

<b>Form 5500</b> Department of the Treasury Internal Revenue Service <hr/> Department of Labor Employee Benefits Security Administration <hr/> Pension Benefit Guaranty Corporation	<b>Annual Return/Report of Employee Benefit Plan</b> This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). <b>▶ Complete all entries in accordance with the instructions to the Form 5500.</b>	OMB Nos. 1210 - 0110 1210 - 0089 <hr/> <b>2013</b> <hr/> <b>This Form is Open to Public Inspection</b>
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<b>Part I Annual Report Identification Information</b>	
For calendar plan year 2013 or fiscal plan year beginning <b>01/01/2013</b> and ending <b>12/31/2013</b>	
<b>A</b> This return/report is for:	<input type="checkbox"/> a multiemployer plan; <input type="checkbox"/> a single-employer plan;
	<input checked="" type="checkbox"/> a multiple-employer plan; or <input type="checkbox"/> a DFE (specify) _____
<b>B</b> This return/report is:	<input checked="" type="checkbox"/> the first return/report; <input type="checkbox"/> an amended return/report;
	<input type="checkbox"/> the final return/report; <input type="checkbox"/> a short plan year return/report (less than 12 months).
<b>C</b> If the plan is a collectively-bargained plan, check here ..... ▶ <input type="checkbox"/>	
<b>D</b> Check box if filing under:	<input checked="" type="checkbox"/> Form 5558; <input type="checkbox"/> special extension (enter description) _____
	<input type="checkbox"/> automatic extension; <input type="checkbox"/> the DFVC program;

<b>Part II Basic Plan Information</b> - enter all requested information							
<b>1a</b> Name of plan <b>INSURANCE AND BENEFITS TRUST OF THE PORAC - NON-SAFETY</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;"><b>1b</b> Three-digit plan number (PN) ▶</td> <td style="width:40%; text-align: center;"><b>502</b></td> </tr> <tr> <td colspan="2"><b>1c</b> Effective date of plan <b>01/01/2013</b></td> </tr> </table>	<b>1b</b> Three-digit plan number (PN) ▶	<b>502</b>	<b>1c</b> Effective date of plan <b>01/01/2013</b>			
<b>1b</b> Three-digit plan number (PN) ▶	<b>502</b>						
<b>1c</b> Effective date of plan <b>01/01/2013</b>							
<b>2a</b> Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)  <b>INSURANCE AND BENEFITS TRUST OF THE PORAC - NON-SA</b>  <b>4010 TRUXEL ROAD</b>  <b>SACRAMENTO CA 95834-3725</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;"><b>2b</b> Employer Identification Number (EIN) <b>68-6068469</b></td> <td style="width:40%;"></td> </tr> <tr> <td><b>2c</b> Sponsor's telephone number <b>8006556397</b></td> <td></td> </tr> <tr> <td><b>2d</b> Business code (see instructions) <b>525100</b></td> <td></td> </tr> </table>	<b>2b</b> Employer Identification Number (EIN) <b>68-6068469</b>		<b>2c</b> Sponsor's telephone number <b>8006556397</b>		<b>2d</b> Business code (see instructions) <b>525100</b>	
<b>2b</b> Employer Identification Number (EIN) <b>68-6068469</b>							
<b>2c</b> Sponsor's telephone number <b>8006556397</b>							
<b>2d</b> Business code (see instructions) <b>525100</b>							

**Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.**

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

<b>SIGN HERE</b>			
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
<b>SIGN HERE</b>			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
<b>SIGN HERE</b>			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional)			Preparer's telephone number (optional)
<b>HEMMING MORSE CPAS AND CONSULTANTS</b> <b>155 BOVET ROAD, SUITE 600</b> <b>SAN MATEO CA 94402</b>			<b>415-836-4000</b>

## Application for Extension of Time To File Certain Employee Plan Returns

OMB No. 1545-0212

▶ For Privacy Act and Paperwork Reduction Act Notice, see instructions.  
 ▶ Information about Form 5558 and its instructions is at [www.irs.gov/form5558](http://www.irs.gov/form5558)

**File With IRS Only**

**Part I Identification**

<p><b>A</b> Name of filer, plan administrator, or plan sponsor (see instructions)  <b>INSURANCE AND BENEFITS TRUST OF THE          PORAC - NON-SAFETY</b></p> <p>Number, street, and room or suite no. (If a P.O. box, see instructions)  <b>4010 TRUXEL ROAD</b></p> <p>City or town, state, and ZIP code  <b>SACRAMENTO, CA 95834-3725</b></p>	<p><b>B</b> Filer's identifying number (see instr)</p> <p>Employer identification number (EIN) (9 digits XX-XXXXXXX)  <b>68-6068469</b></p> <hr/> <p>Social security number (SSN) (9 digits XXX-XX-XXXX)</p>													
<p><b>C</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width: 60%;">Plan name</th> <th rowspan="2" style="width: 10%;">Plan number</th> <th colspan="3" style="width: 30%;">Plan year ending -</th> </tr> <tr> <th style="width: 10%;">MM</th> <th style="width: 10%;">DD</th> <th style="width: 10%;">YYYY</th> </tr> </thead> <tbody> <tr> <td style="border-top: 1px solid black;"><b>INSURANCE AND BENEFITS TRUST OF THE PORAC - N</b></td> <td style="border-top: 1px solid black;"><b>502</b></td> <td style="border-top: 1px solid black;"><b>12</b></td> <td style="border-top: 1px solid black;"><b>31</b></td> <td style="border-top: 1px solid black;"><b>2013</b></td> </tr> </tbody> </table>	Plan name	Plan number	Plan year ending -			MM	DD	YYYY	<b>INSURANCE AND BENEFITS TRUST OF THE PORAC - N</b>	<b>502</b>	<b>12</b>	<b>31</b>	<b>2013</b>	
Plan name			Plan number	Plan year ending -										
	MM	DD		YYYY										
<b>INSURANCE AND BENEFITS TRUST OF THE PORAC - N</b>	<b>502</b>	<b>12</b>	<b>31</b>	<b>2013</b>										

**Part II Extension of Time To File Form 5500 Series, and/or Form 8955-SSA**

**1**  Check this box if you are requesting an extension of time on line 2 to file the first Form 5500 series return/report for the plan listed in Part 1, C above.

**2** I request an extension of time until 10/15/2014 to file Form 5500 series (see instructions).  
**Note.** A signature IS NOT required if you are requesting an extension to file Form 5500 series.

**3** I request an extension of time until \_\_\_\_\_ to file Form 8955-SSA (see instructions).  
**Note.** A signature IS NOT required if you are requesting an extension to file Form 8955-SSA.

The application is **automatically approved** to the date shown on line 2 and/or line 3 (above) if: (a) the Form 5558 is filed on or before the normal due date of Form 5500 series, and/or Form 8955-SSA for which this extension is requested, and (b) the date on line 2 and/or line 3 (above) is not later than the 15th day of the third month after the normal due date.

**Part III Extension of Time To File Form 5330 (see instructions)**

**4** I request an extension of time until \_\_\_\_\_ to file Form 5330.  
 You may be approved for up to a 6 month extension to file Form 5330, after the normal due date of Form 5330.

<b>a</b> Enter the Code section(s) imposing the tax	▶	<b>a</b>	
<b>b</b> Enter the payment amount attached	▶	<b>b</b>	
<b>c</b> For excise taxes under section 4980 or 4980F of the Code, enter the reversion/amendment date	▶	<b>c</b>	

**5** State in detail why you need the extension:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made on this form are true, correct, and complete, and that I am authorized to prepare this application.

**Signature** ▶ \_\_\_\_\_ **Date** ▶ \_\_\_\_\_

me  
7/17/14

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor Name <input checked="" type="checkbox"/> Same as Plan Sponsor Address	<b>3b</b> Administrator's EIN
	<b>3c</b> Administrator's telephone number

<b>4</b> If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	<b>4b</b> EIN
<b>a</b> Sponsor's name	<b>4c</b> PN

<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	0
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<b>6</b> Number of participants as of the end of the plan year (welfare plans complete only lines 6a, 6b, 6c, and 6d).		
<b>a</b> Active participants	<b>6a</b>	2,508
<b>b</b> Retired or separated participants receiving benefits	<b>6b</b>	
<b>c</b> Other retired or separated participants entitled to future benefits	<b>6c</b>	
<b>d</b> Subtotal. Add lines 6a, 6b, and 6c	<b>6d</b>	2,508
<b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	<b>6e</b>	
<b>f</b> Total. Add lines 6d and 6e	<b>6f</b>	
<b>g</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	<b>6g</b>	
<b>h</b> Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	<b>6h</b>	

<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	<b>7</b>	
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**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:  
**4B 4F 4H 4L**

<b>9a</b> Plan funding arrangement (check all that apply)	<b>9b</b> Plan benefit arrangement (check all that apply)
(1) <input checked="" type="checkbox"/> Insurance	(1) <input checked="" type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

<b>a Pension Schedules</b>	<b>b General Schedules</b>
(1) <input type="checkbox"/> <b>R</b> (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information)
(2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> <b>I</b> (Financial Information - Small Plan)
(3) <input type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input checked="" type="checkbox"/> <b>3</b> <b>A</b> (Insurance Information)
	(4) <input checked="" type="checkbox"/> <b>C</b> (Service Provider Information)
	(5) <input type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules)

<b>SCHEDULE A</b> <b>(Form 5500)</b>  Department of the Treasury Internal Revenue Service  Department of Labor Employee Benefits Security Administration  Pension Benefit Guaranty Corporation	<b>Insurance Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>► File as an attachment to Form 5500.</b>  <b>► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).</b>	OMB No. 1210-0110  <b>2013</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2013 or fiscal plan year beginning **01/01/2013** and ending **12/31/2013**

<b>A</b> Name of plan <b>INSURANCE AND BENEFITS TRUST OF THE PORAC -</b>	<b>B</b> Three-digit plan number (PN) ►	<b>502</b>
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<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>INSURANCE AND BENEFITS TRUST OF THE PORAC - NON-SA</b>	<b>D</b> Employer Identification Number (EIN) <b>68-6068469</b>
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**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

**(a) Name of insurance carrier**  
**RELIASTAR LIFE INSURANCE COMPANY OF NEW YORK**

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
53-0242530	61360	66326-3	338	10/01/2012	09/30/2013

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

<b>(a) Total amount of commissions paid</b>	<b>(b) Total amount of fees paid</b>
890	1,910

**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

**(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid**  
**MYERS-STEVENSON & TOOHEY CO INC**  
**26101 MARQUERITE PKWY**  
**MISSION VIEJO CA 92692**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
890	1,910	ADMINISTRATION/OVERWRITE FEES	3

**(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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	(c) Amount	(d) Purpose	

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end .....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

**b** Premiums paid to carrier ..... **6b**

**c** Premiums due but unpaid at the end of the year ..... **6c**

**d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount ..... **6d**  
 Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here .....

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

<b>b</b> Balance at the end of the previous year .....	<b>7b</b>	
<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>	
(2) Dividends and credits .....	<b>7c(2)</b>	
(3) Interest credited during the year .....	<b>7c(3)</b>	
(4) Transferred from separate account .....	<b>7c(4)</b>	
(5) Other (specify below) .....	<b>7c(5)</b>	
(6) Total additions .....	<b>7c(6)</b>	0
<b>d</b> Total of balance and additions (add lines <b>7b</b> and <b>7c(6)</b> ) .....	<b>7d</b>	
<b>e</b> Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year .....	<b>7e(1)</b>	
(2) Administration charge made by carrier .....	<b>7e(2)</b>	
(3) Transferred to separate account .....	<b>7e(3)</b>	
(4) Other (specify below) .....	<b>7e(4)</b>	
(5) Total deductions .....	<b>7e(5)</b>	0
<b>f</b> Balance at the end of the current year (subtract line <b>7e(5)</b> from line <b>7d</b> ) .....	<b>7f</b>	

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

- 8** Benefit and contract type (check all applicable boxes)
- |  |  |   |  |
|--|--|---|--|
| <b>a</b> <input type="checkbox"/> Health (other than dental or vision)         | <b>b</b> <input type="checkbox"/> Dental               | <b>c</b> <input type="checkbox"/> Vision                    | <b>d</b> <input type="checkbox"/> Life insurance     |
| <b>e</b> <input type="checkbox"/> Temporary disability (accident and sickness) | <b>f</b> <input type="checkbox"/> Long-term disability | <b>g</b> <input type="checkbox"/> Supplemental unemployment | <b>h</b> <input type="checkbox"/> Prescription drug  |
| <b>i</b> <input type="checkbox"/> Stop loss (large deductible)                 | <b>j</b> <input type="checkbox"/> HMO contract         | <b>k</b> <input type="checkbox"/> PPO contract              | <b>l</b> <input type="checkbox"/> Indemnity contract |
| <b>m</b> <input checked="" type="checkbox"/> Other (specify) <b>AD&amp;D</b>   |  |   |  |

**9** Experience-rated contracts:

<b>a</b> Premiums: (1) Amount received	<b>9a(1)</b>	
(2) Increase (decrease) in amount due but unpaid	<b>9a(2)</b>	
(3) Increase (decrease) in unearned premium reserve	<b>9a(3)</b>	
(4) Earned ((1) + (2) - (3))		<b>9a(4)</b>
<b>b</b> Benefit charges: (1) Claims paid	<b>9b(1)</b>	
(2) Increase (decrease) in claim reserves	<b>9b(2)</b>	
(3) Incurred claims (add (1) and (2))		<b>9b(3)</b>
(4) Claims charged		<b>9b(4)</b>
<b>c</b> Remainder of premium: (1) Retention charges (on an accrual basis) --		
(A) Commissions	<b>9c(1)(A)</b>	
(B) Administrative service or other fees	<b>9c(1)(B)</b>	
(C) Other specific acquisition costs	<b>9c(1)(C)</b>	
(D) Other expenses	<b>9c(1)(D)</b>	
(E) Taxes	<b>9c(1)(E)</b>	
(F) Charges for risks or other contingencies	<b>9c(1)(F)</b>	
(G) Other retention charges	<b>9c(1)(G)</b>	
(H) Total retention		<b>9c(1)(H)</b>
(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)		<b>9c(2)</b>
<b>d</b> Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		<b>9d(1)</b>
(2) Claim reserves		<b>9d(2)</b>
(3) Other reserves		<b>9d(3)</b>
<b>e</b> Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		<b>9e</b>

**10** Nonexperience-rated contracts:

<b>a</b> Total premiums or subscription charges paid to carrier	<b>10a</b>	32,209
<b>b</b> If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	<b>10b</b>	

Specify nature of costs ►

**Part IV Provision of Information**

**11** Did the insurance company fail to provide any information necessary to complete Schedule A? Yes  No

**12** If the answer to line 11 is "Yes," specify the information not provided. ►

<p align="center"><b>SCHEDULE A</b> <b>(Form 5500)</b></p> <p align="center">Department of the Treasury Internal Revenue Service</p> <hr/> <p align="center">Department of Labor Employee Benefits Security Administration</p> <hr/> <p align="center">Pension Benefit Guaranty Corporation</p>	<p><b>Insurance Information</b></p> <p>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p align="center">▶ <b>File as an attachment to Form 5500.</b></p> <p>▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).</p>	<p align="center">OMB No. 1210-0110</p> <hr/> <p align="center" style="font-size: 24pt;"><b>2013</b></p> <hr/> <p align="center">This Form is Open to Public Inspection</p>
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For calendar plan year 2013 or fiscal plan year beginning **01/01/2013** and ending **12/31/2013**

<b>A</b> Name of plan <b>INSURANCE AND BENEFITS TRUST OF THE PORAC -</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>502</b>
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<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>INSURANCE AND BENEFITS TRUST OF THE PORAC - NON-SA</b>	<b>D</b> Employer Identification Number (EIN) <b>68-6068469</b>
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**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

(a) Name of insurance carrier  
**RELIASTAR LIFE INSURANCE COMPANY OF NEW YORK**

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
53-0242530	61360	66326-3	406	10/01/2012	09/30/2013

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
2,924	7,072

**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid  
**MYERS-STEVENSON & TOOHEY CO INC**  
**26101 MARQUERITE PKWY**  
**MISSION VIEJO CA 92692**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2,924	7,072	ADMINISTRATION/OVERWRITE FEES	3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end .....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

**b** Premiums paid to carrier ..... **6b**

**c** Premiums due but unpaid at the end of the year ..... **6c**

**d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount ..... **6d**  
 Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here .....

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

**b** Balance at the end of the previous year ..... **7b**

<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>	
(2) Dividends and credits .....	<b>7c(2)</b>	
(3) Interest credited during the year .....	<b>7c(3)</b>	
(4) Transferred from separate account .....	<b>7c(4)</b>	
(5) Other (specify below) .....	<b>7c(5)</b>	
▶		

(6) Total additions ..... **7c(6)** 0

**d** Total of balance and additions (add lines **7b** and **7c(6)**) ..... **7d**

<b>e</b> Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year .....	<b>7e(1)</b>	
(2) Administration charge made by carrier .....	<b>7e(2)</b>	
(3) Transferred to separate account .....	<b>7e(3)</b>	
(4) Other (specify below) .....	<b>7e(4)</b>	
▶		

(5) Total deductions ..... **7e(5)** 0

**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**) ..... **7f**

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

- 8** Benefit and contract type (check all applicable boxes)
- |  |  |   |   |
|--|--|---|---|
| <b>a</b> <input type="checkbox"/> Health (other than dental or vision)         | <b>b</b> <input type="checkbox"/> Dental               | <b>c</b> <input type="checkbox"/> Vision                    | <b>d</b> <input checked="" type="checkbox"/> Life insurance |
| <b>e</b> <input type="checkbox"/> Temporary disability (accident and sickness) | <b>f</b> <input type="checkbox"/> Long-term disability | <b>g</b> <input type="checkbox"/> Supplemental unemployment | <b>h</b> <input type="checkbox"/> Prescription drug         |
| <b>i</b> <input type="checkbox"/> Stop loss (large deductible)                 | <b>j</b> <input type="checkbox"/> HMO contract         | <b>k</b> <input type="checkbox"/> PPO contract              | <b>l</b> <input type="checkbox"/> Indemnity contract        |
| <b>m</b> <input type="checkbox"/> Other (specify) ▶                            |  |   |   |

**9** Experience-rated contracts:

<b>a</b> Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	
<b>b</b> Benefit charges: (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	
(4) Claims charged		9b(4)	
<b>c</b> Remainder of premium: (1) Retention charges (on an accrual basis) -			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)		9c(2)	
<b>d</b> Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
<b>e</b> Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

**10** Nonexperience-rated contracts:

<b>a</b> Total premiums or subscription charges paid to carrier	10a	58,483
<b>b</b> If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	10b	
Specify nature of costs ▶		

**Part IV Provision of Information**

**11** Did the insurance company fail to provide any information necessary to complete Schedule A? Yes  No

**12** If the answer to line 11 is "Yes," specify the information not provided. ▶

<b>SCHEDULE A</b> <b>(Form 5500)</b>  Department of the Treasury Internal Revenue Service  Department of Labor Employee Benefits Security Administration  Pension Benefit Guaranty Corporation	<b>Insurance Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). <b>► File as an attachment to Form 5500.</b> <b>► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).</b>	OMB No. 1210-0110  <b>2013</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2013 or fiscal plan year beginning **01/01/2013** and ending **12/31/2013**

<b>A</b> Name of plan <b>INSURANCE AND BENEFITS TRUST OF THE PORAC -</b>	<b>B</b> Three-digit plan number (PN) ►	<b>502</b>
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<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>INSURANCE AND BENEFITS TRUST OF THE PORAC - NON-SA</b>	<b>D</b> Employer Identification Number (EIN) <b>68-6068469</b>
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**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

(a) Name of insurance carrier  
**AFLAC**

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
58-0663085	60380	0AMY9	0	01/01/2013	12/31/2013

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

<b>(a) Total amount of commissions paid</b>	<b>(b) Total amount of fees paid</b>
200	0

**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid  
**VARIOUS**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
200			

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end .....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

<b>b</b> Premiums paid to carrier .....	<b>6b</b>	
<b>c</b> Premiums due but unpaid at the end of the year .....	<b>6c</b>	
<b>d</b> If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount .....	<b>6d</b>	

Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

**b** Balance at the end of the previous year ..... **7b**

<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>		
(2) Dividends and credits .....	<b>7c(2)</b>		
(3) Interest credited during the year .....	<b>7c(3)</b>		
(4) Transferred from separate account .....	<b>7c(4)</b>		
(5) Other (specify below) .....	<b>7c(5)</b>		

(6) Total additions ..... **7c(6)** 0

**d** Total of balance and additions (add lines 7b and 7c(6)) ..... **7d**

<b>e</b> Deductions:			
(1) Disbursed from fund to pay benefits or purchase annuities during year .....	<b>7e(1)</b>		
(2) Administration charge made by carrier .....	<b>7e(2)</b>		
(3) Transferred to separate account .....	<b>7e(3)</b>		

(4) Other (specify below) .....

(5) Total deductions ..... **7e(5)** 0

**f** Balance at the end of the current year (subtract line 7e(5) from line 7d) ..... **7f**

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

- 8** Benefit and contract type (check all applicable boxes)
- |  |  |   |   |
|--|--|---|---|
| <b>a</b> <input type="checkbox"/> Health (other than dental or vision)         | <b>b</b> <input type="checkbox"/> Dental               | <b>c</b> <input type="checkbox"/> Vision                    | <b>d</b> <input checked="" type="checkbox"/> Life insurance |
| <b>e</b> <input type="checkbox"/> Temporary disability (accident and sickness) | <b>f</b> <input type="checkbox"/> Long-term disability | <b>g</b> <input type="checkbox"/> Supplemental unemployment | <b>h</b> <input type="checkbox"/> Prescription drug         |
| <b>i</b> <input type="checkbox"/> Stop loss (large deductible)                 | <b>j</b> <input type="checkbox"/> HMO contract         | <b>k</b> <input type="checkbox"/> PPO contract              | <b>i</b> <input type="checkbox"/> Indemnity contract        |
| <b>m</b> <input type="checkbox"/> Other (specify) ▶                            |  |   |   |

**9** Experience-rated contracts:

<b>a</b> Premiums: (1) Amount received	<b>9a(1)</b>		
(2) Increase (decrease) in amount due but unpaid	<b>9a(2)</b>		
(3) Increase (decrease) in unearned premium reserve	<b>9a(3)</b>		
(4) Earned ((1) + (2) - (3))		<b>9a(4)</b>	
<b>b</b> Benefit charges: (1) Claims paid	<b>9b(1)</b>		
(2) Increase (decrease) in claim reserves	<b>9b(2)</b>		
(3) Incurred claims (add (1) and (2))		<b>9b(3)</b>	
(4) Claims charged		<b>9b(4)</b>	
<b>c</b> Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	<b>9c(1)(A)</b>		
(B) Administrative service or other fees	<b>9c(1)(B)</b>		
(C) Other specific acquisition costs	<b>9c(1)(C)</b>		
(D) Other expenses	<b>9c(1)(D)</b>		
(E) Taxes	<b>9c(1)(E)</b>		
(F) Charges for risks or other contingencies	<b>9c(1)(F)</b>		
(G) Other retention charges	<b>9c(1)(G)</b>		
(H) Total retention		<b>9c(1)(H)</b>	
(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)		<b>9c(2)</b>	
<b>d</b> Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		<b>9d(1)</b>	
(2) Claim reserves		<b>9d(2)</b>	
(3) Other reserves		<b>9d(3)</b>	
<b>e</b> Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		<b>9e</b>	

**10** Nonexperience-rated contracts:

<b>a</b> Total premiums or subscription charges paid to carrier	<b>10a</b>	1,559
<b>b</b> If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	<b>10b</b>	
Specify nature of costs ▶		

**Part IV Provision of Information**

- 11** Did the insurance company fail to provide any information necessary to complete Schedule A? Yes  No
- 12** If the answer to line 11 is "Yes," specify the information not provided. ▶

<b>SCHEDULE C (Form 5500)</b>  Department of the Treasury Internal Revenue Service  Department of Labor Employee Benefits Security Administration  Pension Benefit Guaranty Corporation	<b>Service Provider Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <b>2013</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2013 or fiscal plan year beginning **01/01/2013** and ending **12/31/2013**

<b>A</b> Name of plan <b>INSURANCE AND BENEFITS TRUST OF THE PORAC -</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>502</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>INSURANCE AND BENEFITS TRUST OF THE PORAC - NON-SA</b>	<b>D</b> Employer Identification Number (EIN) <b>68-6068469</b>	

**Part I Service Provider Information (see instructions)**

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

**1 Information on Persons Receiving Only Eligible Indirect Compensation**

- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions) ...  Yes  No
- b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation



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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

**2. Information on Other Service Providers Receiving Direct or Indirect Compensation.** Except for those persons for whom you answered "Yes" to line 1a on page 2, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

PORAC

23-7077256

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
50 14	PARTY IN INTEREST	28,529.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

MYERS-STEVENSON TOOHEY &amp; CO INC

95-2637676

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 50	NONE	19,515.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

TRUCKER HUSS

94-3216063

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	5,715.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

**SCHEDULE H  
(Form 5500)**

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security  
Administration

Pension Benefit Guaranty Corporation

**Financial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

► **File as an attachment to Form 5500.**

OMB No. 1210-0110

**2013**

**This Form is Open  
to Public Inspection**

For calendar plan year 2013 or fiscal plan year beginning **01/01/2013** and ending **12/31/2013**

<b>A</b> Name of plan		<b>B</b> Three-digit plan number (PN) ►	<b>502</b>
<b>INSURANCE AND BENEFITS TRUST OF THE PORAC -</b>			
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500		<b>D</b> Employer Identification Number (EIN)	
<b>INSURANCE AND BENEFITS TRUST OF THE PORAC - NON-SA</b>		<b>68-6068469</b>	

**Part I Asset and Liability Statement**

**1** Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

<b>Assets</b>		(a) Beginning of Year	(b) End of Year
<b>a</b> Total noninterest-bearing cash	<b>1a</b>		<b>11</b>
<b>b</b> Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	<b>1b(1)</b>		
(2) Participant contributions	<b>1b(2)</b>		<b>14378</b>
(3) Other <b>SEE STATEMENT 1</b>	<b>1b(3)</b>		<b>119311</b>
<b>c</b> General investments:			
(1) Interest-bearing cash (incl. money market accounts & certificates of deposit)	<b>1c(1)</b>		<b>7016</b>
(2) U.S. Government securities	<b>1c(2)</b>		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	<b>1c(3)(A)</b>		
(B) All other	<b>1c(3)(B)</b>		<b>52132</b>
(4) Corporate stocks (other than employer securities):			
(A) Preferred	<b>1c(4)(A)</b>		
(B) Common	<b>1c(4)(B)</b>		<b>23180</b>
(5) Partnership/joint venture interests	<b>1c(5)</b>		
(6) Real estate (other than employer real property)	<b>1c(6)</b>		
(7) Loans (other than to participants)	<b>1c(7)</b>		
(8) Participant loans	<b>1c(8)</b>		
(9) Value of interest in common/collective trusts	<b>1c(9)</b>		
(10) Value of interest in pooled separate accounts	<b>1c(10)</b>		
(11) Value of interest in master trust investment accounts	<b>1c(11)</b>		
(12) Value of interest in 103-12 investment entities	<b>1c(12)</b>		
(13) Value of interest in registered investment companies (e.g., mutual funds)	<b>1c(13)</b>		<b>168581</b>
(14) Value of funds held in insurance co. general account (unallocated contracts)	<b>1c(14)</b>		
(15) Other <b>SEE STATEMENT 2</b>	<b>1c(15)</b>		<b>40057</b>

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500

Schedule H (Form 5500) 2013

v. 130118

		(a) Beginning of Year	(b) End of Year
<b>1 d</b>	Employer-related investments:		
	(1) Employer securities .....	1d(1)	
	(2) Employer real property .....	1d(2)	
<b>e</b>	Buildings and other property used in plan operation .....	1e	149
<b>f</b>	Total assets (add all amounts in lines 1a through 1e) .....	1f	424815
<b>Liabilities</b>			
<b>g</b>	Benefit claims payable .....	1g	127725
<b>h</b>	Operating payables .....	1h	10258
<b>i</b>	Acquisition indebtedness .....	1i	
<b>j</b>	Other liabilities .....	1j	72648
<b>k</b>	Total liabilities (add all amounts in lines 1g through 1j) .....	1k	210631
<b>Net Assets</b>			
<b>l</b>	Net assets (subtract line 1k from line 1f) .....	1l	214184

**Part II Income and Expense Statement**

**2** Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

		(a) Amount	(b) Total
<b>Income</b>			
<b>a</b>	<b>Contributions:</b>		
	(1) Received or receivable in cash from: (A) Employers .....	2a(1)(A)	
	(B) Participants .....	2a(1)(B)	211454
	(C) Others (including rollovers) .....	2a(1)(C)	
	(2) Noncash contributions .....	2a(2)	
	(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2) .....	2a(3)	211454
<b>b</b>	<b>Earnings on investments:</b>		
	(1) Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit) .....	2b(1)(A)	128
	(B) U.S. Government securities .....	2b(1)(B)	
	(C) Corporate debt instruments .....	2b(1)(C)	2022
	(D) Loans (other than to participants) .....	2b(1)(D)	
	(E) Participant loans .....	2b(1)(E)	
	(F) Other .....	2b(1)(F)	1079
	(G) Total interest. Add lines 2b(1)(A) through (F) .....	2b(1)(G)	3229
	(2) Dividends: (A) Preferred stock .....	2b(2)(A)	
	(B) Common stock .....	2b(2)(B)	325
	(C) Registered investment company shares (e.g. mutual funds) .....	2b(2)(C)	7936
	(D) Total dividends. Add lines 2b(2)(A), (B), and (C) .....	2b(2)(D)	8261
	(3) Rents .....	2b(3)	
	(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds .....	2b(4)(A)	
	(B) Aggregate carrying amount (see instructions) .....	2b(4)(B)	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result .....	2b(4)(C)	
	(5) Unrealized appreciation (depreciation) of assets: (A) Real estate .....	2b(5)(A)	
	(B) Other .....	2b(5)(B)	17459
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B) .....	2b(5)(C)	17459

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	477
c Other income SEE STATEMENT 4	2c	71042
d Total income. Add all income amounts in column (b) and enter total	2d	311922

**Expenses**

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	186045
(2) To insurance carriers for the provision of benefits	2e(2)	14557
(3) Other	2e(3)	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)	200602
f Corrective distributions (see instructions)	2f	
g Certain deemed distributions of participant loans (see instructions)	2g	
h Interest expense	2h	
i Administrative expenses: (1) Professional fees	2i(1)	10255
(2) Contract administrator fees	2i(2)	48044
(3) Investment advisory and management fees	2i(3)	1061
(4) Other SEE STATEMENT 5	2i(4)	6982
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)	66342
j Total expenses. Add all expense amounts in column (b) and enter total	2j	266944

**Net Income and Reconciliation**

k Net income (loss). Subtract line 2j from line 2d	2k	44978
l Transfers of assets:		
(1) To this plan	2l(1)	169206
(2) From this plan	2l(2)	

**Part III Accountant's Opinion**

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):  
 (1)  Unqualified (2)  Qualified (3)  Disclaimer (4)  Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?  Yes  No

c Enter the name and EIN of the accountant (or accounting firm) below:  
 (1) Name: HEMMING MORSE CPAS AND CONSULTANTS (2) EIN: 30-0702322

d The opinion of an independent qualified public accountant is not attached because:  
 (1)  This form is filed for a CCT, PSA, or MTIA. (2)  It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

**Part IV Compliance Questions**

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.) ...		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	

	Yes	No	Amount
<b>c</b> Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
<b>d</b> Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
<b>e</b> Was this plan covered by a fidelity bond?	X		500000
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
<b>g</b> Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>h</b> Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
<b>j</b> Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X	
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
<b>l</b> Has the plan failed to provide any benefit when due under the plan?		X	
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
<b>n</b> If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3		X	

**5 a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If "Yes," enter the amount of any plan assets that reverted to the employer this year  Yes  No **Amount:**

**5 b** If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

**5 c** If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)?  Yes  No  Not determined

**Part V Trust Information (optional)**

<b>6 a</b> Name of trust	<b>6 b</b> Trust's EIN

SCHEDULE H	OTHER RECEIVABLES	STATEMENT	1
<u>DESCRIPTION</u>		BEGINNING	ENDING
OTHER RECEIVABLES		0.	119311.
TOTAL TO SCHEDULE H, LINE 1B(3)		0.	119311.

SCHEDULE H	OTHER GENERAL INVESTMENTS	STATEMENT	2
<u>DESCRIPTION</u>		BEGINNING	ENDING
OTHER GENERAL INVESTMENTS		0.	40057.
TOTAL TO SCHEDULE H, LINE 1C(15)		0.	40057.

SCHEDULE H	OTHER PLAN LIABILITIES	STATEMENT	3
<u>DESCRIPTION</u>		BEGINNING	ENDING
OTHER LIABILITIES		0.	72648.
TOTAL TO SCHEDULE H, LINE 1J		0.	72648.

SCHEDULE H	OTHER INCOME	STATEMENT	4
<u>DESCRIPTION</u>			AMOUNT
OTHER INCOME			71042.
TOTAL TO SCHEDULE H, LINE 2C			71042.

SCHEDULE H	OTHER ADMINISTRATIVE EXPENSES	STATEMENT	5
DESCRIPTION		AMOUNT	
OTHER ADMINISTRATIVE EXPENSES		6982.	
TOTAL TO SCHEDULE H, LINE 21(4)		6982.	



**INSURANCE AND BENEFITS TRUST OF THE  
PEACE OFFICERS RESEARCH ASSOCIATION  
OF CALIFORNIA**

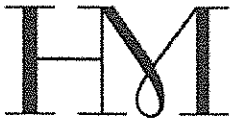
**FINANCIAL STATEMENTS**

**December 31, 2013 and 2012**

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
FINANCIAL STATEMENTS  
December 31, 2013 and 2012**

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EXHIBIT B:	Statements of changes in net assets available for benefits and of changes in benefit obligations for the years ended December 31, 2013 and 2012
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## INDEPENDENT AUDITOR'S REPORT

Board of Trustees  
Insurance and Benefits Trust of the  
Peace Officers Research Association  
of California

### Report on the Financial Statements

We have audited the accompanying financial statements of Insurance and Benefits Trust of the Peace Officers Research Association of California (the "Trust"), which comprise the statements of net assets available for benefits and of benefit obligations as of December 31, 2013 and 2012, and the related statements of changes in net assets available for benefits and of changes in benefit obligations for the years then ended and the related notes to the financial statements.

### Management's Responsibility for the Financial Statements

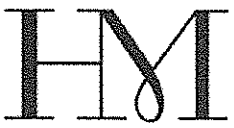
Trust management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Trust's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Trust's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.



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Board of Trustees  
Insurance and Benefits Trust of the  
Peace Officers Research Association  
of California  
(Continued)

### **Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial status of Insurance and Benefits Trust of the Peace Officers Research Association of California as of December 31, 2013 and 2012, and the changes in its financial status for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### **Report on Supplemental Information**

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of Assets Held for Investment as of December 31, 2013, referred to as "supplemental information," are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Trust's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

San Francisco, California  
October 8, 2014

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS  
AND OF BENEFIT OBLIGATIONS  
December 31, 2013 and 2012**

	ASSETS				
	2013				2012
	Safety Plan	Non-Safety Plan	Total		
<b>Investments (Notes 2C and 3)</b>	\$ 6,413,322	\$ 290,966	\$ 6,704,288	\$ 7,135,780	
<b>Receivables:</b>					
Estimated recoverable claims receivable (Note 4)	2,318,428	103,185	2,423,613	2,968,713	
Less estimated non-recoverable portion	(1,228,767)	(55,748)	(1,284,515)	(1,603,105)	
Net estimated recoverable claims receivable	<u>1,089,661</u>	<u>49,437</u>	<u>1,139,098</u>	<u>1,365,608</u>	
Participant contributions	316,914	14,378	331,292	579,855	
Administrative fee receivable	160,129	7,265	167,394	87,479	
Due from Safety (Note 7)	-	61,492	61,492	-	
Miscellaneous receivable	1,435	65	1,500	24,943	
	<u>478,478</u>	<u>83,200</u>	<u>561,678</u>	<u>692,277</u>	
<b>Fixed Assets, net of accumulated depreciation (Note 2D and 6)</b>	<u>3,276</u>	<u>149</u>	<u>3,425</u>	<u>1,720</u>	
<b>Cash Accounts:</b>					
Benefit account	149,549	-	149,549	125,396	
Operating account	-	-	-	155,381	
Petty cash	239	11	250	250	
	<u>149,788</u>	<u>11</u>	<u>149,799</u>	<u>281,027</u>	
<b>Other Assets:</b>					
Prepaid insurance expense	20,354	815	21,169	18,768	
Prepaid expense	2,829	237	3,066	3,912	
	<u>23,183</u>	<u>1,052</u>	<u>24,235</u>	<u>22,680</u>	
<b>Total assets</b>	<u>8,157,708</u>	<u>424,815</u>	<u>8,582,523</u>	<u>9,499,092</u>	
	LIABILITIES				
	2013			2012	
	Safety Plan	Non-Safety Plan	Total		
<b>Liabilities:</b>					
Accounts payable	226,110	10,258	236,368	317,840	
Due to Non-Safety (Note 7)	61,492	-	61,492	-	
Operating Cash Overdraft	27,937	-	27,937	-	
Other	22,869	1,038	23,907	25,863	
<b>Total liabilities</b>	<u>338,408</u>	<u>11,296</u>	<u>349,704</u>	<u>343,703</u>	
<b>Net Assets Available for Benefits</b>	<u>7,819,300</u>	<u>413,519</u>	<u>8,232,819</u>	<u>9,155,389</u>	
<b>Self-funded and insured benefits (Note 1B and 2E):</b>					
Group insurance premiums payable	154,363	-	154,363	112,679	
Self-funded benefits claims payable (Note 5)	2,806,253	127,725	2,933,978	3,493,947	
Incurred but not reported claims (Note 5)	1,578,390	71,610	1,650,000	1,650,000	
<b>Total benefit obligations</b>	<u>4,539,006</u>	<u>199,335</u>	<u>4,738,341</u>	<u>5,256,626</u>	
<b>Excess of Net Assets Available for Benefits Over Benefit Obligations</b>	<u>\$ 3,280,294</u>	<u>\$ 214,184</u>	<u>\$ 3,494,478</u>	<u>\$ 3,898,763</u>	

The accompanying notes are an integral part of the financial statements.

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS  
AND CHANGES IN BENEFIT OBLIGATIONS  
For the Years Ended December 31, 2013 and 2012**

	2013			2012
	Safety Plan	Non-Safety Plan	Total	
<b>Additions:</b>				
Participant contributions (Notes 1C and 2B)	\$ 4,548,070	\$ 211,454	\$ 4,759,524	\$ 4,526,358
Long term disability claims recoveries	619,023	28,084	647,107	1,449,161
Standard insurance recoveries	6,362	289	6,651	3,842
Admin fee revenue:				
Anthem Blue Cross	764,262	34,674	798,936	748,926
AFLAC	167,136	7,583	174,719	184,017
Insurance and Benefits Committee (Note 7)	5,740	260	6,000	6,000
	<u>6,110,593</u>	<u>282,344</u>	<u>6,392,937</u>	<u>6,918,304</u>
Investment income:				
Realized and unrealized gains on investments, net (Note 3)	395,344	17,936	413,280	579,051
Interest and dividends	253,247	11,490	264,737	235,259
	<u>648,591</u>	<u>29,426</u>	<u>678,017</u>	<u>814,310</u>
Less: investment expenses	(23,394)	(1,061)	(24,455)	(23,292)
	<u>625,197</u>	<u>28,365</u>	<u>653,562</u>	<u>791,018</u>
Other income	<u>3,358</u>	<u>152</u>	<u>3,510</u>	<u>4,471</u>
Total additions	<u>6,739,148</u>	<u>310,861</u>	<u>7,050,009</u>	<u>7,713,793</u>
<b>Deductions:</b>				
<b>Self-funded claims (Note 1B):</b>				
Long Term Disability Claims	4,402,190	199,723	4,601,913	4,168,736
Death Benefit	200,870	9,113	209,983	150,001
Claims review costs	24,716	1,121	25,837	29,380
	<u>4,627,776</u>	<u>209,957</u>	<u>4,837,733</u>	<u>4,348,117</u>
<b>Insured benefits (Note 1B):</b>				
Standard Insurance- Extended Long Term Disability	1,295,254	-	1,295,254	852,742
ING Insurance- AD&D Death Benefit	320,850	14,557	335,407	339,313
	<u>1,616,104</u>	<u>14,557</u>	<u>1,630,661</u>	<u>1,192,055</u>
Total benefits	<u>6,243,880</u>	<u>224,514</u>	<u>6,468,394</u>	<u>5,540,172</u>
<b>Operating expenses:</b>				
<b>Administrative fees:</b>				
Myers-Stevens Toohey	430,134	19,515	449,649	427,478
PORAC (Note 7)	628,817	28,529	657,346	639,749
	<u>1,058,951</u>	<u>48,044</u>	<u>1,106,995</u>	<u>1,067,227</u>

(Continued)

The accompanying notes are an integral part of the financial statements.

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS  
AND CHANGES IN BENEFIT OBLIGATIONS - (Continued)  
For the Years Ended December 31, 2013 and 2012**

	2013			2012
	Safety Plan	Non-Safety Plan	Total	
Professional services:				
Legal fees	153,699	6,973	160,672	165,857
Consultant	46,988	2,132	49,120	60,514
Audit fees	25,350	1,150	26,500	26,500
	<u>226,037</u>	<u>10,255</u>	<u>236,292</u>	<u>252,871</u>
General Expenses:				
Insurance	19,347	878	20,225	17,239
Computer maintenance	48,609	2,148	50,757	51,854
Supplies and telephone	14,778	670	15,448	12,846
Meeting and conferences	69,745	3,164	72,909	48,993
Depreciation expense	835	38	873	529
Miscellaneous	602	84	686	260
	<u>153,916</u>	<u>6,982</u>	<u>160,898</u>	<u>131,721</u>
Total operating expenses	<u>1,438,904</u>	<u>65,281</u>	<u>1,504,185</u>	<u>1,451,819</u>
Total deductions	<u>7,682,784</u>	<u>289,795</u>	<u>7,972,579</u>	<u>6,991,991</u>
<b>Increase in Net Assets Available for Benefits</b>	<u>(943,636)</u>	<u>21,066</u>	<u>(922,570)</u>	<u>721,802</u>
<b>Increase in Benefit Obligations:</b>				
Group insurance premiums payable	41,684	-	41,684	24,851
Self-funded benefits claims payable	(536,057)	(23,912)	(559,969)	839,939
Incurred but not reported claims	-	-	-	-
	<u>(494,373)</u>	<u>(23,912)</u>	<u>(518,285)</u>	<u>864,790</u>
Total increase/(decrease) in benefit obligations	<u>(494,373)</u>	<u>(23,912)</u>	<u>(518,285)</u>	<u>864,790</u>
Increase/(decrease) in net assets available for benefits over benefit obligations	<u>(449,263)</u>	<u>44,978</u>	<u>(404,285)</u>	<u>(142,988)</u>
<b>Excess of Net Assets Available for Benefits:</b>				
Beginning of year	<u>3,898,763</u>	<u>-</u>	<u>3,898,763</u>	<u>4,041,751</u>
Transfer of plan assets from Safety to Non-Safety (Note 8)	<u>(169,206)</u>	<u>169,206</u>	<u>-</u>	<u>-</u>
End of year	<u>\$ 3,280,294</u>	<u>\$ 214,184</u>	<u>\$ 3,494,478</u>	<u>3,898,763</u>

The accompanying notes are an integral part of the financial statements.

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
NOTES TO THE FINANCIAL STATEMENTS**

**NOTE 1 - DESCRIPTION OF THE TRUST**

**A. General:**

The following brief description is provided for general information purposes only. Participants should refer to the Certificate of Coverage for more complete information.

The Insurance and Benefits Trust of the Peace Officers Research Association of California ("The Trust") was established on June 21, 1991 by the governing committee. Set up as a VEBA (Voluntary Employee Benefits Association), the purpose of the trust is to provide death, sickness, accident or other benefits to PORAC members or their beneficiaries.

The Trust is made up of Safety and Non-Safety members. The Safety Plan is comprised of law enforcement and fire suppression. The Non-Safety Plan is combined of Specialized Non-Safety, which are members who are campus police that carry non-lethal weapons and Other Non-Safety, which are members such as dispatchers.

The Trust is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA) and is exempt from federal and California taxes on income under the current provisions of the Internal Revenue Code and the California Revenue and Taxation Code, respectively.

**B. Benefits:**

Participants are initially eligible for coverage on the date they become a member of PORAC and when their association begins participation under the Trust.

The benefits of the Trust are mainly funded through payment of participant contributions as well as premium deductions from payroll.

The Safety and Specialized Non-Safety members are eligible for long term disability, lifetime disability benefit, salary continuance pay and death benefits. The Other Non-Safety members are eligible for long term disability and death benefits.

**C. Contributions:**

During the years ended December 31, 2013 and 2012, the Trust received contributions at monthly rates equal to the per capita premium based upon level of benefits chosen at the following rates:

Premier PLUS Plan	\$22.50
Premier Plan	19.50
Basic Plan	9.50



**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
NOTES TO THE FINANCIAL STATEMENTS- (Continued)**

**NOTE 1 - DESCRIPTION OF THE TRUST – (Continued)**

**D. Trust Termination:**

In the event the Trust terminates, the assets remaining after the payment of administrative expenses, shall be allocated in the manner determined by the Board of Trustees in accordance with applicable law.

**NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

**A. Basis of Accounting:**

The Trust's financial statements are prepared on the accrual basis of accounting.

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

**B. Contributions:**

All active members of PORAC and retirees are entitled to participate in the benefits of the Trust which are mainly funded through payment of participant contributions as well as premium deductions from payroll. The payments are received weekly by a third party administrator, who then transfers the contributions to the Trust.

**C. Valuation of Investments:**

Cash equivalents are valued at cost, which equals fair value. Corporate obligations, Mutual funds, Common stock, and Exchange Traded Funds are valued at fair value, based on closing market quotations at December 31.

The Cantor Opportunistic Alternatives Fund, LLC is a hedge fund. Its value is based upon values of the underlying portfolio funds. Those values are generally based upon the value of a redemption request under normal redemption request activity. This investment was disposed of during year ending December 31, 2013.

**D. Property and Equipment:**

Property and equipment are stated at cost less accumulated depreciation. Depreciation is computed on the straight-line basis over estimated useful lives.

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
NOTES TO THE FINANCIAL STATEMENTS- (Continued)**

**NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – (Continued)**

**E. Benefits:**

As a result of the eligibility provisions of the Trust, generally a participant is eligible to receive benefits on the date their association begins the participation in the plan and the date they become a member of PORAC.

**F. Uncertain Tax Positions:**

The Plan or Trust has adopted guidance on accounting for uncertainty in income taxes issued by the Financial Accounting Standards Board. The Plan or Trust administrator believes that the Plan or Trust has not taken uncertain tax positions that require adjustment to the financial statements as a tax liability. Informational tax returns, for tax years for which the applicable statutes of limitations have not expired, are subject to examination by authorities.

**NOTE 3 - INVESTMENTS**

**A. General:**

The investments of the Fund are held by Fidelity Investments, under the terms of a custodian agreement and are invested in accordance with an investment policy and program directed by the Board of Trustees and Halbert Hargrove the investment advisor and manager.

The following information, included in the Fund's financial statements as of December 31, 2013 and 2012, was prepared by Fidelity Investments and furnished to the Administrator.

<u>Safety</u>	<u>2013</u>	<u>2012</u>
	<u>Fair Value</u>	<u>Fair Value</u>
Short term investment funds	\$ 154,637	\$ 132,396
Common stock	510,927	512,937
Corporate bonds	1,149,069	1,249,482
Mutual funds	3,715,776	4,064,072
Other- Exchange traded funds	882,913	997,487
Other- Hedge fund	-	179,406
	<u>\$ 6,413,322</u>	<u>\$ 7,135,780</u>

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
NOTES TO THE FINANCIAL STATEMENTS- (Continued)**

**NOTE 3 – INVESTMENTS - (Continued)**

**A. General: - (Continued)**

<u>Non-Safety</u>	<u>2013</u>	<u>2012</u>
	<u>Fair Value</u>	<u>Fair Value</u>
Short term investment funds	\$ 7,016	\$ -
Common stock	23,180	-
Corporate bonds	52,132	-
Mutual funds	168,581	-
Other- Exchange traded funds	40,057	-
	<u>\$ 290,966</u>	<u>\$ -</u>

During the years ended December 31, 2013 and 2012, the Trust's investments (including investments bought, sold, and held during the year) appreciated in value as follows:

	<u>Safety</u>	<u>Non-Safety</u>	<u>2013</u>	<u>2012</u>
Common stock	\$ 162,360	\$ 7,366	\$ 169,726	\$ 51,646
Corporate bonds	196,322	8,907	205,229	11,161
Mutual funds	15,258	693	15,951	442,539
Other- Exchange traded funds	19,458	882	20,340	69,674
Other- Hedge fund	1,946	88	2,034	4,031
	<u>\$ 395,344</u>	<u>\$ 17,936</u>	<u>\$ 413,280</u>	<u>\$ 579,051</u>

The following investments, included above, represent five percent or more of net assets available for benefits of the Trust as of December 31, 2013:

<u>Description</u>	<u>Fair Market Value</u>	
	<u>Safety</u>	<u>Non-Safety</u>
PIMCO All Asset Inst Class	\$ 475,137	21,556

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
NOTES TO THE FINANCIAL STATEMENTS- (Continued)**

**NOTE 3 – INVESTMENTS - (Continued)**

**B. Fair Value Measurement:**

The Trust has adopted the Fair Value Measurement Topic of the Financial Accounting Standards Board Accounting Standards Codification No. 820 (ASC 820). In accordance with ASC 820, fair value is defined as the price that the Trust would receive upon selling an investment in a timely transaction to an independent buyer in the principal or most advantageous market of the investment. As amended, ASC 820 permits entities to use Net Asset Value (NAV) as a practical expedient to measure fair value when the investment does not have a readily determinable fair value and the net asset value is calculated in a manner consistent with the investment company accounting. ASC 820 established a three-tier hierarchy to maximize the use of observable market data and minimize the use of unobservable inputs and to establish classification of fair value measurements for disclosure purposes. Inputs refer broadly to the assumptions that market participants would use in pricing the asset or liability, including assumptions about risk, for example, the risk inherent in a particular valuation technique used to measure fair value including such a pricing model and/or the risk inherent in the inputs to the valuation technique. Inputs may be observable or unobservable. Observable inputs are inputs that reflect the assumptions market participants would use in pricing the asset or liability developed based on market data obtained from sources independent of the reporting entity. Unobservable inputs are inputs that reflect the reporting entity's own assumptions about the assumptions market participants would use in pricing the asset or liability developed based on the best information available in the circumstances. The three-tier hierarchy of inputs is summarized in the three broad Levels listed below.

- Level 1 – quoted prices in active markets for identical investments
- Level 2 – other significant observable inputs (including quoted prices for similar investments, interest rates, prepayment speeds, credit risk, etc.)
- Level 3 – significant unobservable inputs (including the Trust's own assumptions in determining the fair value of investments)

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
NOTES TO THE FINANCIAL STATEMENTS- (Continued)**

**NOTE 3 – INVESTMENTS - (Continued)**

**B. Fair Value Measurement: - (Continued)**

The following is a summary of the inputs used as of December 31, 2013 in valuing the Trust's investments carried at fair value:

<u>Safety:</u>	Level 1	Level 2	Level 3	Total 2013
Short term investment funds	\$ 154,637	\$ -	\$ -	\$ 154,637
Common stock	510,927	-	-	510,927
Corporate bonds	1,149,069	-	-	1,149,069
Mutual funds:				
AQR Managed Futures Fund CL	206,862	-	-	206,862
PIMCO High Yield Instl	192,743	-	-	192,743
PIMCO All Asset Inst Class	472,267	-	-	472,267
PIMCO Commodity Real Return Inst	121,892	-	-	121,892
PIMCO Emerging Mkts Full Spectrum Bond I	369,093	-	-	369,093
Russell Global Equity Class S	378,373	-	-	378,373
Russell Strategic Call Overwriting FD S	249,583	-	-	249,583
Russell US Small Cap Equity Class I	252,212	-	-	252,212
Russell Short Duration Bond CL S	168,933	-	-	168,933
Russell Emerging Markets S	192,744	-	-	192,744
Russell Global Real Estate Securities S	190,817	-	-	190,817
Russell Global Infrastructure CL S	199,731	-	-	199,731
Stone Ridge Reinsurance Risk Prem I	-	210,000	-	210,000
Stone Ridge High Yld Reinsurance Risk Prem I	-	84,500	-	84,500
Stoneridge US Master Variance Risk Prem I	230,292	-	-	230,292
Stoneridge Reinsurance Risk Prem Interval	-	195,734	-	195,734
Other- Exchange traded funds	882,913	-	-	882,913
Total	<u>\$ 5,923,088</u>	<u>\$ 490,234</u>	<u>\$ -</u>	<u>\$ 6,413,322</u>

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
NOTES TO THE FINANCIAL STATEMENTS- (Continued)**

**NOTE 3 – INVESTMENTS - (Continued)**

**B. Fair Value Measurement: - (Continued)**

<u>Non-Safety:</u>	Level 1	Level 2	Level 3	Total 2013
Short term investment funds	\$ 7,016	\$ -	\$ -	\$ 7,016
Common stock	23,180	-	-	23,180
Corporate bonds	52,132	-	-	52,132
Mutual funds:				
AQR Managed Futures Fund CL	9,385	-	-	9,385
PIMCO High Yield Instl	8,745	-	-	8,745
PIMCO All Asset Inst Class	21,426	-	-	21,426
PIMCO Commodity Real Return Inst	5,530	-	-	5,530
PIMCO Emerging Mkts Full Spectrum Bond I	16,745	-	-	16,745
Russell Global Equity Class S	17,166	-	-	17,166
Russell Strategic Call Overwriting FD S	11,323	-	-	11,323
Russell US Small Cap Equity Class I	11,443	-	-	11,443
Russell Short Duration Bond CL S	7,664	-	-	7,664
Russell Emerging Markets S	8,745	-	-	8,745
Russell Global Real Estate Securities S	8,657	-	-	8,657
Russell Global Infrastructure CL S	9,062	-	-	9,062
Stone Ridge Reinsurance Risk Prem I	-	9,528	-	9,528
Stone Ridge High Yld Reinsurance Risk Prem I	-	3,834	-	3,834
Stoneridge US Master Variance Risk Prem I	10,448	-	-	10,448
Stoneridge Reinsurance Risk Prem Interval	-	8,880	-	8,880
Other- Exchange traded funds	40,057	-	-	40,057
Total	<u>\$ 268,724</u>	<u>\$ 22,242</u>	<u>\$ -</u>	<u>\$ 290,966</u>

**NOTE 4 – ESTIMATED RECOVERABLE CLAIMS RECEIVABLE**

The total recoverable claims paid and outstanding represent liens on participants who owe money to the trust fund for overpaid benefits. The amount for 2013 and 2012 was reduced by an estimate of the recovery rates based upon the Trust's estimate of recent history of recovered claims.

	<u>Safety</u>	<u>Non-Safety</u>	<u>2013</u>	<u>2012</u>
Total recoverable claims paid and outstanding	\$ 2,318,428	\$ 105,185	\$ 2,423,613	\$ 2,968,713
Estimated recovery rate	47%	47%	47%	46%
Total	<u>\$ 1,089,661</u>	<u>\$ 49,437</u>	<u>\$ 1,139,098</u>	<u>\$ 1,365,608</u>

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
NOTES TO THE FINANCIAL STATEMENTS- (Continued)**

**NOTE 5- SELF-FUNDED BENEFIT CLAIMS LIABILITY**

The self-funded benefit claims liability, which includes reported and unreported claims, is calculated on the basis of claims incurred through December 31, in accordance with eligibility provisions. Claims reported through December 31, 2013 and 2012 for Safety total \$2,806,253 and both funds combined total \$3,493,947, respectively. Claims reported through December 31, 2013 for Non-Safety total \$127,725. The liabilities for future payment of claims incurred but unreported at December 31, 2013 and 2012 for Safety was \$1,578,390, both funds combined was \$1,650,000 and at December 31, 2013 for Non-Safety was \$71,610; this has been estimated on the basis of statistical lag analysis studies. Given the nature of such analyses, it is reasonably possible that actual claims in the next year might differ from these estimates by amounts that would be material.

The self-funded benefit claims liability composition at December 31, 2013 and 2012 follows:

	<u>Safety</u>	<u>Non-Safety</u>	<u>2013</u>	<u>2012</u>
Long Term Disability Benefit Reserve	\$ 2,333,126	\$ 105,852	\$ 2,438,978	\$ 3,081,614
Long Term Disability Incurred but Not Reported	1,578,390	71,610	1,650,000	1,650,000
Death Benefit Reserve	<u>473,127</u>	<u>21,873</u>	<u>495,000</u>	<u>412,333</u>
	<u>\$ 4,384,643</u>	<u>\$ 199,335</u>	<u>\$ 4,583,978</u>	<u>\$ 5,143,947</u>

**NOTE 6- PROPERTY AND EQUIPMENT**

Property and equipment and related accumulated depreciation comprised the following as of December 31, 2013 and 2012:

	<u>Safety</u>	<u>Non-Safety</u>	<u>2013</u>	<u>2012</u>
Office equipment	\$ 28,144	\$ 1,277	\$ 29,421	\$ 26,843
Less accumulated depreciation	<u>(24,868)</u>	<u>(1,128)</u>	<u>(25,996)</u>	<u>(25,123)</u>
Total equipment	<u>\$ 3,276</u>	<u>\$ 149</u>	<u>\$ 3,425</u>	<u>\$ 1,720</u>

**NOTE 7 – AGREEMENTS AND TRANSACTIONS WITH PERSONS KNOWN TO BE PARTIES-IN-INTEREST**

The Peace Officers Research Association of California (PORAC) is a related party through common membership and management. The Trust also reimburses the actual salaries and related expenses for employees of PORAC solely devoted to the work of the Trust and a percentage of other PORAC employee salaries and expenses based on the work they do for the Trust in the form of an administrative fee.

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
NOTES TO THE FINANCIAL STATEMENTS- (Continued)**

**NOTE 7 – AGREEMENTS AND TRANSACTIONS WITH PERSONS KNOWN TO BE PARTIES-IN-INTEREST - (Continued)**

	<u>Safety</u>	<u>Non-Safety</u>	<u>2013</u>	<u>2012</u>
Salaries and related expenses	\$ 391,620	\$ 17,767	\$ 409,387	\$ 419,310
Benefits	106,703	4,841	111,544	98,147
Payroll Tax	33,217	1,507	34,724	32,075
Rent	42,099	1,910	44,009	46,105
Administrative Fee	42,807	1,942	44,749	35,863
Postage	6,825	310	7,135	4,827
Printing	5,546	252	5,798	3,422
	<u>\$ 628,817</u>	<u>\$ 28,529</u>	<u>\$ 657,346</u>	<u>\$ 639,749</u>

The Insurance Committee of PORAC reimburses the Trust for administrative services that the Insurance and Benefit Manager and Administrative Assistant provide for the Insurance Committee. Administrative income from the Insurance Committee for the years ended December 31, 2013 and 2012.

	<u>Safety</u>	<u>Non-Safety</u>	<u>2013</u>	<u>2012</u>
Insurance and Benefits Committee	\$ 5,740	\$ 260	\$ 6,000	\$ 6,000

As more fully described in Note 8, the Non-Safety plan transferred out of the Safety plan effective January 1, 2013. Operationally the two plans continued through 2013 using the combined net assets, allocated at the end of the year based on a policy approved by the Board of Trustees. At December 31, 2013, \$61,492 was due from Safety based upon separation of the combined assets.

**NOTE 8 – TRANSFER OF ASSETS**

On January 23, 2013 the Board of Trustees approved a split of the plan between safety and non-safety members, effective January 1, 2013. The Safety Plan transferred plan assets to the Non-Safety Plan totaling \$169,206. The transfer was based on 4.34% percent going to the Non-Safety Plan and 95.66% percent staying with the Safety Plan. The initial year allocation is based on the participant count at the beginning of the year.



**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
NOTES TO THE FINANCIAL STATEMENTS- (Continued)**

**NOTE 9 – OPERATING LEASE**

Effective July 1, 2013, the Trust leased a copier from US Bank used in its operations under an operating lease. According to the lease agreement, payments are \$144 plus applicable taxes and a property damage surcharge. At December 31, 2013, the future minimum lease payments are as follows:

2014	\$	1,728
2015		1,728
2016		1,728
2017		1,728
2018		1,440
		<u>\$ 8,352</u>

**NOTE 10 – CONCENTRATION OF CREDIT RISK**

The following footnote is a general description of the deposit insurance as outlined by The Federal Deposit Insurance Corporation (FDIC). The FDIC is an independent agency of the United States government that protects against the loss of insured deposits if an FDIC insured bank or savings association fails. Effective July 21, 2010, the FDIC deposit insurance coverage permanently increased to \$250,000 per depositor. For some employee benefit plans, the FDIC provides coverage known as “pass-through” insurance in which the coverage passes through the plan administrator to each participant’s interest or share. Additionally, the FDIC established the Temporary Liquidity Guarantee Program (TLG Program). The TLG Program provides an unlimited coverage for noninterest-bearing transaction accounts. This coverage became effective October 14, 2008 and will continue through December 31, 2010. Section 343 of the Dodd-Frank Wall Street Reform and Consumer Protection Act extended the unlimited coverage from December 31, 2010 through December 31, 2012. Effective January 1, 2013, noninterest-bearing transaction accounts will be added to any of a depositor’s other accounts at the same FDIC-insured depository institution, and the aggregate balance insured up to at least the standard maximum deposit insurance amount of \$250,000. The rules are a general description and may be applied differently to specific Trust Funds and specific situations.

**NOTE 11 – RISKS AND UNCERTAINTIES**

The Trust invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect amounts reported in the statements of net assets available for benefits.

**INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA  
NOTES TO THE FINANCIAL STATEMENTS- (Continued)**

**NOTE 12 – SUBSEQUENT EVENTS**

The Trust has evaluated subsequent events through the audit opinion date of the financial statements. No material subsequent events have occurred since December 31, 2013 that required recognition or disclosure in the financial statements.

**“Form M-1 Compliance Information”**

INSURANCE AND BENEFITS TRUST OF THE PEACE  
OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA

68-6068469

01/01/2013 – 12/31/2013

This plan is not a Multiple Employer Welfare Arrangement (MEWA) and is not considered to be an Entity Claiming Exception (ECEs). Therefore, the plan is not subject to file the Form M-1.



# 2013 Investment Report

January 1, 2013 - December 31, 2013

## Income Summary

Tax-deferred \$261,729.89

\*\* If you added an account to your statement-reporting household during this period, the Beginning value line and beginning Net Value heading of Your Portfolio Summary may not accurately reflect the date of the values reported. Please refer to the individual Account Summary sections of Your Portfolio Details for the actual dates of the values reported.

## Your Portfolio Details

**Brokerage 648-512249** RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC  
 Separate Account Manager: CARRET ASSET MANAGEMENT, LLC - CUSTOM TAXABLE BOND

**2013 Account Summary**  
 Beginning value as of Jan 1 \$945,557.66  
 Transaction costs, loads and fees -1,695.00  
 Transfers between Fidelity accounts 150,000.00  
 Change in investment value 7,575.55  
 Ending value as of Dec 31 **\$1,101,438.21** x 0.0434 = 47,802.42

**Income Summary**  
 Tax-deferred \$47,641.33

Your Advisor is an independent organization and is not affiliated with Fidelity Investments. Brokerage services provided by Fidelity Brokerage Services LLC, Member NYSE, SIPC.  
 800-544-6666. Brokerage Accounts carried with National Financial Services LLC, Member NYSE, SIPC

Holdings (Symbol) as of 12/31	Non-Safety	Performance		Quantity	Price per Unit	Total Value
		December 31, 2013	Income Earned			
<b>Bonds</b>						
MORGAN STANLEY NT 5.375% 10/15/2015 FIXED COUPON	2,333.99		\$2,687.50	50,000.000	\$107.557	\$53,778.50
MOODY'S Baa2 S&P A- SEMIANNUALLY MAKE WHOLE CALL CUSIP: 61746SBR9	1,718.67		2,817.50	35,000.000	113.145	39,600.75
TIME WARNER COS INC DEB 8.05000% 01/15/2016 FIXED COUPON						
MOODY'S Baa2 S&P BBB SEMIANNUALLY CUSIP: 887315BA6						



# 2013 Investment Report

January 1, 2013 - December 31, 2013

Holdings (Symbol) as of 12/31	Performance		Quantity	Price per Unit	Total Value
	December 31, 2013	Income Earned			
<b>Brokerage 648-512249 RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC</b>					
Separate Account Manager: CARRET ASSET MANAGEMENT, LLC - CUSTOM TAXABLE BOND					
<b>Holdings</b>					
COMCAST CORP BOND 5.900% 03/15/2016 FIXED COUPON	Non-Safety	1,677.57	35,000,000	110.439	38,653.65
MOODYS A3 S&P A- SEMIANNUALLY MAKE WHOLE CALL CUSIP: 20030NAL5					
CVS CORP SR NT 6.125% 08/15/2016 FIXED COUPON		1,708.42	35,000,000	112.470	39,364.50
MOODYS Baa1 S&P BBB+ SEMIANNUALLY MAKE WHOLE CALL CUSIP: 128650BE9		2,417.51	50,000,000	111.406	55,703.00
GENERAL ELEC CAP CORP MTN BE 5.37500% 10/20/2016 FIXED COUPON					
MOODYS A1 S&P AA+ SEMIANNUALLY CUSIP: 36962GY40		1,672.18	35,000,000	110.084	38,529.40
HEWLETT PACKARD CO NOTES 5.400% 03/01/2017 FIXED COUPON					
MOODYS Baa1 S&P BBB+ SEMIANNUALLY MAKE WHOLE CALL CUSIP: 428236AM5		1,692.97	35,000,000	111.453	39,008.55
JANUS CAP GROUP INC CR SENS 6.70000% 06/15/2017 VARIABLE COUPON					
MOODYS Baa3 S&P BBB- SEMIANNUALLY MAKE WHOLE CALL CUSIP: 47102XAF2		2,470.11	50,000,000	113.830	56,915.00
PRUDENTIAL FINL INC MTNS BOOK 6.10000% 06/15/2017 FIXED COUPON					
MOODYS Baa1 S&P A SEMIANNUALLY CUSIP: 74432QAY1					



**2013 Investment Report**

January 1, 2013 - December 31, 2013

Holdings (Symbol) as of 12/31	Performance		Quantity	Price per Unit	Total Value
	Non-Safety	December 31, 2013			
<b>Brokerage 648-512249</b> RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC Separate Account Manager: CARRET ASSET MANAGEMENT, LLC - CUSTOM TAXABLE BOND					
<b>FEDERAL NATL MTG ASSN</b> 1.16000% 06/28/2017 FIXED COUPON MOODYS Aaa S&P AA+ SEMIANNUALLY NEXT CALL DATE 03/28/2014 CUSIP: 3136G0PB1	2,376.74	638.00	55,000,000	99.570	54,763.50
<b>EXELON GENERATION CO LLC NOTE</b> 6.200% 10/01/2017 FIXED COUPON MOODYS Baa2 S&P BBB SEMIANNUALLY MAKE WHOLE CALL CUSIP: 30161MAE3	1,716.55	2,170.00	35,000,000	113.005	39,551.75
<b>NYSE EURONEXT NT</b> 2.00000% 10/05/2017 FIXED COUPON MOODYS A3 S&P A SEMIANNUALLY MAKE WHOLE CALL CUSIP: 629491AB7	2,172.82	500.00	50,000,000	100.130	50,065.00
<b>MOTOROLA INC NOTE CALL MAKE WHOLE</b> 6.000% 11/15/2017 FIXED COUPON MOODYS Baa2 S&P BBB SEMIANNUALLY MAKE WHOLE CALL CUSIP: 620076AZ2	1,729.45	2,100.00	35,000,000	113.854	39,849.04
<b>NASDAQ OMX GROUP INC CR SEN</b> 5.25000% 01/16/2018 VARIABLE COUPON MOODYS Baa3 S&P BBB SEMIANNUALLY MAKE WHOLE CALL CUSIP: 631103AE8	1,644.01	1,837.50	35,000,000	108.230	37,880.50



# 2013 Investment Report

January 1, 2013 - December 31, 2013

**Brokerage 648-512249** RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC  
 Separate Account Manager: CARRET ASSET MANAGEMENT, LLC - CUSTOM TAXABLE BOND

Holdings (Symbol as of 12/31)	Non-Safety	Performance December 31, 2013	Income Earned	Quantity	Price per Unit	Total Value
COMPUTER SCIENCES CORP 6.50000% 03/15/2018 FIXED COUPON MOODY'S Baa2 S&P BBB SEMIANNUALLY MAKE WHOLE CALL CUSIP: 205363AL8	1,743.01		0.00	35,000.000	114.747	40,161.45
GTE CORP DEB 6.84000% 04/15/2018 FIXED COUPON MOODY'S Baa2 S&P BBB+ SEMIANNUALLY CUSIP: 362320AZ6	2,022.02		2,736.00	40,000.000	116.476	46,590.40
HUMANA INC NOTE CALL MAKE WHOLE 07.20000% 06/15/2018 FIXED COUPON MOODY'S Baa3 S&P BBB+ SEMIANNUALLY MAKE WHOLE CALL CUSIP: 444859AY8	1,797.05		2,520.00	35,000.000	118.305	41,406.71
AVON PRODS INC NT 4.200% 07/15/2018 FIXED COUPON MOODY'S Baa2 S&P BBB- SEMIANNUALLY MAKE WHOLE CALL CUSIP: 054303AR3	1,532.34		1,470.00	35,000.000	100.878	35,307.30
EDWARDS LIFESCIENCES COR BOND 02.87500% 10/15/2018 FIXED COUPON MOODY'S Baa3 S&P BBB- SEMIANNUALLY MAKE WHOLE CALL CUSIP: 28176EAC2	1,510.13		0.00	35,000.000	99.416	34,795.60



# 2013 Investment Report

January 1, 2013 - December 31, 2013

Holdings (Symbol) as of 12/31	Performance		Quantity	Price per Unit	Total Value
	December 31, 2013	Income Earned			
<b>Brokerage 648-512249</b> RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC					
Separate Account Manager: CARRET ASSET MANAGEMENT, LLC - CUSTOM TAXABLE BOND					
<b>Holdings</b> (Symbol) as of 12/31	Non-Safety				
BOTTLING GROUP LLC	2,450.30	0.00	50,000,000	112.917	56,458.50
05.12500% 01/15/2019 FIXED COUPON					
MOODY'S A1 S&P A SEMIANNUALLY MAKE WHOLE CALL CUSIP: 10138MAK1					
FEDERAL HOME LOAN BANKS	2,227.50	904.76	55,000,000	93.318	51,324.90
1.64500% 12/28/2020 FIXED COUPON					
MOODY'S Aaa S&P AA+ SEMIANNUALLY NEXT CALL DATE 01/24/2014 CUSIP: 313381J71					
PETROBRAS INTL FIN CO	1,507.44	1,881.26	35,000,000	99.239	34,733.65
5.37500% 01/27/2021 FIXED COUPON					
MOODY'S Baa1 S&P BBB SEMIANNUALLY MAKE WHOLE CALL CUSIP: 71645WAR2					
VERISK ANALYTICS INC NT	1,470.27	0.00	35,000,000	96.792	33,877.20
4.12500% 09/12/2022 FIXED COUPON					
MOODY'S Ba1 S&P BBB- SEMIANNUALLY MAKE WHOLE CALL CUSIP: 92345YAC0					
NIKE INC BOND	2,134.29	0.00	55,000,000	89.413	49,177.15
02.25000% 05/01/2023 FIXED COUPON					
MOODY'S A1 S&P AA- SEMIANNUALLY NEXT CALL DATE 02/01/2023 CONT CALL 02/01/2023 MAKE WHOLE CALL CUSIP: 654106AC7					





**2013 Investment Report**

January 1, 2013 - December 31, 2013

**Brokerage 648-512249** RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC  
 Separate Account Manager: GARRET ASSET MANAGEMENT, LLC - CUSTOM TAXABLE BOND

Holdings (Symbol) as of 12/31	Non-Safety	Performance December 31, 2013	Income Earned	Quantity	Price per Unit	Total Value
<b>Short-term Bonds</b>						
AVALONBAY CMNTYS INC MTN BE FR 5.375% 04/15/2014 FIXED COUPON MOODY'S Baa1 S&P BBB+ SEMIANNUALLY MAKE WHOLE CALL CUSIP: 05348EAH2	1,538.90		1,881.26	35,000,000	101.310	35,458.50
AMERICAN EXPRESS CO SR GLBL NT 7.25000% 05/20/2014 FIXED COUPON MOODY'S A3 S&P BBB+ SEMIANNUALLY CUSIP: 025816BA6	1,558.93		2,537.50	35,000,000	102.629	35,920.15
<b>Core Account</b>						
FIDELITY CASH RESERVES (FDRXX)	971.26	7-day yield: 0.01%	2.82	22,563.560	1.000	22,563.56
<b>Total Market Value as of December 31, 2013</b>						<b>\$1,101,438.21</b>
Total income earned on positions no longer held						6,775.97
<b>2013 Income Earned</b>						<b>\$ 47,641.33</b>

All positions held in cash account unless indicated otherwise.



# 2013 Investment Report

January 1, 2013 - December 31, 2013

**Brokerage 648-512257** RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC  
 Separate Account Manager: PARAMETRIC PORTFOLIO ASSOCIATES - PARAMETRIC / RUSSELL RSA

2013 Account Summary		Income Summary	
Beginning value as of Jan 1	\$524,958.82	Tax-deferred	\$7,516.76
Other Tax Withheld	-34.40		
Transaction costs, loads and fees	-4,758.65		
Transfers between Fidelity accounts	-150,000.00		
Change in investment value	177,310.26		
<b>Ending value as of Dec 31</b>	<b>\$547,476.03</b>	x 0.0434 = 23,760.46	

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 800-544-6666. Brokerage Accounts carried with National Financial Services LLC, Member NYSE, SIPC

Holdings (Symbol) as of 12/31	Non-Safety	Performance December 31, 2013	Income Earned	Quantity	Price per Unit	Total Value
<b>Stocks</b>						
COVIDIEN PLC USD0.20(POST CONSOLIDATION) (COV)	162.55		\$76.56	55,000	\$68.100	\$3,745.50
INVECO LTD COM STK USD0.20 (IVZ)	115.32		0.00	73,000	36.400	2,657.20
LIBERTY GLOBAL PLC USD0.01 A (LBTYA)	77.25		0.00	20,000	89,000	1,780.00
NABORS INDUSTRIES LTD COM USD0.001 (NBR)	64.89		3.52	88,000	16.990	1,495.12
ACE LIMITED ORD CHF27.49 (ACE)	179.73		80.64	40,000	103.530	4,141.20
WEATHERFORD INTERNATIONAL LIMITED CHF1.16 ISIN #CH0038838394 SEDOL #BYMFF0 (WFT)	147.90		0.00	220,000	15.490	3,407.80
TYCO INTERNATIONAL LTD(SWITZERLAND) SHS (TYC)	172.77		105.82	97,000	41.040	3,980.88
NXP SEMICONDUCTORS NV (NXPI)	49.83		0.00	25,000	45.930	1,148.25
SENSATA TECHNOLOGIES HLDGS NV COM EUR0.01 (ST)	141.34		0.00	84,000	38.770	3,256.68
ROYAL CARIBBEAN CRUISES COM USD0.01 (RCL)	76.15		0.00	37,000	47.420	1,754.54
ADT CORP COM (ADT)	170.37		48.39	97,000	40.470	3,925.59
AT&T INC COM (T)	125.13		161.10	82,000	35.160	2,883.12
ABBVIE INC COM USD0.01 (ABBV)	112.31		136.40	49,000	52.810	2,587.69
AGILENT TECH INC (A)	39.71		0.00	16,000	57.190	915.04
ALEXION PHARM INC. (ALXN)	242.22		0.00	42,000	132.884	5,581.12
ALTRIA GROUP INC (MO)	68.31		0.00	41,000	38.390	1,573.99

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# 2013 Investment Report

January 1, 2013 - December 31, 2013

## Brokerage 648-512257 RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC

Separate Account Manager: PARAMETRIC PORTFOLIO ASSOCIATES - PARAMETRIC / RUSSELL RSA

Holdings (Symbol) as of 12/31	Non-Safety	Performance December 31, 2013	Income Earned	Quantity	Price per Unit	Total Value
AMAZON.COM INC (AMZN)	225.00	0.00	0.00	13,000	398.790	5,184.27
AMERICAN EXPRESS CO (AXP)	232.32	22.77	22.77	59,000	90.730	5,353.07
AMERICAN INTL GROUP INC COM NEW (AIG)	203.83	33.70	33.70	92,000	51.050	4,696.60
AMERICAN TOWER CORPORATION COM USD0.01 (AMT)	86.60	31.64	31.64	25,000	79.820	1,995.50
AMGEN INC (AMGN)	227.75	101.52	101.52	46,000	114.080	5,247.68
APPLE INC (AAPL)	170.44	195.00	195.00	7,000	561.020	3,927.14
APPLIED MATERIALS INC (AMAT)	54.48	7.10	7.10	71,000	17.680	1,255.28
ARCHER DANIELS MIDLAND (ADM)	64.04	6.46	6.46	34,000	43.400	1,475.60
ARM HOLDINGS PLC ADS REP 3 ORD GBP0.05 (ARMH)	85.51	4.25	4.25	36,000	54.731	1,970.31
AVNET INC (AVT)	51.69	4.05	4.05	27,000	44.110	1,190.97
BP PLC ADR (CNV INTO 6 ORD USD0.25 SHS) (BP)	242.61	65.55	65.55	115,000	48.610	5,590.15
BAIDU INC SPONS ADS REPR 0.10 ORD CLS A US0.00005 (BIDU)	77.20	0.00	0.00	10,000	177.880	1,778.80
BAKER HUGHES INC (BHI)	50.36	4.50	4.50	21,000	55.260	1,160.46
BANK OF AMERICA CORP (BAC)	315.57	9.44	9.44	467,000	15.570	7,271.19
BIG LOTS INC (OHIO) (BIG)	53.25	0.00	0.00	38,000	32.290	1,227.02
BIODIAG INC (BIIB)	266.94	0.00	0.00	22,000	279.572	6,150.58
BLACKROCK INC (BLK)	274.70	129.36	129.36	20,000	316.470	6,329.40
BORGWARNER INC (BWA)	77.65	10.00	10.00	32,000	55.910	1,789.12
BRISTOL MYERS SQUIBB (BMY)	53.05	0.00	0.00	23,000	53.150	1,222.45
BROADCOM CORP CL A (BRCM)	59.18	5.94	5.94	46,000	29.645	1,363.67
CBS CORP NEW CL B (CBS)	80.22	20.64	20.64	29,000	63.740	1,848.46
CRH SPON ADR EA REPR 1 ORD SHS EURO.32 (CRH)	83.17	0.00	0.00	75,000	25.550	1,916.25
CVS CAREMARK CORP (CVS)	323.04	176.19	176.19	104,000	71.570	7,443.28
CALPINE CORP COM NEW (CPN)	164.27	0.00	0.00	194,000	19.510	3,784.94
CAPITAL ONE FINANCIAL CORP (COF)	212.79	73.80	73.80	64,000	76.610	4,903.04
CARDINAL HEALTH INC (CAH)	104.38	0.00	0.00	36,000	66.810	2,405.16
CATAMARAN CORP COM NPV ISIN #CA1488671023 SEDOL #B8J4N87 (CTRX)	51.50	0.00	0.00	25,000	47.462	1,186.55
CELGENE CORP (CELG)	513.32	0.00	0.00	70,000	168.968	11,827.76
CERNER CORP (CERN)	67.74	0.00	0.00	28,000	55.740	1,560.72



# 2013 Investment Report

January 1, 2013 - December 31, 2013

## Brokerage 648-512257 RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC

Separate Account Manager: PARAMETRIC PORTFOLIO ASSOCIATES - PARAMETRIC / RUSSELL RSA

Holdings (Symbol) as of 12/31	Non-Safety	Performance December 31, 2013	Income Earned	Quantity	Price per Unit	Total Value
CHESAPEAKE ENERGY CORPORATION	38.87		3.85	33.000	27.140	895.62
OKLAHOMA (CHK)						
CHEVRON CORP NEW (CVX)	92.16		211.30	17.000	124.910	2,123.47
CHIPOTLE MEXICAN GRILL INC (CMG)	46.25		0.00	2.000	532.780	1,065.56
CISCO SYS INC (CSCO)	63.28		39.61	65.000	22.430	1,457.95
CITIGROUP INC COM NEW (C)	104.03		2.32	46.000	52.110	2,397.06
COGNIZANT TECH SOLUTIONS CORP (CTSH)	223.51		0.00	51.000	100.980	5,149.98
COMCAST CORP NEW CL A SPL (CMCSK)	244.62		129.33	113.000	49.880	5,636.44
COMMUNITY HEALTH SYS INC NEW (CYH)	57.95		0.00	34.000	39.270	1,335.18
CONOCOPHILLIPS (COP)	144.11		42.09	47.000	70.650	3,320.55
COSTCO WHOLESALE CORP (COST)	51.65		17.42	10.000	119.020	1,190.20
DANAHER CORP (DHR)	164.17		5.93	49.000	77.200	3,782.80
DELTA AIR LINES INC DEL COM NEW (DAL)	41.73		7.26	35.000	27.470	961.45
DEVON ENERGY CORP NEW (DVN)	75.18		6.16	28.000	61.870	1,732.36
DISNEY WALT CO (DIS)	69.63		0.00	21.000	76.400	1,604.40
DISCOVERY COMMUNICATIONS INC NEW COM SER A (DISCA)	156.97		0.00	40.000	90.420	3,616.80
DOLLAR GENERAL CORP COM USD0.875 (DG)	267.02		0.00	102.000	60.320	6,152.64
DU PONT E I DE NEMOURS & CO (DD)	109.97		17.55	39.000	64.970	2,533.83
E M C CORP MASS (EMC)	128.80		35.20	118.000	25.150	2,967.70
EBAY INC (EBAY)	271.45		0.00	114.000	54.865	6,254.61
ECOLAB INC (ECL)	158.39		52.44	35.000	104.270	3,649.45
ENTERGY CORP NEW (ETR)	85.12		25.73	31.000	63.270	1,961.37
EADS(EURO AERONAUTIC DEFENSE SPACE) UNSPONSORED ADR EACH REPR 1 ORD (EADSY)	181.90		0.00	218.000	19.226	4,191.26
EXELON CORP (EXC)	48.74		12.71	41.000	27.390	1,122.99
FACEBOOK INC COM USD0.000006 CL A (FB)	106.73		0.00	45.000	54.649	2,459.20
FORD MTR CO DEL COM (F)	201.57		133.80	301.000	15.430	4,644.43
GENERAL DYNAMICS CRP (GD)	128.55		22.40	31.000	95.550	2,962.05
GENERAL ELECTRIC CO (GE)	138.68		242.82	114.000	28.030	3,195.42
GENWORTH FINL INC COM CL A (GNW)	70.77		0.00	105.000	15.530	1,630.65
GILEAD SCIENCES INC (GILD)	123.85		0.00	38.000	75.100	2,853.80



# 2013 Investment Report

January 1, 2013 - December 31, 2013

## Brokerage 648-512257 RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC

Separate Account Manager: PARAMETRIC PORTFOLIO ASSOCIATES - PARAMETRIC / RUSSELL RSA

Holdings (Symbol as of 12/31)	Performance		Quantity	Price per Unit	Total Value
	Non-Safety	December 31, 2013			
GOLDMAN SACHS GROUP INC (GS)	230.79	90.00	30,000	177.260	5,317.80
GOOGLE INC CL A (GOOG)	486.39	0.00	10,000	1,120.710	11,207.10
HALLIBURTON CO HOLDING CO FRMLY HALLIBURTON CO (HAL)	158.58	61.69	72,000	50.750	3,654.00
HARTFORD FINL SVCS GROUP INC (HIG)	70.76	0.00	45,000	36.230	1,630.35
HEWLETT-PACKARD CO DE (HPQ)	92.29	0.00	76,000	27.980	2,126.48
HILTON WORLDWIDE HLDGS INC COM USD0.01 (HLT)	52.15	0.00	54,000	22.250	1,201.50
HONEYWELL INTL INC (HON)	384.65	140.82	97,000	91.370	8,862.89
ILLINOIS TOOL WORKS (ITW)	156.91	0.00	43,000	84.080	3,615.44
INTEL CORP (INTC)	152.07	14.63	135,000	25.955	3,503.92
INTUITIVE SURGICAL INC COM NEW (ISRG)	116.68	0.00	7,000	384.080	2,688.56
JPMORGAN CHASE & CO (JPM)	568.52	217.92	224,000	58.480	13,099.52
JOHNSON & JOHNSON (JNJ)	155.03	97.15	39,000	91.590	3,572.01
KAR AUCTION SERVICES INC COM USD0.01 (KAR)	79.51	0.00	62,000	29.550	1,832.10
KBR INC COM (KBR)	52.59	0.00	38,000	31.890	1,211.82
KANSAS CITY SOUTHERN COM (KSU)	26.87	0.00	5,000	123.830	619.15
KENNAMETAL INC (KMT)	72.31	5.76	32,000	52.070	1,666.24
KINDER MORGAN INC DELAWARE COM USD0.01 (KMI)	109.37	289.12	70,000	36.000	2,520.00
KOHL'S CORP (KSS)	66.50	9.45	27,000	56.750	1,532.25
LAS VEGAS SANDS CORP (LVS)	150.61	116.90	44,000	78.870	3,470.28
ESTEE LAUDER COMPANIES INC CL A (EL)	192.86	52.12	59,000	75.320	4,443.88
LINKEDIN CORP COM USD0.0001 (LNKD)	47.05	0.00	5,000	216.830	1,084.15
LOEWS CORP (L)	152.83	4.56	73,000	48.240	3,521.52
LOWES COMPANIES (LOW)	172.04	66.38	80,000	49.550	3,964.00
MARATHON OIL CORP ISIN #US5658491064 SEDOL #2910970 (MRO)	140.95	17.48	92,000	35.300	3,247.60
MASTERCARD INC CL A (MA)	253.81	31.20	7,000	835.460	5,848.22
MCKESSON CORP (MCK)	35.02	2.60	5,000	161.400	807.00
MEDTRONIC INC (MDT)	166.88	24.36	67,000	57.390	3,845.13
MERCK & CO INC NEW COM (MRK)	134.67	63.21	62,000	50.050	3,103.10
METLIFE INC COM (MET)	297.20	134.71	127,000	53.920	6,847.84



# 2013 Investment Report

January 1, 2013 - December 31, 2013

## Brokerage 648-512257 RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC

Separate Account Manager: PARAMETRIC PORTFOLIO ASSOCIATES - PARAMETRIC / RUSSELL RSA

Holdings (Symbol) as of 12/31	Performance		Quantity	Price per Unit	Total Value
	Non-Safety	December 31, 2013			
MICROSOFT CORP (MSFT)	241.92	31.92	149,000	37.410	5,574.09
MONSANTO CO NEW (MON)	379.37	150.68	75,000	116.550	8,741.25
MONSTER BEVERAGE CORP USD0.005	117.65	0.00	40,000	67.770	2,710.80
ISIN #US6117401017 SEDOL #B6X2H81 (MNST)					
MORGAN STANLEY (MS)	93.91	14.50	69,000	31.360	2,163.84
NEWMONT MNG CORP HLDG CO (NEM)	17.99	3.60	18,000	23.030	414.54
NIKE INC CLASS B (NIKE)	92.15	5.25	27,000	78.640	2,123.28
NOBLE ENERGY INC COM (NBL)	62.08	6.86	21,000	68.110	1,430.31
NORFOLK SOUTHERN CRP (NSC)	56.40	7.28	14,000	92.830	1,299.62
OCCIDENTAL PETROLEUM CORP (OXY)	115.57	0.00	28,000	95.100	2,662.80
ONEOK INC (OKE)	18.89	8.36	7,000	62.180	435.26
ORACLE CORPORATION (ORCL)	114.57	24.00	69,000	38.260	2,639.94
PNC FINL SVCS GROUP (PNC)	232.32	37.40	69,000	77.580	5,353.02
PFIZER INC (PFE)	154.20	27.84	116,000	30.630	3,553.08
PHILIP MORRIS INTL INC COM (PM)	132.35	0.00	35,000	87.130	3,049.55
PHILLIPS 66 COM (PSX)	251.06	27.30	75,000	77.130	5,784.75
PRAXAIR INC (PX)	158.01	91.80	28,000	130.030	3,640.84
PRECISION CASTPARTS CORP (PCP)	245.44	4.17	21,000	269.300	5,655.30
PRICELINE COM INC COM NEW (PCLN)	353.14	0.00	7,000	1,162.400	8,136.80
QUALCOMM INC (QCOM)	83.78	52.30	26,000	74.250	1,930.50
RALPH LAUREN CORP COM USD0.01 CLASS A (RL)	53.64	16.40	7,000	176.570	1,235.99
RANGE RESOURCES CORP (RRC)	62.20	3.60	17,000	84.310	1,433.27
RAYTHEON CO COM NEW (RTN)	165.33	13.75	42,000	90.700	3,809.40
REALOGY HLDGS CORP COM USD0.01 (RLGY)	184.64	0.00	86,000	49.470	4,254.42
REGENERON PHARMACEUTICALS INC (REGN)	59.73	0.00	5,000	275.240	1,376.20
RIO TINTO ADR EACH REP 1 ORD (RIO)	63.68	0.00	26,000	56.430	1,467.18
ROSS STORES INC (ROST)	61.79	16.49	19,000	74.930	1,423.67
SBA COMMUNICATIONS CPRP CL A (SBAC)	70.18	0.00	18,000	89.840	1,617.12
SALESFORCE COM INC (CRM)	158.09	0.00	66,000	55.190	3,642.54
SCHLUMBERGER LIMITED COM USD0.01 (SLB)	86.04	41.41	22,000	90.110	1,982.42
SCHWAB CHARLES CORP NEW (SCHW)	41.75	1.62	37,000	26.000	962.00
SERVICENOW INC COM USD0.001 (NOW)	41.32	0.00	17,000	56.010	952.17



# 2013 Investment Report

January 1, 2013 - December 31, 2013

## Brokerage 648-512257 RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC

Separate Account Manager: PARAMETRIC PORTFOLIO ASSOCIATES - PARAMETRIC / RUSSELL RSA

Holdings (Symbol as of 12/31)	Performance		Quantity	Price per Unit	Total Value
	Non-Safety	December 31, 2013			
SOUTHWEST AIRLINS CO (LUV)	88.31	0.00	108,000	18,840	2,034.72
STANLEY BLACK & DECKER INC COM	45.53	6.50	13,000	80,690	1,048.97
USD2.50 (SWK)					
STARBUCKS CORP (SBUX)	149.69	78.08	44,000	78,390	3,449.16
STATE STREET CORP (STT)	175.18	11.22	55,000	73,390	4,036.45
SWATCH GROUP AGADR (SWGAY)	90.62	0.00	63,000	33,142	2,087.94
TJX COMPANIES INC (TJX)	91.27	38.00	33,000	63,730	2,103.09
TRW AUTOMOTIVE HLDGS CORP (TRW)	45.20	0.00	14,000	74,390	1,041.46
TARGET CORP (TGT)	120.82	25.40	44,000	63,270	2,783.88
TENCENT HLDGS LIMITED UNSP ADR	227.01	15.33	82,000	63,789	5,230.69
EACH REP 1 ORD (TCEHY)					
TEREX CORP NEW (TEX)	78.36	2.15	43,000	41,990	1,805.57
TEVA PHARMACEUTICAL INDUSTRIES ADR-EACH	194.82	21.88	112,000	40,080	4,488.96
GNV INTO 1 ORD ILS0.10 (TEVA)					
TEXTRON INC (TXT)	51.05	0.52	32,000	36,760	1,176.32
THERMO FISHER SCIENTIFIC INC (TMO)	169.14	38.70	35,000	111,350	3,897.25
TIME WARNER INC NEW COM NEW (TWX)	169.45	58.08	56,000	69,720	3,904.32
TWENTY-FIRST CENTY FOX INC CL A (FOXA)	114.48	13.38	75,000	35,170	2,637.75
ULTA SALON COSMETICS &	46.08	0.00	11,000	96,520	1,061.72
FRAGRANCE INC COM (ULTA)					
ULTRA PETROLEUM CORP COM NPV (UPL)	46.04	0.00	49,000	21,650	1,060.85
UNION PACIFIC CORP (UNP)	226.03	202.96	31,000	168,000	5,208.00
UNITED TECHNOLOGIES CORP (UTX)	217.31	197.17	44,000	113,800	5,007.20
UNITEDHEALTH GROUP (UNH)	160.13	112.86	49,000	75,300	3,689.70
VERIZON COMMUNICATIONS (VZ)	140.76	103.79	66,000	49,140	3,243.24
VISA INC COM CL A (V)	396.24	79.97	41,000	222,680	9,129.88
WALGREEN COMPANY (WAG)	137.11	17.33	55,000	57,440	3,159.20
WELLPOINT INC (WLP)	164.40	33.38	41,000	92,390	3,787.99
WELLS FARGO & CO NEW (WFC)	437.42	283.75	222,000	45,400	10,078.80
WHOLE FOODS MKT INC (WFM)	17.57	2.90	7,000	57,830	404.81
WORKDAY INC COM USD0.001 (WDAY)	7.22	0.00	2,000	83,160	166.32
WYNDHAM WORLDWIDE CORP COM (WYN)	166.30	91.64	52,000	73,690	3,831.88
WYNN RESORTS LTD (WYNN)	227.58	115.00	27,000	194,210	5,243.67



**2013 Investment Report**

January 1, 2013 - December 31, 2013

**Brokerage 648-512257** RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC  
 Separate Account Manager: PARAMETRIC PORTFOLIO ASSOCIATES - PARAMETRIC / RUSSELL RSA

Holdings (Symbol) as of 12/31	Performance		Quantity	Price per Unit	Total Value
	Non-Safety	December 31, 2013			
YUM BRANDS INC (YUM)	147.67	93.56	45,000	75.610	3,402.45
ZOETIS INC COM USD0.01 CL A (ZTS)	72.36	10.48	51,000	32.690	1,667.19
<b>Core Account</b>					
FIDELITY CASH RESERVES (FDRXX)	580.19	1.43	13,368.440	1.000	13,368.44
<b>Total Market Value as of December 31, 2013</b>	23,760.46				<b>\$547,476.03</b>
Total income earned on positions no longer held		1,312.45			
<b>2013 Income Earned</b>		<b>\$ 7,516.76</b>			

All positions held in cash account unless indicated otherwise.





# 2013 Investment Report

January 1, 2013 - December 31, 2013

**Brokerage 648-512257** RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC  
 Separate Account Manager: PARAMETRIC PORTFOLIO ASSOCIATES - PARAMETRIC / RUSSELL RSA

## Transaction Details of Core Account

Core Account - Fidelity Cash Reserves		Amount	Balance	Description	Amount	Balance
Description						
Beginning			\$12,022.32	Other disbursements	-63.63	
Securities bought		-\$461,844.66		Core account income	1.43	
Securities sold		610,399.75		Income	7,477.32	
Exchanges out		-150,000.00		Account fees and charges	-4,735.94	
Other additions		111.85		Ending		\$13,368.44

**Brokerage 646-758248** RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC

2013 Account Summary		Income Summary
Beginning value as of Jan 1	\$5,665,263.15	\$206,571.80
Withdrawals	-1,100,000.00	
Transaction costs, loads and fees	-531.74	
Net adjustments	19,595.62	
Change in investment value	471,046.76	
<b>Ending value as of Dec 31</b>	<b>\$5,055,373.79</b>	<b>\$206,571.80</b>

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 800-544-6666. Brokerage Accounts carried with National Financial Services LLC, Member NYSE, SIPC

Holdings (Symbol) as of 12/31	Non-Safety	Performance December 31, 2013		Quantity	Price per Unit	Total Value
		Income Earned	Total Value			
<b>Stocks</b>						
ISHARES MSCI EAFE ETF (EFA)	14,291.32	\$9,794.57	\$329,293.13	4,907.864	\$67.095	\$329,293.13
ISHARES RUSSELL 1000 ETF (IWB)	14,240.92	6,848.26	328,131.87	3,180.497	103.170	328,131.87
ISHARES MSCI EAFE SMALL-CAP ETF (SCZ)	6,202.61	3,715.76	142,917.38	2,803.401	50.980	142,917.38
WISDOMTREE TRE EMERGING MKTS SMALLCAP DIVID FD (DGS)	5,322.01	4,495.66	122,626.96	2,660.598	46.090	122,626.96



# 2013 Investment Report

January 1, 2013 - December 31, 2013

## Brokerage 646-758248 RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC

Holdings (Symbol) as of 12/31	Non-Safety	Performance December 31, 2013	Income Earned	Quantity	Price per Unit	Total Value
<b>Short-term Bonds</b>						
JP MORGAN CHASE BANK NA 0.00000% 10/16/2014 ZERO COUPON AT MATURITY CUSIP: 48126NWT0	5,308.95		0.00	124,000.000	98.650	122,326.00
<b>Stock Funds</b>						
RUSSELL GLOBAL EQUITY CLASS S (RGESX )	17,166.37		9,124.44	34,605.285	11.430	395,538.40
RUSSELL US SMALL CAP EQUITY CLASS I (REBSX )	11,442.62		34,249.20	8,504.994	31.000	263,654.81
RUSSELL EMERGING MARKETS S (REMSX )	8,744.63		7,310.32	11,206.300	17.980	201,489.27
RUSSELL GLOBAL INFRASTRUCTURE CL S (RGISX )	9,061.63		15,690.51	17,724.384	11.780	208,793.24
<b>Bond Funds</b>						
PIMCO HIGH YIELD INSTL (PHIYX )*	8,744.57		12,422.30	20,966.475	9.610	201,487.82
PIMCO EMERGING MRKTS FULL SPECTRUM BOND I (PFSIX )*	16,745.38		10,837.76	43,303.965	8.910	385,838.32
RUSSELL SHORT DURATION BOND CL S (RFBSX )	7,664.31		6,166.46	9,126.466	19.350	176,597.11
<b>Blended Funds</b>						
PIMCO ALL ASSET ALL AUTHORITY-INSTIT CL (PAUIX )	21,426.26		29,021.35	49,867.947	9.900	493,692.67
<b>Non-Classified</b>						
AGR MANAGED FUTURES FUND CL I (AQMIX )	9,385.12		2,170.48	20,419.935	10.590	216,247.11
PIMCO COMMODITY REAL RETURN INST (PCRIX )	5,530.12		4,101.35	23,209.875	5.490	127,422.21
RUSSELL STRATEGIC CALL OVERWRITING FD S (ROWSX )	11,323.33		3,369.40	23,590.083	11.060	260,906.31
RUSSELL GLOBAL REAL ESTATE SECURITIES S (RESX )	8,657.18		20,804.20	5,471.045	36.460	199,474.30
STONE RIDGE REINSRNC RSK PREM I (SREIX )	9,527.52		7,404.98	21,501.278	10.210	219,528.04
STONE RIDGE HIGH YLD REINSRNC RSK PREM I (SHRIX )	3,833.70		3,776.48	8,643.268	10.220	88,334.19
STONERIDGE US MASTER VARIANCE RISK PREM I (VRPIX )	10,448.13		6,432.15	22,689.951	10.610	240,740.38
STONERIDGE REINSURAC RISK PREM INTERVAL (SRRIX )	8,880.21		0.00	20,481.800	9.990	204,613.18
<b>Core Account</b>						
FIDELITY CASH RESERVES (FDRXX )	5,456.30	7-day yield: 0.01%	9.44	125,721.090	1.000	125,721.09



# 2013 Investment Report

January 1, 2013 - December 31, 2013

**Brokerage** 646-758248 RUSTY REA AND SCOTT NELSON - TRUSTEES - INSURANCE AND BENEFITS TRUST OF PORAC

Holdings (Symbol) as of 12/31	Non-Safety	Performance December 31, 2013	Income Earned	Quantity	Price per Unit	Total Value
Total Market Value as of December 31, 2013	219,403.22					\$5,055,373.79
Total income earned on positions no longer held			8,826.73			
<b>2013 Income Earned</b>			<b>\$ 206,571.80</b>			

All positions held in cash account unless indicated otherwise.

\* This statement does not reflect the distribution for this fund that was declared in December and is payable in January. As a result, the total value of this fund may appear lower than you expected. Please be assured that the distribution has been correctly credited to your account and the distribution will be reported on your next statement.

## Transaction Details of Core Account

### Core Account - Fidelity Cash Reserves

Description	Amount	Balance	Description	Amount	Balance
Beginning		\$70,793.92	Income	206,685.04	
Securities bought	-\$3,919,144.33		Other withdrawals	-1,100,000.00	
Securities sold	4,867,477.02		Account fees and charges	-100.00	
Core account income	9.44		Ending		\$125,721.09

## Additional Information About Your Annual Investment Report

The accounts on this Annual Investment Report are registered to:

INSURANCE AND BENEFITS TRUST

4010 TRUXEL RD

SACRAMENTO CA 95834-3725

Summary Annual Report  
For the  
INSURANCE AND BENEFITS TRUST OF THE PEACE OFFICERS RESEARCH  
ASSOCIATION OF CALIFORNIA NON-SAFETY

This is a summary of the annual report for the INSURANCE AND BENEFITS TRUST OF THE PEACE OFFICERS RESEARCH ASSOCIATION OF CALIFORNIA NON-SAFETY, (Employer Identification No 68-6068469, Plan No. 502) for the period beginning January 1, 2013 and ending December 31, 2013.

The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

**SELF-FUNDED BENEFIT INFORMATION**

The Trust maintains long term disability and death benefits under a self-funded program.

**INSURANCE INFORMATION**

The following brief description of the Trust benefits are provided for general information purposes only. Participants should refer to the Trust document for more complete information.

The Trust has contracts with AFLAC to pay life insurance claims and with ING/Reliastar Insurance Company for life insurance and AD&D. The total insurance premiums charged to the Trust for the year ended December 31, 2013 were \$14,557.

**BASIC FINANCIAL STATEMENT**

The value of Trust assets, after subtracting liabilities of the Trust, was \$214,184 as of December 31, 2013 compared to \$0 as of January 1, 2013. During the Trust year the Trust experienced an increase in its net assets of \$44,978. In addition, based upon the Trust separating into two plans, \$169,206 was transferred from the Insurance and Benefits Trust of the Peace Officers Research Association Safety Plan. This increase includes unrealized appreciation or depreciation in the value of Trust assets; that is, the difference between the value of the Trust's assets at the end of the year and the value of the assets at the beginning of the year, or the cost of assets acquired during the year.

The Trust had total income of \$311,922. This income included participant contributions of \$211,454, gains on investments of \$29,426, and other income of \$71,042.

Benefits under the Trust are provided by the trust and insurance. Trust expenses were \$266,944. These expenses included \$55,026 in operating expenses, \$10,255 in professional expenses, \$1,061 in investment expenses, \$186,045 in benefits paid directly to participants and beneficiaries, and \$14,557 in insurance premiums charged by insurance companies and a health maintenance organization.

Benefits and eligibility rules will change from time to time. Be sure to use the most recent Trust booklet and to read any special notices about your coverage. Do not rely on outdated information. If you lost your coverage you may be entitled to continue it by making self payments. Consult your booklet or the Trust office for details.

### **YOUR RIGHTS TO ADDITIONAL INFORMATION**

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. An accountant's report;
2. Assets held for investments;
4. Insurance information including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the office of the Board of Trustees, Insurance and Benefit Trust Fund of the Peace Officers Research Association of California, 4010 Truxel Rd, Sacramento, CA 95834. The charge to cover copying costs will be \$.25 per page for any part thereof.

You also have the right to receive from the Contract Administrator, on request and at no charge, a statement of the assets and liabilities of the Plan and accompanying notes, or a statement of income and expenses of the Plan and accompanying notes, or both. If you request a copy of the full annual report from the Contract Administrator, these two statements and accompanying notes will be included as part of that report. The charge to cover copying costs given above does not include a charge for the copying of these portions of the report because these portions are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the Plan, 4010 Truxel Rd, Sacramento, CA 95834, and at the U.S. Department of Labor in Washington, D.C. or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, N-1513, Employee Benefit Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

### **BOARD OF TRUSTEES**