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DLN: 93493078006040

Form **990 Return of Organization Exempt From Income Tax**

Department of the Treasury Internal Revenue Service

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

2008

OMB No 1545-0047

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

Inspection

A Fo	or the 2	2008 ca	lendar vea	r, or tax year beginning 01-01-2008	and ending 12-31-200	8		
	eck if ap			C Name of organization		-	D Employer iden	tification number
_	dress cha		Please use IRS	General Electric Credit Union			31-0568628	
_	me chan	-	label or print or	Doing Business As			E Telephone nur	
_		-	type. See				(513) 243-4	328
Inr —	tıal retur	'n	Specific Instruc-	Number and street (or P O box if mail is n	not delivered to street addre	ess) Room/suite	G Gross receipts	
Te	mınatıoı	n	tions.	10485 Reading Road			·	, ,
- Am	nended r	eturn		City or town, state or country, and ZIP + 4	1	•		
– _{Ap}	plication	pending		Cincinnati, OH 45241				
			F Nan	ne and address of Principal Officer		H/a\		
			Patrick	L Taylor		affiliat	s a group return f tes?	or
				Reading Road				
. To	v ovom	pt status		nati,OH 45241 ((14) ◀ (insert no)		` '	affiliates included	, .
L 10	ix-exem	pt status	J♥ 501(c)	(14) ¬ (Insert no) 4947(a)(1) or	527	_		See instructions)
ı w	eb site	e: F www	v gecreditu	nion org		H(c) Grou	p Exemption Num	nber 🟲
_			_		Harris	<u> </u>	T	
∢ Тур	e of org	anızatıon	Corporat	ion 🦵 trust 🦵 association 🔽 other ⊳ Credit	Union	L Year of For	mation 1954 M S	tate of legal domicile OH
Pa	rt I	Sumi	mary					
	1	Briefly o	lescribe th	e organization's mission or most sign	ıfıcant actıvıtıes			
ų		To prov	ıde fınancıa	al services to member owners with a c	ommon bond			
Governance								
Ĭ								
2	2	Check t	his box 🖵	ıf the organızatıon dıscontınued ıts op	perations or disposed o	of more than 2	5% of its assets	
	3	Number	of voting r	nembers of the governing body (Part \	VI, line 1a)		з	9
ACIIVIIIes &	4	Number	ofindepen	dent voting members of the governing	g body (Part VI, line 1	b)	. 4 _	8
Ë	5	Total nu	ımber of en	nployees (Part V, line 2a)			5	141
3	6	Total nu	ımber of vo	lunteers (estimate if necessary) .			6	8
ì				ted business revenue from Part VIII,				171,777
				ness taxable income from Form 990-			 7Ь	32,241
					,	Prio	r Year	Current Year
	8	Contri	hutions and	grants (Part VIII, line 1h)			0	0
<u>a</u>	9			revenue (Part VIII, line 2g)	32,791,359	38,418,102		
Ravenu	10			ne (Part VIII, column (A), lines 3, 4,	'	10,491,319	8,681,557	
ě					10,491,319			
	11		-	art VIII, column (A), lines 5, 6d, 8c, dd lines 8 through 11 (must equal Pai		0		
	12	12)	evenue—a	ud illes o tillough 11 (must equal Fai	it viii, colullii (A), iii	le	43,282,678	47,099,659
	13	Grants	and simila	er amounts paid (Part IX, column (A),	lines 1-3)			0
	14			r for members (Part IX, column (A), li				0
	15		•	empensation, employee benefits (Part	•	5 –		<u>-</u>
\$		10)	.,	mproposition, empropositiones (r are	22,7 00141111 (71,7) 111100		9,101,682	9,867,266
Expenses	16a	Profes	sıonal fund	raising fees (Part IX, column (A), line	11e)			0
훘	ь	(Total fu	ındraisina ex	penses, Part IX, column (D), line 25 ⁰)			
ш	17	•	_	Part IX, column (A), lines 11a-11d,	11f-24f)		28,125,170	30,418,555
	18			add lines 13-17 (must equal Part IX	·		37,226,852	40,285,821
	19			penses Subtract line 18 from line 12	, , , , , , , , , , , , , , , , , , , ,		6,055,826	6,813,838
<u>70</u>	+		GA			Reginni	ng of Year	End of Year
9 9	20	T-4-1-		t V line 15)				
## 1988	20		•	t X, line 16)			750,580,952	830,965,484
net Assets or Fund Bałances	21	Totall	ıabılıtıes (F	Part X, line 26)			527,430,869	699,851,739
	22			d balances Subtract line 21 from line	20	:	123,150,083	131,113,745
Pa	rt II	Sign	ature Blo	ock				
				rgury, I declare that I have examined this returned, and complete. Declaration of property				
Plea			er, it is true, i	correct, and complete Declaration of preparer	(other than officer) is base	1		назану кномнеиде
Sigr		Signa	ature of office	er .		2009- Date	11-03	
ler						5415		
			ck L Taylor C or print nam					
	ı	F 'ype	. or print nam				T_	
		Preparer'			Date 2009-11-06	Check if self-	Preparer's PTIN (S	ee Gen Inst)
Paid		signature	F NOY G			empolyed 🕨 🦵		
	arer's		me (or your	Cındrıch Mahalak and Co		<u> </u>	ETN L	
Jse	Only		nployed), and ZIP + 4	31215 Jefferson Ave			EIN 🕨	
							Phone no ► (58	6) 296-1155
4 ~	the IDC	L diacii-	c this ====:	St Clair Shores, MI 48082	oo instrustions)		1	Vas ENO
			- IIIIC FOTII					

Cat No 11282Y

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

To p emp man					
emp man					
	ohasızıng friendliness Managı nagement		ed to members shall be in as wide a variety improve the overall financial condition of the		
the	d the organization unde e prior Form 990 or 990		rogram services during the year whic		Yes ▼ No
If"	"Yes," describe these n	ew services on Schedu	lle O		
ser	rvices?		significant changes in how it conduct	s any program	Yes ✓ No
If"	"Yes," describe these c	hanges on Schedule O			
Se	ction 501(c)(3) and (4)) organizations and 49	each of the organization's three large 47(a)(1) trusts are required to report or each program service reported		
(0	Code) (Expenses \$	0 including grants of \$	0) (Revenue \$	0)
Pr	rovide 62,012 members with	າ Regular Share, Share Draft	, Vacation Club, Christmas Club, Money Mark	cet, IRA, Certificate of Deposit ac	counts totaling 110,325
) (C	Code) (Expenses \$	0 including grants of \$	0) (Revenue \$	0)
(0	Code) (Expenses \$	0 including grants of \$	0) (Revenue \$	0)
D.	Tovide Automated Teller Mac		Orders, Travelers Checks, Safe Deposit Boxes	, whe mansiers, and various hist	mance programs
Pr —					
Pr —					
0) ther program services Expenses \$	•	-) (Revenue \$	0)

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		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νo
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		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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 I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
8	the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		N o
•	complete Schedule D, Part III	8		N o
9	Did the organization report an amount in Part X, line 21, 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	9		Νο
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,		Yes	
4.0	Parts VI, VII, VIII, IX, or X as applicable	11		
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 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 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
ь	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		
	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in an excess benefit transaction with	24a 25a		
b	a disqualified person during the year? If "Yes," complete Schedule L, Part I			
26	from a prior year? If "Yes," complete Schedule L, Part I	25b		
26	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5 percent 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		Νo

Pa	rt V	Statements Regarding Other IRS Filings and Tax Complianc	e				
						Yes	No
1a	Enter	the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
		5. Information Returns . Enter -0- if not applicable					
			1a	28,276			
ь	Enter	the number of Forms W-2G included in line 1a Enter -0- if not applicable					
			1b	0			
c		ne organization comply with backup withholding rules for reportable payments to	o ven	dors and reportable			
	_	ng (gambling) winnings to prize winners?			1c	Yes	
2a		the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> ments filed for the calendar year ending with or within the year covered by this					
	returr		2a	141			
ь	Ifatl	ء east one is reported in 2a, did the organization file all required federal employm	nent t	ax returns?			
	Not e:	If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this	retur	rn.	2b	Yes	
3а		ne organization have unrelated business gross income of \$1,000 or more during	g the	year covered by this	_		
		17	• •		3a	Yes	
		es," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Sch</i> e			3b	Yes	
4a		y time during the calendar year, did the organization have an interest in, or a si a financial account in a foreign country (such as a bank account, securities acc					
		unt)?		, or other interior	4a		No
b	Tf"∨o	es," enter the name of the foreign country					
		he instructions for exceptions and filing requirements for Form TD F 90-22.1, <i>Re</i>	port o	f Foreign Bank and			
	Financ	cial Accounts.		_			
5a	Was t	the organization a party to a prohibited tax shelter transaction at any time durin	ng the	tax year?	5a		No
b	Dıd a	ny taxable party notify the organization that it was or is a party to a prohibited i	tax sh	nelter transaction?	5b		No
	If "Ye	s," to 5a or 5b, did the organization file Form 8886-T, <i>Disclo</i> s <i>ure by Tax-Exemp</i> a	t Entit	ty Regarding Prohibited			
·		helter Transaction?	•	· · ·	5с		
6a	Did th	ne organization solicit any contributions that were not tax deductible?			6a		No
b	If "Ye	s," did the organization include with every solicitation an express statement th	atsu	ch contributions or gifts			
	were	not tax deductible?			6b		
7	Organ	nizations that may receive deductible contributions under section 170(c).					
а		ne organization provide goods or services in exchange for any quid pro quo conf	trıbutı	ion of \$75 or	7a		
		7		10	ı	I	I
		es," did the organization notify the donor of the value of the goods or services pr			7b		
С		ne organization sell, exchange, or otherwise dispose of tangible personal propei orm 8282?			7c		
d		s," indicate the number of Forms 8282 filed during the year	7d				
-	11 10	s, marcate the number of forms of of med during the feat.	7.4				
e		ne organization, during the year, receive any funds, directly or indirectly, to pay					
		it contract?			7e		
f	Did th	ne organization, during the year, pay premiums, directly or indirectly, on a perso	onal b	enefit contract?	7f		
g		ll contributions of qualified intellectual property, did the organization file Form 8			7g		
h		ontributions of cars, boats, airplanes, and other vehicles, did the organization fi	ile a F	orm 1098-C as	76		
8	•	red?		ction E00(a)/3)	7h		
0		orting organizations. Did the supporting organizations maintaining donor advised runds a					
	exces	ss business holdings at any time during the	-	, , ,	8		
		·					<u></u>
9		on 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
а		ne organization make any taxable distributions under section 4966?			9a		
b		ne organization make a distribution to a donor, donor advisor, or related person	· ·		9b		
10		on 501(c)(7) organizations. Enter		1			
		tion fees and capital contributions included on Part VIII, line 12	10a				
b		s receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
	facılıt	cies					
11	Secti	on 501(c)(12) organizations Enter					
а	Gross	s income from members or shareholders					
			11a				
b		s income from other sources (Do not net amounts due or paid to other sources	111				
	agaın	st amounts due or received from them)..........[11b				
12a	Sectio	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	lieu	of Form 1041?	12a		
b	If "Ye	s," enter the amount of tax-exempt interest received or accrued during the	4				
	year		12b	I			I

Section A. Governing Body and Management

No

Νo

Νo

No No

Yes

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions.	ı, desc	ribe the circumstances,
3	Enter the number of voting members of the governing body	1a	g
ь	Enter the number of voting members that are independent	1b	8

2	other officer, director, trustee, or key employee have a family relationship or a business relationship with any	2	
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	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	
6	Does the organization have members or stockholders?	6	Υe
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the		

-	bocs the organization have members, stockholders, or other persons who may elect one or more members of the
	governing body?
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?
	Did the organization contemporaneously document the meetings held or written actions undertaken during the

	Did the organization of	onte	emp	ora	neou	sıy	doc	umei	nt th	e m	eetin	gs ne	ila o	r wri	tten	acti	ons	un	aert	аке	n a	urın	g th	e
	year by the following																							
а	the governing body?																							

ь	each committee with authority to act on behalf of the governing body?						
	Does the organization have local chapters, branches, or affiliates? .						

Ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	
	affiliates, and branches to ensure their operations are consistent with those of the organization?	

Was a copy of the Form 990 provided to the organization's governing body before it was filed? A	ll organı	zatio	ons	
must describe in Schedule O the process, if any, the organization uses to review the Form 990				

	1 , , ,	_
11	Is there any officer, director or 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	L

8a	Yes	
8b	Yes	
9a	Yes	
9b	Yes	
10	Yes	
11		No
,		

Yes Yes

7a

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does 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	
	Describe the process in Schedule O			
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		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. another's website. upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

General Electric Credit Union 10485 Reading Road Cincinnati, OH 45241 (513) 243-4328

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. Use Schedule J-2 if additional space is needed

- * List all of the organization's current officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees Enter -0 - in columns (D), (E), and (F) if no compensation was paid
- * 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 the organization did not compensate any officer, director, trustee or key employee										
		(C) Position (check all that apply)							(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee		Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Lewis Hobbs , Chairman	1	Х						0	0	0
Frank Wagner , 1st Vice Chairman	1	Х						0	0	0
John MacArthur , 2nd Vice Chairman	1	Х						0	0	0
Gordon Burrows , Director	1	Х						0	0	0
Cheryl Hill , Director	1	Х						0	0	0
Michael Johnson, Director	1	Х						0	0	0
Cecil E Neff , Director	1	Х						0	0	0
Mary Cay Vessells , Director	1	Х						0	0	0
Patrick L Taylor , Secretary/Treasurer	1	Х						0	0	0
Patrick L Taylor , CEO	40			Х				1,079,476	0	122,388
Joan E Moore , Chief Financial Officer	40			Х				188,076	0	42,427
Timothy Ballinger , President	40				Х			430,686	0	76,616
Donna D Miller , Chief Operating Officer	40				Х			276,686	0	62,966
Neil Peterson, Director of Lending	40					Χ		109,530	0	22,823
Lisa Hawkins , Executive Assistant	40					Х		109,736	0	16,809

Part VIII Continued

		(C) Position (check all that apply)							(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
1b Total			•				>	2,194,190	0	344,029

- Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►6

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation				
7. Total number of independent contractors (including those in 1) who received more than \$	7. Total number of independent contractors (including those in 1) who received more than \$100,000 in companyation					

Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization

Statement of Revenue

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated campaigns 1a	1		Revende		312, 313, 31 31 1
ants Ints	b	Membership dues					
36 19	c	1b Fundraising events					
ffs, ra≘		10					
2 <u>.e</u>	d e	Related organizations 1d Government grants (contributions) 1e					
Contributions, gifts, grants and other similar amounts	f	All other contributions, gifts, grants, and similar amounts not included above					
^듩		1f					
E E	g	Noncash contributions included in lines 1a-1f \$					
Ow	h	Total (Add lines 1a-1f)		0			
			Business Code				
Шe	2a	Loan Interest	522,130	34,734,668	34,734,668	0	0
e Ke	ь	Fee/Other Income	524,298	3,683,434	3,511,657	171,777	0
9.0 H	С						
er Fe	d						
8	е						
Program Serwce Revenue	f	All other program service revenue		0	0	0	0
Δ	g	Total. Add lines 2a-2f					
	3	Investment income (including divi	dends, interest				
		other similar amounts)	[8,149,575	8,149,575	0	0
	4	Income from investment of tax-exempt b	ond proceeds	0	0	0	0
	5	Royalties		0	0	0	0
		(i) Real	(II) Personal				
	6a	Gross Rents					
	ь	Less rental expenses					
	С	Rental income 0 or (loss)	0				
	d	Net rental income or (loss)					
		(ı) Securities	(II) O ther				
	7a	Gross amount 531,982 from sales of assets other	0				
		than inventory					
	Ь	Less cost or 0 other basis and sales expenses					
	С	Gain or (loss) 531,982	0				
	d	Net gain or (loss)	. •	531,982	531,982	0	0
	8a	Gross income from fundraising events (not including					
Other Revenue		\$ of contributions reported on line 1c) See Part IV, line 18					
é		Attach Schedule G If total exceeds \$15,000 a					
7	ь	Less direct expensesb					
ŧ	с	Net income or (loss) from fundrais					
	9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000					
	_	a					
	b c	Less direct expensesb Net income or (loss) from gaming					
	10a	Gross sales of inventory, less returns and allowances	<u>▶</u>				
		а					
	b	Less cost of goods sold b					
	С	Net income or (loss) from sales of Miscellaneous Revenue	Business Code				
	11a	//					
	ь	-					
	с						
	d	All other revenue					
	e	Total. Add lines 11a-11d	· ·				
	12	Total Boyenia Addings 45 2 - 5	0	47,099,659	46,927,882	171,777	0
	**	Total Revenue. Add lines 1h, 2g, 3 8c, 9c, 10c, and 11e			-10,721,002		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				·				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22								
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors, trustees, and key employees	2,538,219							
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0							
7	Other salaries and wages	5,248,012							
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	364,601							
9	Other employee benefits	1,358,013							
.0	Payroll taxes	358,421							
1	Fees for services (non-employees)								
а	Management								
b	Legal	131,599							
С	Accounting	222,688							
d	Lobbying	·							
e	Professional fundraising See Part IV, line 17								
f	Investment management fees								
g	Other	538,286							
2	Advertising and promotion	421,022							
3	Office expenses	2,469,173							
4	Information technology	0							
5	Royalties	0							
6	Occupancy	456,704							
7	Travel	0							
.8	Payments of travel or entertainment expenses for any Federal, state or local public officials	0							
.9	Conferences, conventions and meetings	64,702							
20	Interest	20,949,754							
1	Payments to affiliates	0							
2	Depreciation, depletion, and amortization	411,828							
3	Insurance	143,720							
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)								
а	Provision for Loan Loss	2,163,504							
b	Credit Card Expense	1,014,555							
c	Interest of Borrowed Money	840,000							
d	Loan Servicing	323,601							
e	Miscellaneous Operating	173,079							
f	All other expenses	94,340							
25	Total functional expenses. Add lines 1 through 24f	40,285,821	0	0					
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	11,130,132							

Part X	Balance	Sheet

					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			4,621,109	1	4,003,470
	2	Savings and temporary cash investments			25,915,765	2	6,804,218
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			1,840,501	4	1,625,707
	5	Receivables from current and former officers, directors, trustees, other related parties Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S	ction	4958(f)(1)) and		6	
	7	Notes and loans receivable, net			477,979,278	7	628,329,844
	8	Inventories for sale or use				8	
22	9	Prepaid expenses and deferred charges			45,007	9	50,247
ssets	10a	Land, buildings, and equipment cost basis	10a	11,099,779			
⋖		Language of the Committee	104	11,099,119	-		
	Ь	Less accumulated depreciation Complete Part VI of Schedule D	10ь	4,048,008	7,280,678	10c	7,051,771
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11 <i>Complete Pail Schedule D</i>	t VII	of	152,467,062	12	122,153,621
	13	Investments—program-related See Part IV, line 11 Complete Pa of Schedule D .	rt VIII	ī	72,289,646	13	51,439,623
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D		8,141,906	15	9,506,983	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			750,580,952	16	830,965,484
	17	Accounts payable and accrued expenses .	18,605,070	17	20,860,594		
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
ēŠ	21	Escrow account liability				21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ä		persons Complete Part II of Schedule L	•		22		
	23	Secured mortgages and notes payable to unrelated third parties		15,000,000	23	15,000,000	
	24	Unsecured notes and loans payable				24	
	25	Other liabilities Complete Part X of Schedule D		593,825,799	25	663,991,145	
	26	Total liabilities. Add lines 17 through 25			627,430,869	26	699,851,739
ses		Organizations that follow SFAS 117, check here ▶ ☐ and complethrough 29, and lines 33 and 34.	ete lir	nes 27			
a Di	27	Unrestricted net assets				27	
Balance	28	Temporarily restricted net assets			28		
Þ	29	Permanently restricted net assets		29			
r Fund		Organizations that do not follow SFAS 117, check here ► 🔽 and lines 30 through 34.	l comp	olete			
s or	30	Capital stock or trust principal, or current funds			0	30	0
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .		0	31	0	
Α	32	Retained earnings, endowment, accumulated income, or other fur		123,150,083	32	131,113,745	
Net	33	Total net assets or fund balances			123,150,083	33	131,113,745
Z	34	Total liabilities and net assets/fund balances			750,580,952	34	830,965,484
	'						
Pa	rt XI	Financial Statements and Reporting					

Dowl VI	Financial	Ctatamanta	and Reporting
7.11.5	l Financiai	Statements	and Reporting

			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		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Νo
b	If "Yes," did the organization undergo the required audit or audits?	3b		

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

Name of the organization **Employer identification number** General Electric Credit Union 31-0568628 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply)

			Held at the End o
2	Complete lines 2a-2d if the organization held a qualified conservatio on the last day of the tax year	n con	tribution in the form of a conservation easement
	Preservation of open space		
	Protection of natural habitat	Γ	Preservation of certified historic structure
	Preservation of land for public use (e.g., recreation or pleasure)	J	Preservation of an historically importantly land ar

- f the Year
- 2a Total number of conservation easements 2b Total acreage restricted by conservation easements
- c 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06 2d
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🕨
- Number of states where property subject to conservation easement is located
- Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?
- Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨
- 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section ☐ Yes 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?
- In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) 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, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
- Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Intructions for Form 990 Cat No 52283D **►** \$

a re a re b re c re	ing the organization's accession and other rec ms (check all that apply) Public exhibition Scholarly research	ords, check any of th d	ne fol	-	_		n	
ь Г с Г 4 Pro		d		Loan or evel				
4 Pro	Scholarly research		•	Louis of exci	hange programs			
4 Pro	Scholarly research	e	Γ	Other				
	Preservation for future generations							
Рa	ovide a description of the organization's collec rt XIV	tions and explain hov	w the	y further the c	organization's ex	empt purpose in		
	iring the year, did the organization solicit or re sets to be sold to raise funds rather than to be						Yes	┌ No
Part I	V Trust, Escrow and Custodial Arra Part IV, line 9, or reported an amou				ınızatıon answ	ered "Yes" to F	orm 9	90,
	the organization an agent, trustee, custodian cluded on Form 990, Part X?	or other intermediary	for c	ontributions o	or other assets I		Yes	┌ No
b If	"Yes," explain why in Part XIV and complete t	he following table					_	
						A mo	unt	
_	eginning balance				1c			
	dditions during the year				1d			
_	stributions during the year				1e			
	nding balance				1f			
	d the organization include an amount on Form	990, Part X, line 21?				ı	Yes	No
	"Yes," explain the arrangement in Part XIV							
Part \							- 1	DI-
1 - Pa		a)Current Year (b)	Prior `	rear (C) I W	o Years Back (d)	Three Years Back (e)rour r	ears back
	ginning of year balance							
	ontributions							
	vestment earnings or losses							
	ants or scholarships							
	ther expenditures for facilities d programs							
f Ac	dministrative expenses							
g En	nd of year balance							
2 Pro	ovide the estimated percentage of the year en	d balance held as						
a Bo	ard designated or quasi-endowment 🕨							
b Pe	rmanent endowment 🕨							
c Te	rm endowment 🕨							
	e there endowment funds not in the possessio	n of the organization	thata	are held and a	dministered for	the		
	ganization by						Yes	No
(i)	unrelated organizations		•			3a(i)		
) related organizations					3a(ii)	<u> </u>	
	"Yes" to 3a(II), are the related organizations II	•				3b		
	scribe in Part XIV the intended uses of the or							
Part V	I Investments—Land, Buildings, a	na Equipment. S		•				
	Description of investment			Cost or other (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Bo	ook value
1a Land	d			0	801,347			801,347
b Buil	dıngs			0	7,519,264	1,982,400		5,536,864
	sehold improvements			0	8,489	0		8,489
c Leas	ipment			0	0	0		0
d Equ	er			0	2,770,679	2,065,608		705,071

investments—Other Securities. See	Form 990, Part X, line 12.	
(a) Description of security or cateory (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		γ
Closely-held equity interests	220,000	C
Other Investments	116,951,712	F
Other Investments	50,000	C
Other CUNA Mutual Life Insurance	1,547,609	C
Other FHLB Stock	3,384,300	C
Other Theb Stock	3,304,300	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	122,153,621	
Part VIII Investments—Program Related. Se	e Form 990, Part X, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Corporate One Federal Credit Union	51,439,623	С
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) ▶	51,439,623	
Part IX Other Assets. See Form 990, Part X, II	·	
(a) Descri		(b) Book value
NCUSIF		5,052,106
A ccrued Income		3,677,447
O ther Assets		777,430
		,
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15)	9,506,983
Part X Other Liabilities. See Form 990, Part 3		
(a) Description of Liability	(b) A mount	
Federal Income Taxes	0	
Member Shares	663,991,145	
	, ,	
	+	
Total (Column (h) chould orgal Form 000, Part V and (R) for 25	440.05	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	663,991,145	

Par	t XI Reconciliation of C	hange in Net Assets from Fori	m 990	<u>0 to F</u>	<u>inancial Stater</u>	<u>nent</u>	:s	
1	Total revenue (Form 990, Part	VIII, column (A), line 12)					1	47,099,659
2	Total expenses (Form 990, Pai	rt IX, column (A), line 25)					2	40,285,821
3	Excess or (deficit) for the year Subtract line 2 from line 1						3	6,813,838
4	Net unrealized gains (losses) o	n investments					4	1,149,824
5	Donated services and use of fa	cilities					5	0
6	Investment expenses						6	0
7	Prior period adjustments						7	0
8	Other (Describe in Part XIV)						8	0
9	Total adjustments (net) Add I	nes 4 - 8					9	1,149,824
10	,	per financial statements Combine line	s 3 an	d 9			10	7,963,662
Part		evenue per Audited Financial			ts With Revenu	ie pe	r Re	turn
1		er support per audited financial					1	47,099,659
2	Amounts included on line 1 bu	ut not on Form 990, Part VIII, line 12						
а	Net unrealized gains on invest	tments	. [2a		0		
b	Donated services and use of f	acılıtıes	. [2b		0		
c	Recoveries of prior year grant	s	. [2c		0		
d	Other (Describe in Part XIV)		[2d		0		
e	Add lines 2a through 2d .					· [_:	2e	0
3	Subtract line ${f 2e}$ from line ${f 1}$.					· L	3	47,099,659
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		0		
b	Other (Describe in Part XIV)		. [4b		0		
c	Add lines 4a and 4b					· <u>L</u>	4c	0
5		d 4c. (This should equal Form 990, Par					5	47,099,659
		xpenses per Audited Financia		temer	nts With Expen	ses j		
1		raudited financial statements				•	1	40,285,821
2		it not on Form 990, Part IX, line 25		_	I			
a	Donated services and use of for	acilities		2a		0		
b	Prior year adjustments	Deat IV Less 25		2b		0		
с	·	, Part IX, line 25		2c		0		
d	Other (Describe in Part XIV)		•	2d			_	0
e ¬	Add lines 2a through 2d Subtract line 2e from line 1 .					• -	2e	0
3			•			. ⊢	3	40,285,821
4		0, Part IX, line 25, but not on line 1:		4-	1			
a L	Other (Describe in Part XIV)	uded on Form 990, Part VIII, line 7b	• •	4a 4b		0		
b			•	4D		ightharpoonup	4-	0
C E	Add lines 4a and 4b	nd 4c. (This should equal Form 990, Pa	 			. ⊢	4c	
5 Dar	t XIV Supplemental Inf		rt 1, III	ne 18)		•	5	40,285,821
Com	plete this part to provide the de	scriptions required for Part II, lines 3, , Part XII, lines 2d and 4b, and Part XI				1, Par	t XIV,	lines 1b and 2b,
	Ident if ier	Return Reference			Expla	nat io	n	
	D10 C00 L00	Cahadula D. Dawt V	0.41	هدادها سا			<u></u>	

Ident if ier	Return Reference	Explanation
SchD_P10_S00_L00	Schedule D, Part X	Other Liabilities consist of Member shares

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DLN: 93493078006040

OMB No 1545-0047

Employer identification number

Schedule J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

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Gen	eral Electric Credit Union		• •		
		3	31-0568628		
Pa	rt I Questions Regarding Compensation				
				Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III	· · · · · · · · · · · · · · · · · · ·			
	First class or charter travel	Housing allowance or residence for p	ersonal use		
	▼ Travel for companions	Payments for business use of person	nal residence		
	Tax idemnification and gross-up payments	✓ Health or social club dues or initiation	n fees		
	Discretionary spending account	Personal services (e g , maid, chauffe	eur, chef)		
b	If line 1a is checked, did the organization follow a wr provision of all the expenses described above? If "N		nent or	Yes	
2	Did the organization require substantiation prior to r officers, directors, trustees, and the CEO/Executive				Νο
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the Compensation committee	at apply Mritten employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensati	on committee		
4	During the year, did any person listed in Form 990, I	art VII, Section A, line 1a			
а	Receive a severance payment or change of control p	ayment?	4a		Νo
b	Participate in, or receive payment from, a supplemen	tal nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-ba	sed compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	vide the applicable amounts for each item in	Part III		
	501(c)(3) and 501(c)(4) organizations only must co	nplete lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	ine 1a, did the organization pay or accrue an	у		
а	The organization?		5a		
b	Any related organization?		5b		
	If "Yes," to line 5a or 5b, describe in Part III			1	
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	ine 1a, did the organization pay or accrue an	у		
а	The organization?		6a		
b	Any related organization?		6b	\top	
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d	•	fixed 7		
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III	aid or accured pursuant to a contract that wa			

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
Patrick L Taylor	(I) (II)	541,918 0	208,068 0	329,490 0	0	122,388 0	1,201,864 0	0 0
Joan E Moore	(I) (II)	164,230 0	23,846 0	0	13,875 0	28,552 0	230,503 0	0 0
Timothy Ballinger	(I) (II)	321,021 0	86,329 0	23,336 0	34,372 0	42,244 0	507,302 0	0 0
Donna D Miller	(ı) (ıı)	232,328 0	40,681 0	3,677 0	31,281 0	31,685 0	339,652 0	0 0
	(i)							
	(ii)							
	(i)							
	(ii)	_						
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
SchJ_P01_S00_L01a	Schedule J, Part I, Line 1a	The Credit Union has policies which allow certain travel expenses to be paid by the credit union when a guest accompanies an official or employee on credit union business. These expenses are treated as taxable income to the official or employee on whose behalf the expenses are paid. Health club membership represents a portion of the Chief Executive Officer's total compensation package.
SchJ_P01_S00_L04	Schedule J, Part I, Line 4	Patrick Taylor, CEO, received payment of \$256,973 from retirement plan in 2008

OMB No 1545-0047

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Name of the organization General Electric Credit Union **Employer identification number**

31-0568628

ldentifier	Return Reference	Explanation
F990_P06_S0A_L06	Form 990, Part VI, Section A, Line 6	The credit union has 62,012 members

	ldentifier	Return Reference	Explanation
F99	90_P06_S0A_L07a	Form 990, Part VI, Section A, Line 7a	The Board of Directors is elected by the membership ballot vote counted by a Certified Public Accounting firm. The results are announced at the Annual Meeting. Each member is elected for a three year term.

ldentifier	Return Reference	Explanation
F990_P06_S0A_L07b	Form 990, Part VI, Section A, Line 7b	Credit Union decisions that are subject to membership approval are mergers and charter changes

ldentifier	Return Reference	Explanation
F990_P06_S0A_L10	Form 990, Part VI, Section A, Line 10	A review is conducted by the CFO and CEO prior to submission to the IRS. The returns are made available to the Board of Directors for review

I Identifier I		Return Reference	Explanation
F990_P	² 06_S0B_L15	Form 990, Part VI, Section B, Line 15	CEO evaluation is completed by Human Resources and a Compensation Committee made up of selected Board of Director members. The evaluation is submitted to the entire Board of Directors for review and approval Salary increases are based on Credit Union performance and compensation/salary survey. Key Employees and CFO are evaluated by CEO and Human Resources. Salary increases are approved by the CEO and submitted to the Executive Committee of the Board of Directors for review and approval.

ldentifier	Return Reference	Explanation						
F990_P06_S0C_L19		Financial Statements are posted in the Credit Union lobby. Other documents and policies are available for review upon request						

ldentifier	Return Reference	Explanation						
F990_P06_S0B_L12c		Employees and Board of Directors are required to disclose conflicts of interest when they occur. The policy is enforced through the personnel policy.						

DLN: 93493078006040

2008

OMB No 1545-0047

Open to Public Inspection

Employer identification number

SCHEDULE R (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Related Organizations and Unrelated Partnerships

General Electric Credit Union 31-0568628 Part I Identification of Disregarded Entities (D) (B) (C) Name, address, and EIN of disregarded entity Legal domicile (state Total income End-of-year assets Direct controlling Primary activity or foreign country) entity Part II Identification of Related Tax-Exempt Organizations (B) Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Direct controlling Primary activity or foreign country) (if section 501(c)(3)) entity

art III Identification of		-	1	-		T		T		I	T		
(A) Name, address, and EIN of related organization	(B) Primary ad	(B) ary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H) Disproprtionat allocations?		Code V—UBI amount on Box 20 of K-1		General o managing partner?	
								Yes	No		Yes	No	
												<u> </u>	
Part IV Identification of	Related Org	ganizations	Taxable a	s a Corporation	ı or Trust								
(A) Name, address, and EIN of related o	organization	(B) Primary activi	,	(C) gal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total incom	e	Sha end-c	re of Perc	(H) entage nership		
CUSO Corporation 10485 Reading Road Cincinnati, OH45241 31-1420019		Mortgage Servic	es	ОН		С	194,8	71		114,356 1 00	%		

Part V	Transactions with Related Organizations
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Pel	τν	Transactions with Related Organizations									
	Note.	Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No					
1 Du	rıng th	e tax year, did the orgranization engage in any of the following transaction	ns with one or more related organizations listed in Parts II-	·IV?							
а	Recei	pt of (i) ınterest (ii) annuıtıes (iii) royaltıes (iv) rent from a controlled entı	ıty	Ī	1a	No					
b	Gıft, g	rant, or capital contribution to other organization(s)		1	1b	No					
c	Gıft, g	rant, or capital contribution from other organization(s)		1	1c	No					
d	Loans	or loan guarantees to or for other organization(s)		1	1d	No					
e	Loans	or loan guarantees by other organization(s)		[1	1e	No					
f	Sale of assets to other organization(s)										
g	Purch	ase of assets from other organization(s)		ا	1g	No					
h	Excha	inge of assets		1	1h	No					
i 1	Lease	of facilities, equipment, or other assets to other organization(s)		<u>[</u>	1i	No					
j	Lease	of facilities, equipment, or other assets from other organization(s)		<u> </u>	1j	No					
k	Perfor	mance of services or membership or fundraising solicitations for other org	ganization(s)	_1	1k	No					
1 1	Perforr	mance of services or membership or fundraising solicitations by other orga	anızatıon(s)	<u>[</u> :	11	No					
m	Sharın	g of facilities, equipment, mailing lists, or other assets		[1	1m	No					
n	Sharır	ng of paɪd employees		_1	1n	No					
o	Reımb	oursement paid to other organization for expenses		1	10	No					
р	Reımb	oursement paid by other organization for expenses		_1	1p	No					
q	Other	transfer of cash or property to other organization(s)		_1	1q	No					
r	O ther	transfer of cash or property from other organization(s)		Ŀ	1r	No					
2	Ifthe	answer to any of the above is "Yes," see the instructions for information or	n who must complete this line, including covered relations	hips and transaction thresholds							
		(A)	(B) Transaction	(C)							
		Name of other organization(s)	type(a-r)	Amount Involved							
(1)											
(2)											
<u> </u>											
(3)											
(4)											
(+)											
(5)											
(6)											

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

									_	
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No
			•	•		•		Sabadula	D / Form	