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LIBERTY LAKE, WA 99019

☐ Other (specify) 

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

**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ► 97,145,501

**1** Net assets or fund balances at end of year Combine lines 18, 19, and 20 . . . . .

Cat No 11282Y

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 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
22a	Grants paid from donor advised funds (attach Schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a0			
22b	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22b0			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25a	Compensation of current officers, directors, key employees etc. Listed in Part V-A (attach schedule) . . . . .	25a1,209,256			
b	Compensation of former officers, directors, key employees etc. listed in Part V-B (attach schedule) . . . . .	25b9,895			
c	Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c			
26	Salaries and wages of employees not included on lines 25a, b and c . . . . .	2612,132,125			
27	Pension plan contributions not included on lines 25a, b and c . . . . .	271,079,954			
28	Employee benefits not included on lines 25a - 27 . . . . .	283,334,859			
29	Payroll taxes . . . . .	291,161,048			
30	Professional fundraising fees . . . . .	30			
31	Accounting fees . . . . .	3120,913			
32	Legal fees . . . . .	3248,984			
33	Supplies . . . . .	33586,178			
34	Telephone . . . . .	34500,147			
35	Postage and shipping . . . . .	35649,010			
36	Occupancy . . . . .	361,447,027			
37	Equipment rental and maintenance . . . . .	3793,514			
38	Printing and publications . . . . .	38104,953			
39	Travel . . . . .	39212,839			
40	Conferences, conventions, and meetings . . . . .	40260,137			
41	Interest . . . . .	412,992,871			
42	Depreciation, depletion, etc. (attach schedule)	421,742,249			
43	Other expenses not covered above (itemize)				
a	See Additional Data Table	43a			
b		43b			
c		43c			
d		43d			
e		43e			
f		43f			
g		43g			
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15) . . . . .	4458,325,395	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 the instructions.)*

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.

What is the organization's primary exempt purpose? <b>CREDIT UNION FINANCIAL SERVICES</b> 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.)	<b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
<b>a</b> PROVIDE FINANCIAL SERVICES TO 71300 MEMBERS THESE SERVICES INCLUDE BUT ARE NOT LIMITED TO PROVIDING REAL ESTATE AND OTHER SECUREDUNSECURED CONSUMER AND BUSINESS LOANS CHECKING AND SAVINGS PROGRAMS AND CREDIT CARD SERVICES  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>b</b>  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>c</b>  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>d</b>  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>e</b> Other program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>f</b> <b>Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) . . . <input type="checkbox"/>	

Part IV Balance Sheets (See 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
Assets	45	Cash—non-interest-bearing . . . . .	11,987,600	45	15,286,247
	46	Savings and temporary cash investments . . . . .	19,382,396	46	11,325,701
	47a	Accounts receivable . . . . .		47c	
	b	Less allowance for doubtful accounts			
	48a	Pledges receivable . . . . .		48c	
	b	Less allowance for doubtful accounts			
	49	Grants receivable . . . . .		49	
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .	2,300,782	50a	
	b	Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule) . . . . .	2,300,782	50b	
	51a	Other notes and loans receivable (attach schedule) . . . . .	827,453,319	51c	825,429,857
	b	Less allowance for doubtful accounts	2,023,462		
	52	Inventories for sale or use . . . . .		52	
	53	Prepaid expenses and deferred charges . . . . .	7,644,941	53	1,045,882
	54a	Investments—publicly-traded securities <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		54a	15,678,331
	b	Investments—other securities (attach schedule) <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV	37,952,324	54b	 29,693,992
55a	Investments—land, buildings, and equipment basis . . . . .	288,030	55c	 192,418	
b	Less accumulated depreciation (attach schedule) . . . . .	95,612			
56	Investments—other (attach schedule) . . . . .	24,853,172	56		
57a	Land, buildings, and equipment basis	45,975,842	57c	 26,635,505	
b	Less accumulated depreciation (attach schedule) . . . . .	19,340,337			
58	Other assets, including program-related investments (describe <input type="checkbox"/> _____ )	10,503,762	58	 15,694,953	
59	Total assets (must equal line 74) Add lines 45 through 58 . . . . .	854,831,662	59	940,982,886	
Liabilities	60	Accounts payable and accrued expenses . . . . .	10,110,213	60	11,370,617
	61	Grants payable . . . . .		61	
	62	Deferred revenue . . . . .	345,645	62	439,747
	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) . . . . .	79,108,535	64b	61,868,174
	65	Other liabilities (describe <input type="checkbox"/> _____ )	664,870,842	65	 757,236,236
	66	Total liabilities Add lines 60 through 65 . . . . .	754,435,235	66	830,914,774
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted . . . . .		67	
	68	Temporarily restricted . . . . .		68	
	69	Permanently restricted . . . . .		69	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> 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 . . . . .	100,396,427	72	110,068,112
	73	Total net assets or fund balances Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21) . . . . .	100,396,427	73	110,068,112
74	Total liabilities and net assets / fund balances Add lines 66 and 73 . . . . .	854,831,662	74	940,982,886	

Part IV-A

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements . . . . .	a			
b	Amounts included on line a but not on Part I, line 12				
1	Net unrealized gains on investments . . . . .			b1	
2	Donated services and use of facilities . . . . .			b2	
3	Recoveries of prior year grants . . . . .			b3	
4	Other (specify) _____			b4	
	Add lines b1 through b4 . . . . .	b			
c	Subtract line b from line a . . . . .	c			
d	Amounts included on Part I, line 12, but not on line a				
1	Investment expenses not included on Part I, line 6b . . . . .			d1	
2	Other (specify) _____			d2	
	Add lines d1 and d2 . . . . .	d			
e	Total revenue (Part I, line 12) Add lines c and d . . . . .	e			

Part IV-B

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements . . . . .	a			
b	Amounts included on line a but not on Part I, line 17				
1	Donated services and use of facilities . . . . .			b1	
2	Prior year adjustments reported on Part I, line 20 . . . . .			b2	
3	Losses reported on Part I, line 20 . . . . .			b3	
4	Other (specify) _____			b4	
	Add lines b1 through b4 . . . . .	b			
c	Subtract line b from line a . . . . .	c			
d	Amounts included on Part I, line 17, but not on line a:				
1	Investment expenses not included on Part I, line 6b . . . . .			d1	
2	Other (specify) _____			d2	
	Add lines d1 and d2 . . . . .	d			
e	Total expenses (Part I, line 17) Add lines c and d . . . . .	e			

Part V-A

Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
See Additional Data Table				

Part V-A		Current Officers, Directors, Trustees, and Key Employees <i>(continued)</i>		Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings . . . . .	13			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) . . . . .	75b			No
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" . . . . . If "Yes," attach a statement that includes the information described in the instructions	75c			No
d	Does the organization have a written conflict of interest policy? . . . . .	75d			No

Part V-B

Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (If not paid enter -0- )	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
DENISE GABEL 8502 E SANDLEWOOD SPOKANE,WA 99921	0	9,895	989	

Part VI		Other Information <i>(See the instructions.)</i>		Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change . . . . .	76			No
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			No
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . .	78a	Yes		
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	78b	Yes		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . . . .	79			No
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			No
b	If "Yes," enter the name of the organization ▶ _____ _____and check whether it is <input type="checkbox"/> exempt <b>or</b> <input type="checkbox"/> nonexempt				
81a	Enter direct or indirect political expenditures (See line 81 instructions ) . . . . .	81a	4,500		
b	Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	81b	Yes		

Part VIOther Information (continued)

YesNo

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

No

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

Yes

b

Did the organization comply with the disclosure requirements relating to quid pro quo contributions?

83b

Yes

84a

Did the organization solicit any contributions or gifts that were not tax deductible?

84a

No

b

If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

84b

No

85

501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?

85a

No

b

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

85b

No

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 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?

85g

No

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?

85h

No

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

88a

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

88a

Yes

b

At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes, complete Part XI

88b

No

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

No

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

e

All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?

89e

No

f

All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?

89f

No

g

For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

89g

No

90a

List the states with which a copy of this return is filed

b

Number of employees employed in the pay period that includes March 12, 2006 (See instructions)

90b

318

91a

The books are in care of SPOKANE TEACHERS CU Telephone no (509) 326-1954

1620 N SIGNAL DRIVE

Located at LIBERTY LAKE, WA ZIP + 4 99019

b

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)?

91b

No

If "Yes," enter the name of the foreign country

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts



<b>Part VI</b> Other Information <i>(continued)</i>		Yes	No
c At any time during the calendar year, did the organization maintain an office outside of the United States?		91c	No
If "Yes," enter the name of the foreign country <span>▶</span> _____			
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of <b>Form 1041</b> —Check here <span>▶</span> <span>▢</span>			
and enter the amount of tax-exempt interest received or accrued during the tax year <span>▶</span> <span>92</span>			

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

<b>Note:</b> Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 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 LOAN INTEREST INCOME					51,849,412
b LOAN PROCESSING FEE INCOME	522100	48,722			12,144,867
c					
d					
e					
f Medicare/Medicaid payments . . . . .					
g Fees and contracts from government agencies					
94 Membership dues and assessments . . . . .					67,994
95 Interest on savings and temporary cash investments			14	523,574	
96 Dividends and interest from securities . . . . .			14	2,425,752	
97 Net rental income or (loss) from real estate					
a debt-financed property . . . . .					
b non debt-financed property . . . . .			16	93,672	
98 Net rental income or (loss) from personal property					
99 Other investment income . . . . .					
100 Gain or (loss) from sales of assets other than inventory			18	383,964	
101 Net income or (loss) from special events . . . . .					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a TRADING SEC - FMV ADJUSTMENT			18	298,999	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E)) . . . . .		48,722		3,725,961	64,062,273
105 Total (add line 104, columns (B), (D), and (E)) <span>▶</span> _____					67,836,956

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

**Part VIII** Relationship of Activities to the Accomplishment of Exempt Purposes *(See 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)
93A	EXTENDING CREDIT TO MEMBERS IS A PRIMARY FUNCTION OF THE CR UNION
93B	DISTRIBUTES SERVICE-SPECIFIC COSTS TO PARTICIPATING MEMBERS
94	DEFRAYS THE COST OF THE FINANCIAL SERVICES OFFERED TO MEMBERS

**Part IX** Information Regarding Taxable Subsidiaries and Disregarded Entities *(See 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
SCHOOL EMPLOYEES SERVICES INC 106 W NORA SPOKANE, WA99201 91-1275748	10000 %	FINANCIAL SERVICE	-30	1,761
	%			
	%			
	%			

**Part X** Information Regarding Transfers Associated with Personal Benefit Contracts *(See the instructions.)*

(a)	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <span>▢</span> Yes <span>✓</span> No
(b)	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <span>▢</span> Yes <span>✓</span> No
<b>NOTE:</b> If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).	

Part XI

Information Regarding Transfers To and From Controlled Entities

Complete only if the organization is a controlling organization as defined in section 512(b)(13)

106	Did the reporting organization <b>make</b> any transfers <b>to</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	Yes	No
			No

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
Totals				

107	Did the reporting organization <b>receive</b> any transfers <b>from</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	Yes	No
			No

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
Totals				

108	Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?	Yes	No
			No

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.

Signature of officer

2010-12-23

Date

MARLIS PETERSEN SPAWN DIR - ACCOUNTING AND FINANCE

Type or print name and title

Paid Preparer's Use Only	Preparer's signature <div></div>	Date	Check if self-employed <div><input checked="" type="checkbox"/></div>	Preparer's SSN or PTIN (See Gen. Inst. W)
	Firm's name (or yours if self-employed), address, and ZIP + 4 <div></div>			EIN <div></div>
				Phone no. <div></div>

Form 990 (2006)

Additional Data

Software ID:

Software Version:


EIN: 91-0565128

Name: SPOKANE TEACHERS CREDIT UNION

Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
a ADVERTISING AND PROMOTION	43a	1,369,424			
b BOND AND INSURANCE COVERAGE	43b	66,364			
c COMPUTER EXPENSE	43c	1,236,450			
d DUES AND SUBSCRIPTIONS	43d	164,842			
e EDUCATIONEMPLOYEE RELATIONS	43e	232,958			
f LOAN SERVICING EXPENSE	43f	828,618			
g MEMBER DIVIDEND EXPENSE	43g	21,559,827			
h OTHER OPERATING EXPENSE	43h	309,727			
i OTHER PROFESSIONAL SERVICES	43i	154,030			
j PROCESSING EXPENSE	43j	3,447,026			
k PROVISION FOR LOAN LOSS	43k	1,266,555			
l STATE SUPERVISORY EXAM FEES	43l	103,615			

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
STEVEN DAHLSTROM  1620 NORTH SIGNAL DR LIBERTY LAKE, WA 99019	PRESIDENT CEO 40 0	301,613	415,551	15,699
TERRI WILSON 16517 E 24TH LANE VERADALE, WA 99037	COO 40 0	159,277	165,140	3,300
WILLIAM BEFORE 6202 W SKAGIT CT SPOKANE, WA 99208	CFO 40 0	159,257	106,126	3,300
TOM JOHNSON 1521 E HERITAGE LANE SPOKANE, WA 99208	VP 40 0	140,292	34,565	3,300
BRAD HUNTER 24211 E 1ST AVE LIBERTY LAKE, WA 99019	VP 40 0	118,962	31,926	3,300
PAUL CHALMERS 2019 S ST CHARLES RD VERADALE, WA 99037	VP 40 0	112,079	32,492	3,300
SCOTT ADKINS 21101 W COULEE HITE RD SPOKANE, WA 99224	VP 40 0	110,445	29,768	3,300
BELINDA CAILLOUET 1612 E MACMAHAN SPOKANE, WA 99217	VP 40 0	107,331	28,942	3,851
GEORGIA MILLER 1329 S FERRIS CT SPOKANE, WA 99202	BOARD CHAIR 5 0	0		
WALLY STANLEY 4624 S PROGRESS CT VERADALE, WA 99037	DIRECTOR 2 0	0		

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
JOHN YOUNG 2309 S MCCABE SPOKANE, WA 99216	DIRECTOR 2 0	0		306
JAY WALTER 4418 S CHAPMAN GREENACRES, WA 99016	DIRECTOR 2 0	0		
MIKE FINK 15802 N LANTERN LANE SPOKANE, WA 99208	DIRECTOR 2 0	0		
BARB RICHEY PO BOX 297 CHENEY, WA 99004	DIRECTOR 2 0	0		
BOB JAYNE 24420 E 3RD LIBERTY LAKE, WA 99019	DIRECTOR 2 0	0		
ELLEN DOLAN 1510 W TONI RAE DRIVE SPOKANE, WA 99218	DIRECTOR 2 0	0		
ROBERT LOOMIS 5606 W WOODSIDE SPOKAN, WA 99208	DIRECTOR 2 0	0		
YVONNE FREAS PO BOX 1407 VERADALE, WA 99037	DIRECTOR 2 0	0		761
ROBERT RICHARDS 7823 N HUGHES DR SPOKANE, WA 99208	DIRECTOR 2 0	0		862
MARGARET PATTERSON PO BOX 14048 SPOKANE, WA 99214	DIRECTOR 2 0	0		

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
JUDY MORRIS 1316 S MCCLELLAN SPOKANE, WA 99203	DIRECTOR 20	0		
DAVE SACKVILLE-WEST 2809 S GARFIELD SPOKANE, WA 99203	SUPERVISORY COMMITTEE 20	0		
DONALD TRAIL 1106 E 20TH SPOKANE, WA 99203	SUPERVISORY COMMITTEE 20	0		
SHIRLEY BONUCELLI 1816 S VIEWCREST LANE SPOKANE, WA 99212	SUPERVISORY COMMITTEE 20	0		

**TY 2007 Compensation Explanation****Name:** SPOKANE TEACHERS CREDIT UNION**EIN:** 91-0565128

Person Name	Explanation
	COMPENSATION DISCLOSURES INCLUDE (A) MATCHING AND PROFITING CONTRIBUTIONS TO A 401(K) PLAN(B) HEALTH INSURANCE PREMIUMS OFFERED UNDER A GROUP PLAN(C) CONTRIBUTIONS TO NON-QUALIFIED 457(B) DEFERRED COMP PLAN (D) ESTIMATED AMOUNTS EARNED UNDER A 457(F) PLAN(E) INCENTIVE AWARDS EARNED IN 2007 BUT NOT PAID UNTIL 2008EARNED BASED ON ACHIEVING DEFINED PERFORMANCE TARGETS

**Note:** To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**TY 2007 Gain/Loss from Sale of Other Assets Schedule**

**Name:** SPOKANE TEACHERS CREDIT UNION

**EIN:** 91-0565128

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Met hod	Sales Expenses	Total (net)	Accumulated Depreciation
OTHER SECURITIES	2007-01	PURCHASE	2007-12		9,742,781	9,449,338			293,443	



## TY 2007 Gain/Loss from Sale of Public Securities Schedule

**Name:** SPOKANE TEACHERS CREDIT UNION

**EIN:** 91-0565128

**Gross Sales Price:** 19,649,390

**Basis:** 19,558,869

**Sales Expenses:**

**Total (net):** 90,521

TY 2007 Investments - Land Schedule

**Name:** SPOKANE TEACHERS CREDIT UNION

**EIN:** 91-0565128

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
BUILDINGS	288,030	95,612	192,418

**TY 2007 Investments - Securities Schedule****Name:** SPOKANE TEACHERS CREDIT UNION**EIN:** 91-0565128

Description	Book Value	Cost/FMV
FHLB STOCK	4,324,800	
WESCORP MCA AND PIC	3,912,047	
INTEREST BEARING DEPOSITS W OTHER INSTITUTIONS	21,000,000	
CUSO INVESTMENTS	457,145	

**TY 2007 Land etc. Schedule****Name:** SPOKANE TEACHERS CREDIT UNION**EIN:** 91-0565128

Category /Item	Cost/Other Basis	Accumulated Depreciation	Book Value
FURNITURE AND FIXTURES	17,413,325	13,165,852	4,247,473
BUILDINGS	24,041,256	6,174,485	17,866,771
LAND	4,521,261		4,521,261

**TY 2007 Other Assets Schedule****Name:** SPOKANE TEACHERS CREDIT UNION**EIN:** 91-0565128

Description	Beginning of Year Amount	End of Year Amount
ACCRUED INTEREST RECEIVABLE		3,301,556
EMPLOYEE BENEFIT PLAN ASSETS		4,940,706
INTANGIBLE ASSETS		458,357
NCUSIF DEPOSIT		5,826,881
OTHER ASSETS		928,270
OTHER PROPERTY OWNED		239,183

TY 2007 Other Changes in Net Assets Schedule

**Name:** SPOKANE TEACHERS CREDIT UNION

**EIN:** 91-0565128

Description	Amount
NET CHANGE IN UNREALIZED G/L ON AFS SECURITIES	160,124

# TY 2007 Other Liabilities Schedule

**Name:** SPOKANE TEACHERS CREDIT UNION

**EIN:** 91-0565128

Description	Beginning of Year Amount	End of Year Amount
ACCRUED DIVIDENDS PAYABLE		61,989
SHARES AND DEPOSITS		757,174,247