Briefly describe the organization's mission or most significant activities

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

DLN: 93493128009844 OMB No 1545-0047

Open to Public Inspectio<u>n</u>

Department of the Treasury Internal Revenue Service

foundations) ▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS

generally cannot redact the information on the form

▶ Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

A For the 2013 calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31-2013 C Name of organization FLAG CREDIT UNION D Employer identification number B Check if applicable Address change 59-0992912 Doing Business As Name change Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite 3115 CONNER BLVD E Telephone number Terminated (850)488-6781 City or town, state or province, country, and ZIP or foreign postal code TALLAHASSEE, FL 323113813 Amended return Application pending G Gross receipts \$ 2,103,656 Name and address of principal officer **H(a)** Is this a group return for SUE MASSA subordinates? ┌ Yes 🗸 No 3115 CONNER BLVD TALLAHASSEE, FL 323113813 **H(b)** Are all subordinates included? If "No," attach a list (see instructions) Website: ► WWW FLAGCU COM H(c) Group exemption number ▶ L Year of formation 1960 M State of legal domicile FL Part I Summary

TO BUILD A PERMANENT RELATIONSHIP WITH OUR MEMBERS BY PROVIDING SECURE FINANCIAL OPPORTUNITIES

nce L		WITH SUPERIOR PRODUCTS AND SERVICES DELIVERED BY FRIEND	LYAND	KNOWLEDGEABLE	OFFIC	ALS AND STAFF
Governance	,	Check this box ► if the organization discontinued its operations or disp	osed of	more than 25% of its	net as	sets
ŝ	-	check this box Fig. if the organization discontinued its operations of disp	0364 01	more than 25 % or its	inct as	3003
	3	Number of voting members of the governing body (Part VI, line 1a)			3	9
Activities &	4	Number of independent voting members of the governing body (Part VI, Ii	ne 1b)		4	<u> </u>
₹	5	Total number of individuals employed in calendar year 2013 (Part V, line	2a) .		5	22
4	6	Total number of volunteers (estimate if necessary)			6	21
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 .			7a	2,165
	Ь	Net unrelated business taxable income from Form 990-T, line 34 $$. $$.			7b	
				Prior Year		Current Year
	8	Contributions and grants (Part VIII, line 1h)				C
를	9	Program service revenue (Part VIII, line 2g)	2,176,	297	2,032,162	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		54,	951	71,490
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e	≘)			C
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (, 12)	2,231,	248	2,103,652	
	13	Grants and similar amounts paid (Part IX, column (A), lines $1-3$) .				C
	14	Benefits paid to or for members (Part IX, column (A), line 4)			C	
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), $5-10$)	729,	215	762,391	
<u>8</u>	16a	Professional fundraising fees (Part IX, column (A), line 11e)				C
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25) 🛌				
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,189,	209	1,325,673
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line	25)	1,918,	424	2,088,064
	19	Revenue less expenses Subtract line 18 from line 12		312,	824	15,588
Not Assets or Fund Balances				Beginning of Curre Year	nt	End of Year
38. E. E. E.	20	Total assets (Part X, line 16)		36,296,	607	37,465,021
4 B	21	Total liabilities (Part X, line 26)		32,952,	721	34,075,130
žĒ	22	Net assets or fund balances Subtract line 21 from line 20		3,343,	886	3,389,891
Pai	t II					

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

	**	****								
Sign										
Here AMY GREEN CHIEF FINANCIAL OFFICER										
Type or print name and title										
		Print/Type preparer's name	Preparer's signature							
Paid										
raiu		Firm's name FLAG CREDIT UNION								
Prepare	r	Time F 1810 CRESTI SHION								
Use Onl		Firm's address ► 3115 CONNER BLVD								

May the IRS discuss this return with the preparer shown above? (see instruction

TALLAHASSEE, FL 32311

Form	990 (2013)					Page 2
Par		t of Program Servic edule O contains a respo				
1	•	organization's mission T RELATIONSHIP WITH	OUR MEMBERS E	SY PROVIDING SEC	CURE FINANCIAL OPPORTU	NITIES WITH
					EABLE OFFICIALS AND STA	
2		undertake any significa or 990-EZ?			ich were not listed on	「Yes ✓ No
	•	nese new services on Sc				,
3	-	cease conducting, or m	ake sıgnıfıcant chai	nges ın how ıt condu	icts, any program	┌ Yes ┌ No
	If "Yes," describe th	nese changes on Schedu	le O			
4	expenses Section 5		organizations are r	equired to report the	largest program services, as e amount of grants and allocat	
4a	(Code) (Expenses \$	107,528 includ	ling grants of \$) (Revenue \$)
		NIONS ARE NOT-FOR-PROFIT FARNINGS ARE RETURNED TO			S, CHECKING, MONEY MARKET, IRA REST ON DEPOSITS	AND CERTIFICATE OF
	(Code) (Expenses \$	180,603 includ	ling grants of \$) (Revenue \$)
	LOAN SERVICING - FLA THAT MEET THE NEEDS	G CREDIT UNION OFFERS A V	VIDE VARIETY OF LOAN CLUDES AUTO, BOAT, R	PRODUCTS WITH LOWE	R INTEREST RATES THAN OTHER FIN EQUIPMENT, FIRST AND SECOND M	
	(Code) (Expenses \$	107,980 includ	ling grants of \$) (Revenue \$)
	BANKING, SHARED BRA	ANCHING AND ATMS IT IS IM	PORTANT THAT OUR ME	MBERS BE ABLE TO HAN	NTS THROUGH DEBIT CARDS, AUDIC DLE THEIR REQUESTS EFFICIENTLY BILL PAYMENTS AND RECEIVE E-STA	THROUGH THE USE OF
	Other program ser	vices (Describe in Sche	dule O)			
ТМ	(Expenses \$,	ding grants of \$) (Revenue \$)

396,111

Total program service expenses ►

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 😼	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $X^{f color}$	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{2}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J </i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		N o
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2013)

(:	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		· ·	 No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 870		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c		Νo
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ริส	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		.,,
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
5a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	.		
L	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	1		
la	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	Check if Schedule O	contains a response of	or note to any	line in this F	art V I													.[▽
---	---------------------	------------------------	----------------	----------------	---------	--	--	--	--	--	--	--	--	--	--	--	--	-----

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	-		
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		Νo
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se		16b		
Se 17	organization's exempt status with respect to such arrangements?	16b		

- Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►FLAG CREDIT UNION 3115 CONNER BLVD
 TALLAHASSEE,FL 32311 (850) 488-6781

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot ect	not box h ar or/tr	chec (, unle n offic	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) RAYMOND GEIGER	1 50	х						0	0	0
BOARD CHAIRP								Ŭ		
(2) THOMAS JAMES BOARD VICE C	1 25	х						0	0	0
(3) CAROL KILGORE	1 25									
BOARD SECRET		X						0	0	0
(4) ERIC SESPICO	1 25	х						0	0	0
BOARD TREASU								· ·	0	0
(5) JAMES R KELLY	1 00	x						0	0	0
BOARD MEMBER								Ů		
(6) DALE DUBBERLY	1 00	×						0	0	0
BOARD MEMBER										
(7) THOMAS PLEAS STRICKLAND	1 00	x						0	0	0
BOARD MEMBER (8) MONIQUE BATCHELOR				_						
	1 00	x						0	0	0
BOARD MEMBER (9) AMY TOPOL	1 00	-								
	1 00	x						0	0	0
BOARD MEMBER (10) SUE MASSA	40 00	-								
	10 00			х				89,461	0	11,470
PRESIDENT/CE										
							-			
							<u></u>			

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours	more t	tion (han d n is	ne l both	box, an d	heck unless officer stee)	1	(E Repor comper from organiza	table sation the tion (W-	(E) Reportable compensation from related organizations (W	<u>.</u> '	(F) Estima mount o compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
												+		
												+		
1b	Sub-Total		· ·	•				<u>+</u>				1		
c d	Total (add lines 1b and 1c) .				٠.	٠.	•	•		89,461				11,470
2	Total number of individuals (in \$100,000 of reportable compe	cluding but not	limited	to the	se			e) wl	ho receive	d more th	nan			
													Yes	No
3	Did the organization list any f oon line 1a? <i>If "Yes," complete S</i>				-	key •	emplo	yee,	or highes	t compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual													
5	Did any person listed on line 1								_	anızatıon	or individual for	4		No_
	services rendered to the organ	nization? <i>If "Yes</i>	," compl	ete S	chea	ule J	forsu	ch pe	erson .			5		No
	ction B. Independent Co			لمسا		ا ما ما					th t100 000			
1	Complete this table for your five compensation from the organization from the organizati	zation Report co												
	N	(A) lame and business	address							Des	cription of services		(C Comper	
												\top		
												_		
	Fotal number of independent col \$100,000 of compensation fron			not	lımıt	ed to	o those	lıst	ed above)	who rece	ıved more than			

Form 99						Page 9
Part \	/ 	Statement of Revenue Check if Schedule O contains a response or note to any lin	ne in this Part VIII			
		The continue of contains a response or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s &	1a	Federated campaigns 1a				
Gifts, Grants ilar Amounts	b	Membership dues 1b				
وَ قُوْ	С	Fundraising events 1c				
iffs ar /	d	Related organizations 1d				
s, G mil	е	Government grants (contributions)				
ution ier Si	f	All other contributions, gifts, grants, and similar amounts not included above				
Contributions, Giffs, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f				
<u>تة</u>	h	P-				
≘	22	INTEREST FROM LOANS 522100	4 420 042	4 420 042		
aver	2a b	INTEREST FROM LOANS 522100 FEES AND CHARGES 522100	1,428,943 381,877	1,428,943 381,877		1
å≛ ov	C	MISC OPERATING INC/OTHER 522100	221,342	221,342		
ř	d	322100	221,342	221,342		1
å =	е					1
Program Service Revenue	f	All other program service revenue				
	g	Total. Add lines 2a-2f	2,032,162			
	3	Investment income (including dividends, interest, and other similar amounts)	71,494	71,494		
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(I) Real (II) Personal				
	6a	Gross rents Less rental				
		expenses Rental income				
	c	or (loss)				
	d	Net rental income or (loss)				
	7a	Gross amount (1) Securities (11) Other				
		from sales of assets other				
	b	than inventory Less cost or				
		other basis and 4 sales expenses				
	С	Gain or (loss) -4				
	d	Net gain or (loss)	-4	-4		
ne	8a	Gross income from fundraising events (not including \$				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18				
<u>.</u>	١.	a				
듩		Less direct expenses b Net income or (loss) from fundraising events ▶				
_		Gross income from gaming activities				
		See Part IV, line 19				
		a				
		Less direct expenses b Net income or (loss) from gaming activities ▶				
		Gross sales of inventory, less				
		returns and allowances .				
	h	a l				
		Less cost of goods sold b Net income or (loss) from sales of inventory b				
	Ė	Miscellaneous Revenue Business Code				
	11a					
	ь					
	С					
	d	All other revenue				
	е	Total. Add lines 11a-11d ▶				
	12	Total revenue. See Instructions ▶	2,103,652	2,103,652		

Part IX Statement of Functional Expenses

section 501(c)(3) and 501(c)(4)) organizations must complete all colur	nns. All other organizations must com	plete column (A)

	. , , , , , , , , , , , , , , , , , , ,			()	
	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21			, g	
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	100,931			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	477,545			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	50,647			
9	Other employee benefits	89,916			
10	Payroll taxes	43,352			
11	Fees for services (non-employees)				
а	Management				
b	Legal	27,354			
C	Accounting	12,520			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	119,641			
12	Advertising and promotion	53,766			
13	Office expenses	141,318			
14	Information technology	104,849			
15	Royalties				
16	Occupancy	5,529			
17	Travel	11,524			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	21,180			
20	Interest	107,528			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	72,966			
23	Insurance	46,876			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	PROVISION FOR LOAN LOSSES	262,302			
b	LOAN SERVICING EXPENSE	180,603			
c	ATM & DEBIT CARD EXPENSES	107,980			
d	OTHER EXPENSE	26,694			
е	All other expenses	23,043			
25	Total functional expenses. Add lines 1 through 24e	2,088,064	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2013) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash-non-interest-bearing 220,349 187,693 1 1 6.794.845 8,497,169 2 2 Savings and temporary cash investments 3 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets 6 22,508,787 7 21,981,240 8 8 9 62,743 9 67,743 10a Land, buildings, and equipment cost or other basis Complete 1,576,557 10a Part VI of Schedule D 1,076,794 h Less accumulated depreciation 10b 554,733 10c 499,763 11 11 12 12 Investments—other securities See Part IV, line 11 13 5,656,000 13 5,789,000 Investments—program-related See Part IV, line 11 14 14 499,150 442,413 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 36,296,607 16 37,465,021 894,419 619,099 **17 17** 18 18 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 32,333,622 25 33, 180, 711 26 32,952,721 34,075,130 26 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ ┌ and complete Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34. ŏ 30 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 3,343,886 32 32 3,389,891 Retained earnings, endowment, accumulated income, or other funds ğ

Total liabilities and net assets/fund balances

33

3,389,891

37,465,021

3,343,886

36,296,607

33

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
	Check it Schedule of Contains a response of note to any line in this Part XI	· ·	•		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,1	103,652
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,0	088,064
3	Revenue less expenses Subtract line 2 from line 1	3			15,588
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3,3	343,886
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			30,417
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,389,89		
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 「
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis			1	
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	<u> </u>
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis			1	
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1		1:	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	9	За		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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DLN: 93493128009844

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

anan	Acvenide Gelvice				Inspec	GIOII
	ne of the organization CREDIT UNION			ployer identifica 0992912	tion numbe	er
Par	Organizations Maintaining Donor Adviorganization answered "Yes" to Form 990,				. Comple	te if the
		(a) Donor advised funds		(b) Funds and	other accou	ınts
	Total number at end of year					
	Aggregate contributions to (during year)					
	Aggregate grants from (during year)					
	Aggregate value at end of year					
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the organization $\frac{1}{2}$	_	nor adv	ised	┌ Yes	┌ No
	Did the organization inform all grantees, donors, and dor used only for charitable purposes and not for the benefit conferring impermissible private benefit?				┌ Yes	┌ No
ar	t III Conservation Easements. Complete if t	he organization answered "Yes"	to Forr	m 990, Part I\	/, line 7.	
	Purpose(s) of conservation easements held by the organ Preservation of land for public use (e g , recreation of Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a conservation of the organization held a conservation or the organization or the organization held a conservation or the organization or the organization held a conservation or the organization or t	Preservation of a	certifie	ed historic struc	ture	
	easement on the last day of the tax year	quaimed conservation contribution in	the lon	iii oi a conseiva	LIOII	
				Held at the	End of the	Year
	Total number of conservation easements		2a			
	Total acreage restricted by conservation easements		2b			
	Number of conservation easements on a certified history	ıc structure ıncluded ın (a)	2c			
	Number of conservation easements included in (c) acqu historic structure listed in the National Register	ired after 8/17/06, and not on a	2d			
	Number of conservation easements modified, transferred the tax year ▶	d, released, extinguished, or terminat	ed by t	he organization	during	
	Number of states where property subject to conservatio	n easement is located ►				
	Does the organization have a written policy regarding th enforcement of the conservation easements it holds?	e periodic monitoring, inspection, har	ndling o	f violations, and	┌ Yes	┌ No
	Staff and volunteer hours devoted to monitoring, inspect	ting, and enforcing conservation ease	ments	during the year		
	Amount of expenses incurred in monitoring, inspecting, \$\rightarrow\$\$	and enforcing conservation easement	ts durın	g the year		
	Does each conservation easement reported on line 2(d) and section $170(h)(4)(B)(II)$?	above satisfy the requirements of se	ction 1	70(h)(4)(B)(ı)	☐ Yes	┌ No
	In Part XIII, describe how the organization reports consbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the organization's financia				
ri	Organizations Maintaining Collections Complete if the organization answered "Ye		or Ot	her Similar	Assets.	
	If the organization elected, as permitted under SFAS 11 works of art, historical treasures, or other similar assets service, provide, in Part XIII, the text of the footnote to	6 (ASC 958), not to report in its reve s held for public exhibition, education,	or rese	earch in furthera		
	If the organization elected, as permitted under SFAS 11 works of art, historical treasures, or other similar assets service, provide the following amounts relating to these	s held for public exhibition, education,				lıc
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X					
	If the organization received or held works of art, historic following amounts required to be reported under SFAS 1					
	Revenues included in Form 990, Part VIII, line 1			> \$		
,	Accets included in Form 990 Part V			b ¢		

Part	Organizations Maintaining Collections of I	Art, His	tori	<u>cal Trea</u>	sures, or (Othe	<u>r Similar Asse</u>	ts (continued)
3	Using the organization's acquisition, accession, and other recollection items (check all that apply)	cords, ch	neck	any of the 1	following that	are a	significant use of	its
а	Public exhibition	d	Γ	Loan or e	xchange prog	rams		
b	Scholarly research	e	Γ	Other				
c	Preservation for future generations							
4	Provide a description of the organization's collections and ex Part XIII	kplaın hov	v the	y further th	ne organizatio	n's ex	empt purpose ın	
5	During the year, did the organization solicit or receive donat							_
Doe	assets to be sold to raise funds rather than to be maintained	-					<u> </u>	Yes No
Раг	Escrow and Custodial Arrangements. Com Part IV, line 9, or reported an amount on Form					eu r	es to Form 990),
1a	Is the organization an agent, trustee, custodian or other inte included on Form 990, Part X?					sets r		Yes No
b	If "Yes," explain the arrangement in Part XIII and complete	the follov	ving t	able				
							Amou	ınt
C	Beginning balance					1c		
d	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on Form 990, Part X,	, line 21?					Г	Yes No
b	If "Yes," explain the arrangement in Part XIII Check here if	the expl	anatı	on has bee	n provided in	Part :	XIII	<u> Г</u>
Pai	rt V Endowment Funds. Complete if the organiza							
1-	Beginning of year balance	(b))Prior	year b (c)Two years bac	k (d)	Three years back (e)Four years back
1a b	Contributions					+		
C	Net investment earnings, gains, and losses					+		
						_		
d	Grants or scholarships					4		
e	Other expenditures for facilities and programs							
f	Administrative expenses					+-		
g	End of year balance							
2	Provide the estimated percentage of the current year end ba	lance (lın	e 1g	, column (a	i)) held as			
а	Board designated or quasi-endowment 🕨							
b	Permanent endowment 🕨							
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100%							
3 a	Are there endowment funds not in the possession of the orga	nızatıon '	that	are held an	d administere	d for	the	
	organization by (i) unrelated organizations						3a(i)	Yes No
	(ii) related organizations						3a(ii)	
b	If "Yes" to 3a(II), are the related organizations listed as requ		chec	lule R? .			3b	
4	Describe in Part XIII the intended uses of the organization's	endowm	ent f	unds				
Par	Land, Buildings, and Equipment. Complete	ıf the o	rgan	ızatıon ar	nswered 'Ye	s' to	Form 990, Part	IV, line
	11a. See Form 990, Part X, line 10. Description of property) Cost or oth			(c) Accumulated depreciation	(d) Book value
12	and	_	+					
	-anu				70	0,830	485,080	305,750
. ح	Leasehold Improvements				7,3	3,330	403,000	303,730
c I					1			
	Equipment				78	5,727	591.714	194.013
d E	Equipment				78	5,727	591,714	194,013

provided in Part XIII

See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		
(merdaning name or security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		Cost of end of year market raide
(2)Closely-held equity interests		
O ther		
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 12) •	
Part VIII Investments—Program Relat	<u> </u>	n answered 'Yes' to Form 990, Part IV, line 110
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
(1) CERTIFICATES OF DEPOSIT	5,789,000	
Total. (Column (b) must equal Form 990, Part X, col (B) line	13) • 5,789,000	
		, Part IV, line 11d See Form 990, Part X, line 15
(a_) Description	(b) Book value
_		
Part X Other Liabilities. Complete if the Form 990, Part X, line 25.	he organization answered 'Yes' to	o Form 990, Part IV, line 11e or 11f. See
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. (a) Description of liability		•
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	•
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	he organization answered 'Yes' to	•
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Form 990, Part X, line 25.	(b) Book value	•
Part X Other Liabilities. Complete if the Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	•

Part		evenue per Audited Financia wered 'Yes' to Form 990, Part IV			s Wit	h Re	venu	e per	Return	Complete	ıf
1		er support per audited financial statei						1			
2	A mounts included on line 1 bu	ut not on Form 990, Part VIII, line 12	2								
а	Net unrealized gains on invest	tments	[2a							
b	Donated services and use of fa	acılıtıes	. [2b							
С	Recoveries of prior year grants	s	. [2c							
d	Other (Describe in Part XIII)		[2d							
e	Add lines 2a through 2d .							. 2e	•		
3	Subtract line ${f 2e}$ from line ${f 1}$.							. 3			
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line	1								
а	Investment expenses not incl	luded on Form 990, Part VIII, line 7b	, [4a							
b	Other (Describe in Part XIII))	. [4b							
c	Add lines 4a and 4b							. 40	:		
5		d 4c. (This must equal Form 990, Par						5			
Part		xpenses per Audited Financisswered 'Yes' to Form 990, Part 1			ts Wi	ith E	xpen	ses pe	r Retu	r n. Compl	ete
1		r audited financial statements						1	.		
2		it not on Form 990, Part IX, line 25									
а	Donated services and use of fa			2a							
b	Prior year adjustments			2b							
c	Other losses			2c							
d				2d							
e	Add lines 2a through 2d		'					. 20	e		
3	Subtract line ${f 2e}$ from line ${f 1}$.							. з	3		
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:									
a	Investment expenses not incl	uded on Form 990, Part VIII, line 7b		4a							
b	Other (Describe in Part XIII)			4b							
c	Add lines 4a and 4b							. 4	С		
5	Total expenses Add lines 3 ar	nd 4c. (This must equal Form 990, Pa	art I, line	18)				. 5	;		
Part	XIII Supplemental Inf	formation									
Part \		Part II, lines 3, 5, and 9, Part III, li , lines 2d and 4b, and Part XII, lines							/ide any	addıtıonal	
	Return Reference	Explana	ation								

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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SCHEDULE O (Form 990 or 990-EZ)

Name of the organization FLAG CREDIT UNION

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Open to Public Inspection

Employer identification number

59-0992912

OMB No 1545-0047

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 6	FLAG CREDIT UNION IS A NOT-FOR-PROFIT FINANCIAL COOPERATIVE, OWNED BY THE PEOPLE WHO SAVE AND BORROW HERE, CALLED "MEMBERS"
FORM 990, PAGE 6, PART VI, LINE 7A	EVERY MEMBER HAS THE RIGHT TO VOTE FOR THE MEMBERS OF THE GOVERNING BODY, CALLED THE "BOARD OF DIRECTORS"
FORM 990, PAGE 6, PART VI, LINE 11B	THE GOVERNING BODY WAS NOT PROVIDED A COPY OF THIS FORM 990 BEFORE IT WAS FILED
FORM 990, PAGE 6, PART VI, LINE 12C	FLAG CREDIT UNION HAS A WRITTEN CONFLICT OF INTEREST POLICY TITLED "CODE OF CONDUCT" ANNUALLY, ALL VOLUNTEERS AND EMPLOYEES ARE REQUIRED TO SIGN THE POLICY AND A FORM IS COMPLETED THAT WOULD DISCLOSE INTERESTS THAT COULD GIVE RISE TO CONFLICTS
FORM 990, PAGE 6, PART VI, LINE 15A	FLAG CREDIT UNION USES SALARY SURVEYS PROVIDED FOR OUR INDUSTRY FOR DETERMINING COMPENSATION
FORM 990, PAGE 6, PART VI, LINE 15B	FLAG CREDIT UNION USES SALARY SURVEYS PROVIDED FOR OUR INDUSTRY FOR DETERMINING COMPENSATION
FORM 990, PAGE 6, PART VI, LINE 19	OUR FINANCIAL DATA IS AVAILABLE TO THE PUBLIC THROUGH NCUA'S WEBSITE. GOVERNING DOCUMENTS AND POLICIES ARE NOT MADE AVAILABLE TO THE GENERAL PUBLIC
FORM 990, PART XI, LINE 9	OTHER COMPENSATION INCOME 30,417 OTHER COMPENSATION INCOME 0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493128009844 OMB No 1545-0172 **Depreciation and Amortization** (Including Information on Listed Property) Department of the Treasury Internal Revenue Service (99) See separate instructions. ► Attach to your tax return. Sequence No 179 Business or activity to which this form relates **Identifying number** INDIRECT DEPRECIATION Name(s) shown on return FLAG CREDIT UNION 59-0992912 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Total cost of section 179 property placed in service (see instructions) \cdot · · · · 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0- · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · · · · Carryover of disallowed deduction from line 13 of your 2012 Form 4562 · · · 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 . | 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election **15** 45,193 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2013 · · · · · · 27,773 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method property period deduction service use only—see instructions) 19a 3-year property **b** 5-year property **c** 7-year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs h Residential rental 27 5 yrs ММ S/L property 27 5 yrs MMS/L ММ S/L i Nonresidential real 39 vrs property ΜМ Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year 40 yrs ММ S/L Summary (see instructions.) Part IV 21 Listed property Enter amount from line 28 · · · · · · · · · · · 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter 22 here and on the appropriate lines of your return Partnerships and S corporations—see instructions • • 72,966 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Form 4562 (2013) Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	Ciation ai	iu Other 1	morma	tion (C	auuon	: <i>See</i> :	uie ii	15111	icuoi	115 101	mme	o TOT pa	sseng	ei au	LOTTIOL	nies.
24a Do you have evider	ice to support t	the business/inv	estment u	se claimed	d? ┌ Yes	Гио			24b	If "Yes,"	' is the	ev idence	written?	Гүе	sГN)
(a) Type of property (list vehicles first)	Type of property (list Date placed in investment Cost or o		other basis for depreciation Rec			(f) Recov perio	very Method/			(h) Depreciation/ n deduction			(i) Elected section 17 cost			
25 Special depreciation allo 50% in a qualified busi			erty placed	ın service (during the	tax year	and u	sed m	ore th		5					
·			h							2	.5					
26 Property used more	e tilali 50% i	m a quanneu	Dusilless	use	1				<u> </u>		Т					
		%														
		%														
27 Property used 50%	orlessin a	qualified bus	iness us	<u>e</u>	Ι				S/I	l =						
		%							S/I		-			1		
		%							S/I	L-,						
28 Add amounts in co	olumn (h), lın	es 25 throug	jh 27 En	ter here a	and on lir	ne 21,	page	1	28	3						
29 Add amounts in co	olumn (ı), lıne	e 26 Enterh	ere and o	n line 7,	page 1								29			
			ction B													
Complete this section If you provided vehicles to														e vehic	les	
					a)		b)	T	(c			(d)		≘)		f)
30 Total business/inv year (do not include			ring the	Vehi	cle 1	Vehi	cle 2		Vehic	cle 3	Ve	hicle 4	Vehi	cle 5		icle 6
) car (ao not mera	ac commitatin	· · · · · · · · · · · · · · · · · · ·	•					_								
31 Total commuting r	miles driven	during the ye	ear .													
32 Total other persor	nal(noncomm	nuting) miles	drıven													
33 Total miles driven through 32	during the y	ear Add line	s 30													
34 Was the vehicle as	vaılable for p	ersonal use		Yes	No	Yes	No	Y	es	No	Yes	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle us owner or related p		by a more tl	nan 5%													
36 Is another vehicle	available fo	r personal us	e? .													
Section Answer these question 5% owners or related	ns to determ		et an exc												not mo	re thai
37 Do you maintain a employees?	written polic	y statement	that prof	ibits all	personal	use of	vehic	les,	ınclu	ding co	mmut	ing, by	your • •	Y	es	No
38 Do you maintain a employees? See the																
39 Do you treat all us						, o, a		, .,	_ , 0 0		• • • • • • • • • • • • • • • • • • • •					
40 Do you provide mo	re than five	vehicles to y	our empl			rmatio	n fron	n you	r em	ployee	s abou	it the us	e of			
vehicles, and retain 41 Do you meet the re				· · ·	· · · · le demor	· · ·	n use	• e? (S	ee ins	• • structi	ons)				+	
Note: If your answ	<i>e</i> r to 37, 38	, 39, 40, or 4	l is "Yes	s," do not	t comple	te Sect	ion B	fort	he co	vered	vehicl	es				
Part VI Amo	rtization															
(a) Description of c	osts	(b) Date amortizatio begins	n	(c A mort a mo	ızable			(d) Code ection	ode ction		(e) tization iod or entage			(f) rtızatı hıs ye:		
42 A mortization of co	sts that beg	ıns durıng yo	ur 2013	tax year	(see inst	truction	ns)					-				
	T			· · ·			•									
43 Amortization of co	sts that beq	an before you	ur 2013 t	ax year							43	1				
44 Total. Add amount					ere to re	port					44	1				