1,783,183,316

Part 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	66,984,323
2	Total expenses (must equal Part IX, column (A), line 25)	2	51,000,680
3	Revenue less expenses Subtract line 2 from line 1	3	15,983,643
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	170,089,456
5	Net unrealized gains (losses) on investments	5	-2,926,810
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	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	183,146,289

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
<p>1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____</p> <p>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O</p>			
<p>2a Were the organization's financial statements compiled or reviewed by an independent accountant?</p> <p>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</p> <p><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2a		No
<p>b Were the organization's financial statements audited by an independent accountant?</p> <p>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</p> <p><input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2b	Yes	
<p>c 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?</p> <p>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O</p>	2c	Yes	
<p>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</p>	3a		No
<p>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</p>	3b		

Additional Data

Software ID:

Software Version:

EIN: 94-1189841

Name: SCHOOLS FINANCIAL CREDIT UNION

Form 990 (2016)

Form 990, Part III, Line 4a:

SCHOOLS FINANCIAL CREDIT UNION (SFCU) IS A MEMBER-OWNED, NOT-FOR-PROFIT FINANCIAL COOPERATIVE DEDICATED TO SERVING THE FINANCIAL NEEDS OF ITS MEMBERS. ITS PURPOSE IS TO BE THE PRIMARY FINANCIAL INSTITUTION FOR COMMUNITY MEMBERS IN ITS SERVICE AREA. ITS MISSION IS TO PROVIDE MEMBERS WITH BETTER VALUE AND OUTSTANDING SERVICE. SFCU FOSTERS A CULTURE OF "PEOPLE HELPING PEOPLE" THROUGHOUT THE ORGANIZATION, AND ITS INTERACTION WITH MEMBERS EPITOMIZES THE STANDARDS OF ETHICAL BEHAVIOR. SFCU TREATS ALL MEMBERS WITH RESPECT AND DIGNITY AND PROVIDES SERVICES TO SAVERS AND BORROWERS IN A DEMOCRATIC FASHION. SFCU OFFERS ITS MEMBERS AN ECONOMIC ADVANTAGE COMBINED WITH COURTEOUS, COMPETENT AND TIMELY SERVICE. IT VALUES OPEN, HONEST, TWO-WAY COMMUNICATION WITH ITS MEMBERS. SFCU SOLICITS INPUT FROM ITS MEMBERS TO FACILITATE COMMUNICATION AND TO MEASURE SERVICE QUALITY. SFCU IS COMMITTED TO CONSTANTLY IMPROVING ITS OVERALL OPERATIONAL EFFICIENCY, ITS SERVICE DELIVERY CONVENIENCE AND THE LEVEL OF PROFESSIONAL SERVICE IT PROVIDES TO ITS MEMBERS. IT MEETS ITS MEMBERS' EXPECTATIONS FOR PRICE ADVANTAGE, QUALITY SERVICE AND CONVENIENCE BY REMAINING FINANCIALLY STRONG AND VIABLE. SFCU COMMUNICATES ITS SERVICES IN A MEANINGFUL WAY SO THAT MEMBERS, POTENTIAL MEMBERS, LEGISLATORS, REGULATORS AND THE COMMUNITY-AT-LARGE UNDERSTAND AND APPRECIATE THE UNIQUE ROLE THAT MEMBER-OWNED FINANCIAL COOPERATIVES PLAY IN THEIR LIVES. ITS COMMITMENT TO MEMBERS IS CONSISTENT WITH ITS PRINCIPLES OF "FOR SERVICE, NOT FOR PROFIT, NOT FOR CHARITY AND ITS PHILOSOPHY OF "PEOPLE HELPING PEOPLE". THIS COMMITMENT REPRESENTS THE SOUND BUSINESS PRACTICES THAT ENSURE THE FINANCIAL STRENGTH OF SFCU FOR ITS MEMBERS.

Form 990, Part III, Line 4b:

AS OF DECEMBER 31, 2016, SFCU HAD ELEVEN BRANCHES, 134,076 MEMBERS, TOTAL ASSETS OF \$1,783,183,316 AND TOTAL OUTSTANDING LOANS OF \$1,085,513,737

Form 990, Part III, Line 4c:

AS OF DECEMBER 31, 2016, SFCU HAD ELEVEN BRANCHES, 134,076 MEMBERS, TOTAL ASSETS OF \$1,783,183,316 AND TOTAL DEPOSITS OF \$1,584,767,964

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047
2016
Open to Public Inspection

▶ 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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
SCHOOLS FINANCIAL CREDIT UNION

Employer identification number
94-1189841

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor 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 assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, 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 violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other 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 report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research 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 similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--|------------|-----------|
| (i) unrelated organizations | Yes | No |
| 3a(i) | | |
| (ii) related organizations | Yes | No |
| 3a(ii) | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
| 3b | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,548,094		4,548,094
b Buildings		28,052,705	15,848,014	12,204,691
c Leasehold improvements		3,284,336	2,703,146	581,190
d Equipment		22,751,612	19,237,534	3,514,078
e Other		1,228,222	857,495	370,727
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				21,218,780

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
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) MORTGAGE BACKED BONDS	102,228,120	F
(B) COLLATERALIZED MORTGAGE OBLIGATIONS	95,879,998	F
(C) HOME EQUITY CONVERSION MORTGAGES BONDS	106,284,510	F
(D) SMALL BUSINESS ADMINISTRATION BONDS	14,853,938	F
(E) US TREASURY BONDS	249,991	C
(F) US AGENCY BONDS	188,584,298	C
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.) ▶	508,080,855	

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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) ▶		

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.) ▶	

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	
MEMBER SHARES	1,554,767,964
STATE OF CALIFORNIA TREASURY DEPOSIT	30,000,000
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	1,584,767,964

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	67,708,085
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	67,708,085
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		-723,762
c	Add lines 4a and 4b		4c	-723,762
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	66,984,323

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	51,724,442
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		723,762
e	Add lines 2a through 2d		2e	723,762
3	Subtract line 2e from line 1		3	51,000,680
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	0
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	51,000,680

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 94-1189841

Name: SCHOOLS FINANCIAL CREDIT UNION

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B	THE ESCROW ACCOUNTS HOLD AMOUNTS TO BE USED TO PAY THOSE MEMBERS' HOMEOWNERS' INSURANCE PR EMIUMS AND PROPERTY TAXES WHEN DUE AND ARE COLLECTED WITH THE MEMBERS' MORTGAGE PAYMENTS

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015, MANAGEMENT HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	RENTAL EXPENSES RECLASSIFIED FROM FUNCTIONAL EXPENSES -723,762

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES RECLASSIFIED TO STATEMENT OF REVENUE 723,762

Schedule I (Form 990)

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

OMB No 1545-0047

2016

Open to Public Inspection

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization: SCHOOLS FINANCIAL CREDIT UNION

Employer identification number: 94-1189841

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 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

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Row 1: SACRAMENTO FOOD BANK AND FAMILY SERVICES, 94-3315566, 501(C)(3), 4,000, 2,160, ACTUAL COST, BOTTLED WATER, RUN TO FEED THE HUNGRY.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 1
3 Enter total number of other organizations listed in the line 1 table.

Part III 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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) NEWS10 TEACHER OF THE YEAR	1	5,000	65	ACTUAL COST	SPORT BAG, MUG, NOTEPADS, PENS, PENCILS, HAND SANITIZER, CHAPSTICK, MINTS, CLIPS
(2) NEWS10 TEACHER OF THE MONTH	12	12,000	900	ACTUAL COST	SPORT BAG, MUG, NOTEPADS, PENS, PENCILS, HAND SANITIZER, CHAPSTICK, MINTS, CLIPS
(3) EDUCATION MATTERS GRANTS	16	4,800		ACTUAL COST	
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	SFCU PARTNERS WITH SACRAMENTO'S CHANNEL 10 TO PROVIDE AWARDS TO EXCEPTIONAL TEACHERS THAT CHANNEL 10 HAS DESIGNATED AS TEACHERS OF THE MONTH OR TEACHERS OF THE YEAR SFCU'S EDUCATION MATTERS GRANTS ARE DEVISED TO HELP CLASSROOM TEACHERS AFFORD THE SUPPLIES THEY NEED FOR THEIR STUDENTS TO LEARN EFFECTIVELY AND FURTHER EVIDENCE SFCU'S COMMITMENT TO THE FIELD OF EDUCATION SFCU IS ONE OF THE SPONSORS OF THE ANNUAL RUN TO FEED THE HUNGRY WHICH RAISES FUNDS FOR THE SACRAMENTO FOOD BANK, THIS IS A WAY FOR SFCU TO GIVE BACK TO THE COMMUNITY

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

OMB No 1545-0047

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.**

2015
Open to Public Inspection

▶ **Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.**

Name of the organization SCHOOLS FINANCIAL CREDIT UNION	Employer identification number 94-1189841
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Part I Questions Regarding Compensation

	Yes	No								
<p>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.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes in 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.</p>	1b	Yes								
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2	Yes								
<p>3 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 methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee									
<p>4 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:</p>										
<p>a Receive a severance payment or change-of-control payment?</p>	4a	No								
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	4b	Yes								
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p>	4c	No								
<p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>										
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p>										
<p>5 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:</p>										
<p>a The organization?</p>	5a									
<p>b Any related organization? If "Yes," on line 5a or 5b, describe in Part III.</p>	5b									
<p>6 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:</p>										
<p>a The organization?</p>	6a									
<p>b Any related organization? If "Yes," on line 6a or 6b, describe in Part III.</p>	6b									
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7									
<p>8 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.</p>	8									
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

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 are not 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 TIMOTHY MARRIOTT PRESIDENT/CEO	(i)	475,000 -----	18,957 -----	22,455 -----	992,685 -----	20,646 -----	1,529,743 -----	0 -----
	(ii)	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----
2 TODD DEVOGD SVP FINANCE/CFO	(i)	220,885 -----	1,463 -----	373 -----	0 -----	22,127 -----	244,848 -----	0 -----
	(ii)	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----
3 ERIC LINDSTROM SVP INFORMATION SERVICES/CIO	(i)	215,216 -----	11,882 -----	3,354 -----	40,832 -----	16,093 -----	287,377 -----	0 -----
	(ii)	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----
4 STEVE LANGLEY SVP MEMBER SERVICES/CHIEF RETAIL OFF	(i)	192,190 -----	10,458 -----	11,161 -----	13,997 -----	20,423 -----	248,229 -----	0 -----
	(ii)	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----
5 LINDSAY SHORES LOAN COUNSELOR	(i)	12,671 -----	9,953 -----	256,460 -----	18,550 -----	20,048 -----	317,682 -----	0 -----
	(ii)	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----
6 MELINDA BROWNING LOAN COUNSELOR	(i)	12,800 -----	11,721 -----	245,980 -----	15,814 -----	18,596 -----	304,911 -----	0 -----
	(ii)	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----
7 TOM KUANG VP TECHNOLOGY/CTO	(i)	173,994 -----	9,433 -----	2,898 -----	12,780 -----	7,403 -----	206,508 -----	0 -----
	(ii)	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----
8 LISA MACKAY VP HUMAN RESOURCES AND COMPLIANCE	(i)	169,390 -----	9,401 -----	4,303 -----	12,132 -----	8,719 -----	203,945 -----	0 -----
	(ii)	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----
9 ROCHELLE SMITH VP LOSS PREVENTION & SECURITY	(i)	161,523 -----	9,133 -----	6,861 -----	11,940 -----	7,561 -----	197,018 -----	0 -----
	(ii)	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----

Part III Supplemental Information

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.

Return Reference	Explanation
PART I, LINE 1A	THE CREDIT UNION REIMBURSES BOTH THE DIRECTORS AND THEIR SPOUSES FOR THE COSTS INCURRED IN ATTENDING CREDIT UNION RELATED CONFERENCES/MEETINGS. THE SPOUSAL REIMBURSEMENT, IF IT IS IN EXCESS OF \$600, IS INCLUDED ON A 1099 FILED IN THE NAME OF THE SPOUSE.
PART I, LINE 4B	THE CREDIT UNION HAS A NONQUALIFIED DEFERRED COMPENSATION PLAN IN PLACE FOR CERTAIN EXECUTIVES AS DESCRIBED IN SECTION 457(F). THE PAYOUT CALCULATIONS ARE PERFORMED UPON RETIREMENT AND BASED ON COMPENSATORY AMOUNTS CALCULATED PER A FORMULA APPROACH TAKING INTO ACCOUNT THE PRIOR FIVE YEARS COMPENSATION AMOUNTS. AMOUNTS ACCRUED UNDER SUCH PLAN ARE PROPERLY REFLECTED IN PART VII, COLUMN F AND IN SCHEDULE J, PART II, COLUMN C. THERE WERE NO DISTRIBUTIONS DURING 2016. ADDITIONAL TERMS AND CONDITIONS OF SUCH PLAN ARE AVAILABLE TO THE IRS UPON REQUEST.

Additional Data

Software ID:
Software Version:
EIN: 94-1189841
Name: SCHOOLS FINANCIAL CREDIT UNION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1TIMOTHY MARRIOTT PRESIDENT/CEO	(i)	475,000	18,957	22,455	992,685	20,646	1,529,743	0
	(ii)	0	0	0	0	0	0	0
1TODD DEVOGD SVP FINANCE/CFO	(i)	220,885	1,463	373	0	22,127	244,848	0
	(ii)	0	0	0	0	0	0	0
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	(ii)	0	0	0	0	0	0	0
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	(ii)	0	0	0	0	0	0	0
8ROCHELLE SMITH VP LOSS PREVENTION & SECURITY	(i)	161,523	9,133	6,861	11,940	7,561	197,018	0
	(ii)	0	0	0	0	0	0	0

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

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

2016

Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization SCHOOLS FINANCIAL CREDIT UNION

Employer identification number 94-1189841

Part I 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

Table with 4 main columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by 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

Part II 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

Table with 9 main columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization?, (e) Original principal amount, (f) Balance due, (g) In default?, (h) Approved by board or committee?, (i) Written agreement?

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SCHOOLS FINANCIAL CREDIT UNION

Employer identification number

94-1189841

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE CREDIT UNION'S MEMBERS HAVE RIGHTS TO ELECT THE MEMBERS OF THE GOVERNING BODY THE CREDIT UNION'S MEMBERS ALSO RECEIVE A SHARE OF THE ORGANIZATION'S PROFITS IN THE FORM OF CASH DIVIDENDS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS OF THE CREDIT UNION HAVE THE RIGHT TO ELECT ONE OR MORE MEMBERS OF THE ORGANIZATION'S GOVERNING BODY, WHETHER PERIODICALLY, OR AS VACANCIES ARISE, OR OTHERWISE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	MEMBERS OF THE CREDIT UNION HAVE THE RIGHT TO APPROVE THE GOVERNING BODY'S ELECTION AND REMOVAL OF MEMBERS OF THE GOVERNING BODY, AS WELL AS OTHER MATTERS THAT ARE SUBJECT TO THE APPROVAL OF MEMBERS OF THE CREDIT UNION AS THEY OCCUR

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE EXECUTIVE COMMITTEE WILL REVIEW THE DRAFT OF THE FORM 990 THE COMPLETED FORM 990 WILL BE PROVIDED TO THE BOARD OF DIRECTORS PRIOR TO FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CREDIT UNION HAS A WRITTEN CONFLICT OF INTEREST POLICY AND AN ANNUAL STATEMENT REGARDING CONFLICT OF INTEREST POLICY ("STATEMENT") THE STATEMENT REQUIRES THE SIGNATORY TO ANNUALLY AFFIRM THAT HE/SHE HAS RECEIVED, READ, AND UNDERSTOOD THE CONFLICT OF INTEREST POLICY AND AGREES TO COMPLY WITH THE POLICY THE STATEMENT ASKS A SERIES OF QUESTIONS DESIGNED TO REVEAL ANY POTENTIAL CONFLICTS OF INTEREST THE SIGNATORY MUST EXPLAIN ANY POTENTIAL CONFLICTS OF INTEREST ON THE STATEMENT THE MEMBERS OF THE BOARD OF DIRECTORS AND THE SUPERVISORY COMMITTEE, AS WELL AS THE CEO AND ALL OF THE VICE PRESIDENTS, MUST SIGN THE STATEMENT EACH YEAR THE EXECUTIVE DEPARTMENT MAINTAINS A RECURRING EVENTS LIST TO ENSURE THAT THE ANNUAL STATEMENT REGARDING CONFLICT OF INTEREST POLICY IS SIGNED EVERY YEAR BY THE PERTINENT INDIVIDUALS

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PART VI, SECTION B, LINE 15</p>	<p>PRESIDENT/CEO THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR PREPARING THE CEO'S ANNUAL REVIEW, WHICH IS SUBMITTED ANNUALLY TO THE BOARD OF DIRECTORS FOR THEIR APPROVAL ANNUALLY, THE EXECUTIVE COMMITTEE PRESENTS TO THE BOARD OF DIRECTORS A RECOMMENDATION FOR THE PRESIDENT /CEO'S MERIT RATING THIS RECOMMENDATION WILL BE BASED ON THE PRESIDENT/CEO'S ANNUAL RESULTS AND WILL BE STATED IN TERMS OF THE STANDARD SCHOOLS' PERFORMANCE CATEGORIES IN CONJUNCTION WITH THE MERIT RATING, THE EXECUTIVE COMMITTEE RECOMMENDS A PERFORMANCE BONUS AND SALARY INCREASE BASED ON THE CURRENT SCHOOLS' MERIT RATING CHART THE PERFORMANCE BONUS IS CALCULATED BASED ON SUCCESS IN MEETING PRE-DETERMINED GOALS THE BOARD OF DIRECTORS WILL ESTABLISH THE AMOUNT OF THE SALARY INCREASE (IF ANY) THAT WILL BE GRANTED TO THE PRESIDENT/CEO THE MIDPOINT SALARY FOR THE PRESIDENT/CEO, AND PERFORMANCE BONUS TARGET, ARE ESTABLISHED ANNUALLY BY CONSULTING THE CALIFORNIA AND NEVADA CREDIT UNION'S BURNS-FAZZI, BROCK AND ASSOCIATES (BFB) SUMMIT ROUND TABLE (SRT) EXECUTIVE COMPENSATION SURVEY AND THE REWARDS STRATEGIES GROUP'S (RSG) COMPENSATION SURVEY OF BILLION DOLLAR CREDIT UNION CEOS THE SRT EXECUTIVE COMPENSATION SURVEY IS AN ANNUAL SURVEY OF SRT CREDIT UNION MEMBERS THE LEAGUE CONDUCTS THIS SURVEY AS A SERVICE TO SRT CREDIT UNIONS, PROVIDING THEM WITH COMPARATIVE PEER DATA FOR EXECUTIVE COMPENSATION, BENEFIT, AND DEMOGRAPHIC INFORMATION BASED ON THE RESULTS OF THESE SURVEYS, THE EXECUTIVE COMMITTEE WILL RECOMMEND A MIDPOINT ADJUSTMENT TO THE BOARD OF DIRECTORS, IF NECESSARY THE SCHOOLS' SURVEY RANGE WILL EXTEND FROM 80% OF ESTABLISHED MIDPOINT TO 120% OF THAT MIDPOINT OTHER OFFICERS AND KEY EMPLOYEES THE PRESIDENT/CEO COMPLETES ANNUAL REVIEWS OF THE OTHER OFFICERS AND KEY EMPLOYEES THE ANNUAL RESULTS OF THESE EMPLOYEES ARE EVALUATED IN TERMS OF THE STANDARD SCHOOLS' PERFORMANCE CATEGORIES THE MIDPOINT SALARY FOR THESE EMPLOYEES IS ESTABLISHED ANNUALLY BY CONSULTING THE CALIFORNIA AND NEVADA CREDIT UNION'S BURNS-FAZZI, BROCK AND ASSOCIATES (BFB) SUMMIT ROUND TABLE (SRT) EXECUTIVE COMPENSATION SURVEY BASED ON THE RESULTS OF THIS SURVEY, THE EXECUTIVE COMMITTEE WILL RECOMMEND A MIDPOINT ADJUSTMENT TO THE BOARD OF DIRECTORS, IF NECESSARY THIS MIDPOINT IS APPROXIMATELY EQUAL TO THE MEDIAN BASE SALARY FOR EACH EMPLOYEE'S RESPECTIVE POSITION AS SHOWN IN THE ABOVE MENTIONED SURVEY THE SCHOOLS' SALARY RANGE WILL EXTEND FROM 80% OF THE ESTABLISHED MIDPOINT TO 120% OF THAT MIDPOINT</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	CREDIT UNION GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICIES ARE AVAILABLE TO THE PUBLIC UPON REQUEST FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D) THE CREDIT UNION ALSO PUBLISHES A BROCHURE WHICH DESCRIBES THE WAY IT CONDUCTS ITS BUSINESS THE CREDIT UNION'S ANNUAL REPORTS CAN BE VIEWED ON ITS WEBSITE THE BALANCE SHEET AND INCOME STATEMENT FOR THE MOST RECENTLY COMPLETED MONTH ARE POSTED IN EACH BRANCH WE FILE A QUARTERLY 5300 REPORT WITH NCUA AND THE CALIFORNIA DEPARTMENT OF BUSINESS OVERSIGHT