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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047

2003

Open to Public Inspection

JAN 12 2011

A For the 2003 calendar year, or tax year beginning , and ending

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: **Centra Credit Union**

Number and street (or P O box if mail is not delivered to street address): **1430 National Road** Room/suite

City or town, state or country, and ZIP + 4: **Columbus IN 47201**

D Employer ID number: **35-0885381**

E Telephone number: **812-376-9771**

F Accounting method ☐ Cash ☒ Accrual ☐ Other (specify) ▶

● Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

Website: ▶ **WWW.CENTRA.ORG**

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No (If "No," att a list See instr)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☐ No

Organization type (check only one) ▶ ☒ 501(c) (**14**) ◂ (insert no) ☐ 4947(a)(1) or ☐ 527

I Group Exemption Number ▶

Check here ▶ ☐ if the organization's gross receipts are normally not more than $25,000 The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data **Some states require a complete return.**

M Check ▶ ☒ if the organization is **not** required to attach Sch B (Form 990, 990-EZ, or 990-PF)

Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **29,875,284**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a			
b	Indirect public support	1b			
c	Government contributions (grants)	1c			
d	**Total** (add lines 1a through 1c) (cash $ ____ noncash $ ____)			1d	0
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	29,126,963
3	Membership dues and assessments			3	
4	Interest on savings and temporary cash investments			4	
5	Dividends and interest from securities			5	
6a	Gross rents	6a			
b	Less rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
7	Other investment income (describe ▶)			7	
8a	Gross amount from sales of assets other than inventory	(A) Securities	8a	(B) Other	
b	Less cost or other basis and sales expenses		8b		
c	Gain or (loss) (attach schedule)		8c		
d	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	
9	Special events and activities (attach schedule) If any amount is from **gaming,** check here ▶ ☐				
a	Gross revenue (not including $ ____ of contributions reported on line 1a)	9a			
b	Less direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
11	Other revenue (from Part VII, line 103)			11	748,321
12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	29,875,284
13	Program services (from line 44, column (B))			13	
14	Management and general (from line 44, column (C))			14	
15	Fundraising (from line 44, column (D))			15	
16	Payments to affiliates (attach schedule)			16	
17	**Total expenses** (add lines 16 and 44, column (A))			17	25,130,563
18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	4,744,721
19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	52,454,696
20	Other changes in net assets or fund balances (attach explanation)			20	-344,481
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	56,854,936

Revenue | Expenses | Net Assets

See Stmt 2

See Stmt 1

91,7-8 14ME

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See page 22 of the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ non-cash $)	22				
23 Specific assistance to individuals	23				
24 Benefits paid to or for members	24				
25 Compensation of officers, directors, etc	25	579,790			
26 Other salaries and wages	26	5,683,154			
27 Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33	295,091			
34 Telephone	34	345,219			
35 Postage and shipping	35	381,169			
36 Occupancy	36	2,332,158			
37 Equipment rental and maintenance	37				
38 Printing and publications	38				
39 Travel	39				
40 Conferences, conventions, and meetings	40				
41 Interest	41	8,328,501			
42 Depreciation, depletion, etc (attach schedule)	42				
43 Other expenses not covered above (itemize) a	43a				
b See Statement 3	43b	7,185,481			
c	43c				
d	43d				
e	43e				
44 **Total functional expenses** (add lines 22 - 43) **Organizations completing columns (B)-(D), carry these totals to lines 13-15**	44	25,130,563	0	0	0

Joint Costs. Check ▶ ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ▶ ☐ Yes ☐ No

If "Yes," enter (i) the aggregate amount of these joint costs $, (ii) the amount allocated to Program services $,

(iii) the amount allocated to Management and general $, and (iv) the amount allocated to Fundraising $

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

What is the organization's primary exempt purpose?

▶ See Statement 4

All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

Program Service Expenses (Required for 501(c)(3) & (4) orgs , & 4947(a)(1) trusts, but optional for others)

a (Grants and allocations $)

b (Grants and allocations $)

c (Grants and allocations $)

d (Grants and allocations $)

e Other program services (attach schedule) See Stmt 5 (Grants and allocations $) 25,130,563

f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶ 25,130,563

Part IV Balance Sheets (See page 25 of the instructions.)

	Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only			(A) Beginning of year		(B) End of year
	45 Cash-non-interest-bearing			48,561,247	45	21,631,817
	46 Savings and temporary cash investments			53,181,114	46	35,191,972
	47a Accounts receivable	47a				
	b Less allowance for doubtful accounts	47b			47c	
	48a Pledges receivable	48a				
	b Less allowance for doubtful accounts	48b			48c	
	49 Grants receivable				49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
Assets	51a Other notes and loans receivable (attach schedule) See Worksheet	51a	352,463,712			
	b Less allowance for doubtful accounts	51b		303,057,072	51c	352,463,712
	52 Inventories for sale or use				52	
	53 Prepaid expenses and deferred charges				53	
	54 Investments-securities See Stmt 6 ▶ [X] Cost [X] FMV			25,171,210	54	53,943,582
	55a Investments-land, buildings, and equipment basis	55a	16,268,799			
	b Less accumulated depreciation (attach schedule)	55b	8,334,000	7,428,382	55c	7,934,799
	56 Investments-other (attach schedule)				56	
	57a Land, buildings, and equipment basis	57a				
	b Less accumulated depreciation (attach schedule)	57b			57c	
	58 Other assets (describe ▶ See Stmt 7)			15,167,634	58	15,390,938
	59 **Total assets** (add lines 45 through 58) (must equal line 74)			452,566,659	59	486,556,820
	60 Accounts payable and accrued expenses				60	
	61 Grants payable				61	
	62 Deferred revenue				62	
Liabilities	63 Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a Tax-exempt bond liabilities (attach schedule)				64a	
	b Mortgages and other notes payable (attach schedule)				64b	
	65 Other liabilities (describe ▶ See Stmt 8)			400,111,963	65	429,701,884
	66 **Total liabilities** (add lines 60 through 65)			400,111,963	66	429,701,884
	Organizations that follow SFAS 117, check here ▶ [ ] and complete lines 67 through 69 and lines 73 and 74					
Net Assets or Fund Balances	67 Unrestricted				67	
	68 Temporarily restricted				68	
	69 Permanently restricted				69	
	Organizations that do not follow SFAS 117, check here ▶ [X] and complete lines 70 through 74					
	70 Capital stock, trust principal, or current funds				70	
	71 Paid-in or capital surplus, or land, building, and equipment fund				71	
	72 Retained earnings, endowment, accumulated income, or other funds			52,454,696	72	56,854,936
	73 **Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72, column (A) **must** equal line 19, column (B) **must** equal line 21)			52,454,696	73	56,854,936
	74 **Total liabilities and net assets / fund balances** (add lines 66 and 73)			452,566,659	74	486,556,820

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization How the public perceives an organization in such cases may be determined by the information presented on its return Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)			Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return		
a Total revenue, gains, and other support per audited financial statements ▶	a	19,067,302	a Total expenses and losses per audited financial statements ▶	a	14,667,062
b Amounts included on line a but not on line 12, Form 990			b Amounts included on line a but not on line 17, Form 990		
(1) Net unrealized gains on investments $ -344,481			(1) Donated services and use of facilities $		
(2) Donated services and use of facilities $			(2) Prior year adjustments reported on line 20, Form 990 $		
(3) Recoveries of prior year grants $			(3) Losses reported on line 20, Form 990 $		
(4) Other (specify) $			(4) Other (specify) $		
Add amounts on lines (1) through (4) ▶	b	-344,481	Add amounts on lines (1) through (4) ▶	b	
c Line a minus line b ▶	c	19,411,783	c Line a minus line b ▶	c	14,667,062
d Amounts included on line 12, Form 990 but not on line a:			d Amounts included on line 17, Form 990 but not on line a:		
(1) Investment expenses not included on line 6b, Form 990 $			(1) Investment expenses not included on line 6b, Form 990 $		
(2) Other (specify) See Stmt 9 $ 10,463,501			(2) Other (specify). See Stmt 10 $ 10,463,501		
Add amounts on lines (1) and (2) ▶	d	10,463,501	Add amounts on lines (1) and (2) ▶	d	10,463,501
e Total revenue per line 12, Form 990 (line c plus line d) ▶	e	29,875,284	e Total expenses per line 17, Form 990 (line c plus line d) ▶	e	25,130,563

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 27 of the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contrib to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Tom Kieffer 967 Junco Drive Columbus IN 47203	Chairman 2	2,400	0	0
Shirley Kreutzjans 4085 S Gladstone Columbus IN 47201	V. Chairman 2	2,400	0	0
Bryan Curry 14201 W Georgeto Columbus IN 47201	Secretary 2	2,400	0	0
Craig Monroe 721 N Monroe Ct Columbus IN 47201	Treasurer 2	2,400	0	0
E Melinda Engelking 939 S Wolfcreek Columbus IN 47201	Board Member 2	2,400	0	0
James Johnson 1555 North Meado Columbus IN 47203	Board Member 2	2,400	0	0
Loretta Burd 9881 W Shore Dr Columbus IN 47201	CEO-Pres. 40	250,325	6,003	0
Douglas Harris 422 Ridgeview Ct Columbus IN 47201	CFO 40	115,308	2,883	0
Jennifer Brebberman 3203 Buckmoor Greenwood IN 46143	VP Lending 40	93,291	2,715	0
Rita Euers 5110 E 71st St Indianapol IN 46220	VP Marketing 40	92,101	2,764	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ▶ ☐ Yes ☒ No

If "Yes," attach schedule-see page 28 of the instructions

Part VI Other Information (See page 28 of the instructions.)

			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77		X
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a	X	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b	X	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization ▶ and check whether it is ☐ exempt or ☐ nonexempt			
81a	Enter direct and indirect political expenditures See line 81 instructions 81a			
b	Did the organization file **Form 1120-POL** for this year?	81b		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b		
84a	Did the organization solicit any contributions or gifts that were not tax deductible? N/A	84a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b		
85	501(c)(4), (5), or (6) organizations **a** Were substantially all dues nondeductible by members? N/A	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less? N/A	85b		
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year			
c	Dues, assessments, and similar amounts from members 85c			
d	Section 162(e) lobbying and political expenditures 85d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	501(c)(7) orgs Enter **a** Initiation fees and capital contributions included on line 12 86a			
b	Gross receipts, included on line 12, for public use of club facilities 86b			
87	501(c)(12) orgs Enter **a** Gross income from members or shareholders 87a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88		X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ▶ _____ , section 4912 ▶ _____ , section 4955 ▶ _____			
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization ▶ _____			
90a	List the states with which a copy of this return is filed ▶ IN			
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions) 90b 194			
91	The books are in care of ▶ Alvin Lecher Telephone no ▶ 812-376-9771 Located at ▶ Columbus, IN ZIP + 4 ▶ 47201			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of **Form 1041**- Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92			

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by sec 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a Interest on loans receivable					21,809,165
b Investment securities income					968,807
c Interest on deposits					1,869,800
d Service charges					2,901,799
e Credit card income					1,577,392
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b Insurance commissions	523000	83,798			
c Financial advisory services	524113	56,607			
d All other					607,916
e					
104 Subtotal (add columns (B), (D), and (E))		140,405		0	29,734,879
105 Total (add line 104, columns (B), (D), and (E))				▶	29,875,284

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No. ●	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	See Statement 11

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note. If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Please Sign Here

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

▶ X Alvin G Lecher Signature of officer — X 12/30/10 Date

▶ X Alvin G Lecher / VP - Financial Operations Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ [signature] Date 12/30/10 Check if self-employed ▶ ☐ Preparer's SSN or PTIN (See Gen Instr W) P00234662

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ Clark & Leucht, P.C. 320 N. Meridian St. Suite 428 Indianapolis, IN 46204

EIN ▶ 35-1458829

Phone no ▶ 317-264-1095

Statement 2 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
Net unrealized gains on investments	$ -344,481
Total	$ -344,481

Statement 3 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
	$	$	$	$
Expenses				
Transaction processing exp	1,986,411			
Advertising and promotion	360,722			
Credit card expense	745,556			
Provision for loan losses	2,135,000			
All other	1,957,792			
Total	$ 7,185,481	$ 0	$ 0	$ 0

Statement 4 - Form 990, Part III - Organization's Primary Exempt Purpose

State chartered and Federally insured Credit Union which grants consumer loans including credit cards, lease financing and open-end credit, mortgage loans and business loans to its members.

Statement 5 - Form 990, Part III, Line e - Other Program Services

All activities are State Charted Credit Union activities which are exempt under section 501 c 14

Statement 6 - Form 990, Part IV, Line 54 - Investments in Securities

Description	Beginning of Year	End of Year	Basis of Valuation
Corporate Bonds			
Available for sale	23,171,772	41,343,674	Market
Held to maturity	1,999,438	12,599,908	Cost
	25,171,210	53,943,582	

Statement 7 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of Year
Corporate CU membership shares	$ 3,198,766	$ 2,614,485
FHLB stock	1,196,900	1,243,100
NCUA share fund	3,668,565	3,900,222
All other	7,103,403	7,633,131
Total	$15,167,634	$15,390,938

Statement 8 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year
Member deposits	$ 398305308	$ 428730587
All other	1,806,655	971,297
Total	$ 400111963	$ 429701884

Statement 9 - Form 990, Part IV-A - Other Revenue Included on Return

Description	Amount
Provision for loan losses	$ 2,135,000
Interest expense on deposits	8,328,501
Total	$10,463,501

Statement 10 - Form 990, Part IV-B - Other Expenses Included on Return

Description	Amount
Provision for loan losses	$ 2,135,000
Interest expense on deposits	8,328,501
Total	$10,463,501

Statement 11 - Form 990, Part VIII - Relationship of Activities

Line No.	Description
93a	Org. is a credit union, exempt under sec. 501(c)(14)
93b	Org. is a credit union, exempt under sec. 501(c)(14)
93c	Org. is a credit union, exempt under sec. 501(c)(14)
93d	Org. is a credit union, exempt under sec. 501(c)(14)
93e	Org. is a credit union, exempt under sec. 501(c)(14)
103d	Org. is a credit union, exempt under sec. 501(c)(14)