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Form **990**

Department of the Treasury

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

Open to Public
Inspection

A F0	r the C	2008 salandar v	ear, or tax year beginning	01-01-2008 and ending 12-31-200			Inspection
			C Name of organization	01-01-2006 and ending 12-31-200	10	D Employer i	identification number
_	ress ch	Ficase	CESSNA EMPLOYEES CREI	OIT UNION		48-6107	341
_	ne char	label or	I DUITU DUSITIESS AS			E Telephone	
	ial retur	type. Se				(316) 517	7-6578
_	minatio	Instruc-		D box if mail is not delivered to street addre	ess) Room/suite	G Gross receip	ots \$ 11,311,025
	ended r		City or town, state or cou	ntry, and 7IP + 4			
_		pending	WICHITA, KS 672151423				
ו יי	nication			nal affican			
			lame and address of princi RENCE DAMM	pai officer	H(a) Is this	s a group retu tes?	ırn for ┌ Yes
		l l	R CESSNA BOULEVARD HITA, KS 672151423				
		l Wie	1117A, KS 072131423		1	affiliates inclu	
I Ta	x-exem	pt status 🔽 501	1(c) (14) ◀ (insert no)	1947(a)(1) or 527		, attach a iis p exemption r	st (see instructions) number >
	ebsit e	: ► WWW CESS	NACU NET		(5)	•	
				Tout h	1. 4. 66		M 61 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Summary	oration Trust Association	Other -	L Year of to	rmation 1941	M State of legal domicile KS
			the organization's mission	or most significant activities			
		•	PERATIVE FINANCIAL S	-			
Ž							
Ē							
Activities & Governance	2	Check this box I	▶── if the organization dis	continued its operations or disposed	of more than	25% of its as	sets
្វ	3	Number of votin	g members of the governir	ig body (Part VI, line 1a)			3
40 ደሳ ለህ	4	Number of indep	pendent voting members of	the governing body (Part VI, line 1	b)		15,87
Ě	5	Total number of	employees (Part V , line 2	a)			53
<u></u>			volunteers (estimate if ne		61		
٠.		=	elated business revenue fr		7a 37,21		
	ь	Net unrelated bu	usiness taxable income fro	om Form 990-T, line 34			7b -19,73
		Cambushishiana		1.1.	Prio	r Year	Current Year
₫	8			1h)		7,545,582	0 025 121
	10			2g)		1,998,053	
Reven	11			nes 5, 6d, 8c, 9c, 10c, and 11e)		54,410	
	12			nust equal Part VIII, column (A), lin	e	·	
						9,598,045	
	13			(, column (A), lines 1-3)			0
	14		o or for members (Part IX,		0		
\$	15	10)	compensation, employee	benefits (Part IX, column (A), lines	1,780,449	2,121,212	
Expenses	16a	Professional fu	ındraısıng fees (Part IX, co	lumn (A), line 11e)			0
ភិ	ь	Total fundraising e	expenses (Part IX, column (D), I	ıne 25) ▶ 0			
	17	Other expense	es (Part IX, column (A), lın	es 11a-11d, 11f-24f)		5,442,486	6,390,282
	18	•	•	equal Part IX, column (A), line 25)		7,222,935	8,511,494
. 02	19	Revenue less e	expenses Subtract line 18	from line 12		2,375,110	2,791,520
ර්ජි කුල						ng of Year	End of Year
SS et al.	20				-	118,868,069	140,914,899
Net Assets or Fund Balances	21	Total liabilities	s (Part X, line 26)			97,539,861	116,904,761
	22			e 21 from line 20		21,328,208	24,010,138
Pai	rt II	Signature I					
				xamined this return, including accompanying ation of preparer (other than officer) is base			
C: ~ ~	_	*****	, , ,	,	1	06-20	
Sign Here		Signature of of	ficer		Date		
			MM PRESIDENT				
		Type or print n	name and title			_	
		Preparer's			Check if self-	Preparer's ide	ntıfyıng number ons)
Paid -		signature			empolyed •	(See manache	····-,
	arer's	Firm's name (or your self-employed),	ours STEPHEN LANG & ASSOC	CIATES LLC		EIN Þ	
Use (ווע	address, and ZIP +	- 4 14323 S OUTER 40 STE	N205			
			CHESTERFIELD, MO 63	017		Phone no 🕨	(314) 205-8601
Mav	he IR	S discuss this re	eturn with the preparer sho	wn above? (see instructions)			✓ Yes

Par	t IIII Statemen	t of Program Service	Accomplishments (see ınst	ructions)	
1		e organization's mission	, teter pilotine (eee mee	racionor)	
PRO	VIDE COOPERATIV	'E FINANCIAL SERVICES	TO MEMBERS		
2	Did the organization the prior Form 990		program services during the year v		Yes 🔽 No
	If "Yes," describe tl	nese new services on Sched	ule O		
3	services?	<u>.</u> ,	significant changes in how it con		Yes 🔽 No
4	Section 501(c)(3)	and 501(c)(4) organizations	reach of the organization's three la and section 4947(a)(1) trusts ar evenue, if any, for each program so	e required to report the amoun	
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	CREDIT UNION PROGE	RAMS PROVIDE SAVINGS, CHECKI	NG AND OTHER DEPOSITORY SERVICES T	O MEMBERS (15,876 MEMBERS)	
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	CREDIT UNION PROGR MEMBERS)	RAMS PROVIDE A SOURCE OF COL	NSUMER AND MORTGAGE CREDIT TO MEN	MBERS AT A FAIR AND REASONABLE R	ATE OF INTEREST (15,876
	(Code) (Expenses \$	including grants of \$) (Revenue \$)
		RAMS PROVIDE FINANCIAL INFOR AND PRESERVATION (15,876 MEM	MATION AND EDUCATION TO MEMBERS IN	N THE AREAS OF SAVING, CREDIT AN	D RELATED PERSONAL
4d		rvices (Describe in Schedul 	•		
	(Expenses \$	ıncludın	g grants of \$) (Revenue \$)
4e	Total program ser	vice expenses ⊩ \$	(Must equal Part IX,	Line 25, column (B).)	

Part IV Checklist of Required Schedules	art IV	Checklist of	Required	Schedules
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			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	Yes	
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, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
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		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{3}$	10		Νο
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	Yes	
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 described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
Ь	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		No
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? If "Yes," complete Schedule F, Part II	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? If "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		Νo
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		Νο
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		Νο
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		No
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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
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		Νο

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? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νo
С	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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "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		No
36	Section 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% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

	990 (2008)			Page
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		Yes	No
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return		100	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
F-		5a		Νο
5а Ь	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5b 5c		NO
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Νο
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		110
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f a	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7f 7g		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	79		
•	required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

(316) 517-6578

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

Se	ction A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 1a 7			
b	Enter the number of voting members that are independent 1b 15,876			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		N o
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a	Yes	
b	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?	9b	Yes	_
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes	
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	11		Νο
Se	ction B. Policies			_
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	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 (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," 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		
Se	ction C. Disclosure	· · · · · · · · · · · · · · · · · · ·		
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	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 LAWRENCE DAMM FOUR CESSNA BOULEVARD WICHITA, KS 672151423	ie orga	nızatıor	.

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), 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 th	ne organizat	tion did not compensate any officer,	, dire	ctor,	trus	stee c	rke	y employee		
(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) x Individual	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
			g.			Ted_				
PHILIP CHRONISTER CHAIRMAN	2 00	X						0	0	0
KATHY SYBOLE BOARD MEMBER	1 00	х						0	0	0
DARRELL ELKINTON BOARD MEMBER	1 00	Х						0	0	0
LINDA STARNES BOARD MEMBER	1 00	х						0	0	0
WANDA SCOTT BOARD MEMBER	1 00	х						0	0	0
MISTY RANDALL BOARD MEMBER	1 00	Х						0	0	0
WALT THOMPSON BOARD MEMBER	1 00	Х						0	0	0
LAWRENCE DAMM PRESIDENT	48 00			х				161,224	0	7,049
CATHY WARFEL VICE PRESIDENT	48 00			х				73,223	0	3,442
ROBERT MEYER VICE PRESIDENT	48 00			х				95,720	0	4,437
KEVIN WILMOTH VICE PRESIDENT	48 00			х				82,425	0	3,878
JUDIE SEXSON VICE PRESIDENT	48 00			х				86,974	0	3,900

from the organization 🗠 0

Section A. Officers	. Directors	. Trustees, Ke	v Employees	and Highest Com	pensated Employees	(continued

		(C) Position (check all that apply)						(5)	(5)		(F	
(A) Name and Title	(B) A verage hours per week	x Individual	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportab compensat from relat organizatio (W- 2/109 MISC)	ion ed ons	Estim amou oth compen from organiz and re organiz	nt of er sation the zation lated
				-								
.b Total				<u> </u>		>		499,566		0		22,70
? Total number compensation		s (including those in 1a) who rec anization▶1	eıved m	ore '	than	\$100	00,0	0 ın reportable		 		
											Yes	No
		ny former officer, director or trus							d employee			
		ete Schedule J for such individual n line 1a, is the sum of reportable							om the	3	+	No
		ganizations greater than \$150,0							om the	_		
	n listed on li	• • • • • • • • • • • • • • • • • • •	• • satıon fr	om .	• any	• unrela	• • ated	organization for s	ervices	4	Yes	
		on? If "Yes," complete Schedule J								5		Νο
Section B. Ind	lependent	Contractors										
L Complete this	table for you	ur five highest compensated inde n from the organization	ependen	t co	ntra	ctors	that	received more th	an			
\$100,000 010	compensatio	(A) Name and business address						Descriptio	(B) on of services		(C Comper	

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
2#	1a	Federated campaigns 1a					
₹ 5	b	Membership dues 1b					
"Ē	С	Fundraising events 1c					
. . .	d	Related organizations 1d					
έĒΙ	e	Government grants (contributions) 1e					
5.2	f	All other contributions, gifts, grants, and 1f					
<u> </u>		similar amounts not included above Noncash contributions included in					
contributions, gins, grants and other similar amounts	g h	lines 1a-1f \$ Total. Add lines 1a-1f	▶				
	-		Business Code				
III	2a	INTEREST ON LOANS	522,100	6,537,709	6,537,709		
e ke	ь	FEES & OTHER INCOME	522,100	2,360,206	2,360,206		
م ح	С	NON-MEMBER ATM FEES	522,100	36,258	2,300,200	36,258	
Ž.	_			-		•	
38	d	WARRANTY SALES	522,100	958		958	
Program Serwoe Revenue	e f	All other program service revenue					
Š	g	Total. Add lines 2a-2f		8,935,131			
	3	Investment income (including dividends,		. , -			
		and other similar amounts)	. F	2,327,213	2,327,213		
	4	Income from investment of tax-exempt bond produced	⊢				
	5	Royalties	▶ [18,000	18,000		
		(ı) Real	(II) Personal				
	6a	Gross Rents					
	b	Less rental expenses					
	С	Rental income					
	d	or (loss) Net rental income or (loss)	-				
		(i) Securities	(II) O ther				
	7a	Gross amount	(II) O thei				
		from sales of assets other					
		than inventory	0.011				
	Ь	Less cost or other basis and	8,011				
	С	sales expenses Gain or (loss)	-8,011				
	d	Net gain or (loss)		-8,011	-8,011		
	8a	Gross income from fundraising		5,611	3,011		
υ	ou.	events (not including					
= =		\$					
* *		of contributions reported on line 1c) See Part IV, line 18					
Omer Revenue		a					
	b	Less direct expenses b					
5	С	Net income or (loss) from fundraising eve	ents 🕨				
	9a	Gross income from gaming activities					
		See Part IV, line 19					
		a					
	b	Less direct expenses b	ıes ▶ -				
	C 100	Net income or (loss) from gaming activity	185 F				
	10a	Gross sales of inventory, less returns and allowances .					
	b	<u> </u>					
	С	Less cost of goods sold b Net income or (loss) from sales of invent	orv 🕨				
ŀ			Business Code				
}	11a	SALE OF 1ST MORTGAGES	522,100	30,681	30,681		
	b	SALE OF 131 MORIGAGES	,	,	,		
	C .	A ll sale sur us					
	d	All other revenue		30,681			
	12	Total Bosons Add Issa 1b 2c 2 4 5	64710	11,303,014	11,265,798	37,216	0
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 9c, 10c, and 11e	6d, /d, 8c, ►	11,303,014	11,203,798	37,216	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.								
	ll other organizations must complete column (A) but are not required to		(B), (C), and (B)	(D).	(D)			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	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	499,566						
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$							
7	Other salaries and wages	985,515						
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)	173,032						
9	Other employee benefits	330,503						
10	Payroll taxes	132,596						
11	Fees for services (non-employees)							
а	Management	73,614						
b	Legal	60,578						
C	Accounting	36,000						
d	Lobbying							
е	Professional fundraising See Part IV, line 17							
f	Investment management fees							
g	Other							
12	Advertising and promotion	37,866						
13	Office expenses	235,984						
14	Information technology	69,695						
15	Royalties							
16	Occupancy	19,122						
17	Travel	33,338						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	38,082						
20	Interest							
21	Payments to affiliates	205 520						
22 23	Insurance	205,538						
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)	33,303						
а	DIVIDENDS TO MEMBERS	3,796,153						
ь	DEBIT,ATM,CHECKING SERV	467,065						
с	SHARED BRANCH/LOAN PROC	451,243						
d	MISCELLANEOUS	416,015						
e	PROVISION FOR LOAN LOSS	416,000						
f	All other expenses							
25	Total functional expenses. Add lines 1 through 24f	8,511,494						
26	Joint Costs. Check here ► ☐ If following SOP 98-2							
	Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation							

Pa	rt X	Balance Sheet						
					(A) Beginning of year		(B) End of	-
	1	Cash—non-interest-bearing			1,732,483	1	7	7,812,580
	2	Savings and temporary cash investments			5,904,000	2	6	5,000,681
	3	Pledges and grants receivable, net				3		
	4	Accounts receivable, net			940,737	4		737,997
	5	Receivables from current and former officers, directors, trustees other related parties $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		employees or		5		
	6	Receivables from other disqualified persons (as defined under sepersons described in section 4958(c)(3)(B) Complete Part II of				6		
	7	Notes and loans receivable, net			75,066,774	7	86	5,927,153
ets	8	Inventories for sale or use				8		
Assets	9	Prepaid expenses and deferred charges			155,246	9		154,514
4	10a	Land, buildings, and equipment cost basis	, , , , ,					
	b	Less accumulated depreciation Complete Part VI of Schedule D	 				4	1,186,117
	11	Investments—publicly traded securities				11		
	12	Investments—other securities See Part IV, line 11			33,887,588	12	38	3,028,796
	13	Investments—program-related See Part IV, line 11				13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11			0	15		67,061
	16	Total assets. Add lines 1 through 15 (must equal line 34)			118,868,069	16	140	0,914,899
	17	Accounts payable and accrued expenses .			1,673,984	17		1,697,474
	18	Grants payable		18		<u> </u>		
	19	Deferred revenue		19				
	20	Tax-exempt bond liabilities		20				
တ္	21	Escrow account liability Complete Part IV of Schedule D		21				
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
<u>.e</u>		persons Complete Part II of Schedule L		22				
	23	Secured mortgages and notes payable to unrelated third parties			23			
	24	Unsecured notes and loans payable		24				
	25	Other liabilities Complete Part X of Schedule D	95,865,877	25	115	5,207,287		
	26	Total liabilities. Add lines 17 through 25	97,539,861	26	116	5,904,761		
- √ 0		Organizations that follow SFAS 117, check here ▶ ┌ and comp	let e I	ines 27				
Balance	27	through 29, and lines 33 and 34. Unrestricted net assets				27		
<u>ह</u>	28	Temporarily restricted net assets				28		
	29	Permanently restricted net assets				29		
Fund	29	Organizations that do not follow SFAS 117, check here ▶ ✓ an	d com	unlot o		29		
2		lines 30 through 34.	ia con	ipiete				
Assets	30	Capital stock or trust principal, or current funds	•		0	30		0
35	31	Paid-in or capital surplus, or land, building or equipment fund		31				
	32	Retained earnings, endowment, accumulated income, or other fu	21,328,208	32		4,010,138		
¥	33	Total net assets or fund balances	21,328,208	33		4,010,138		
Do	34	Total liabilities and net assets/fund balances			118,868,069	34	140	0,914,899
Ра	rt XI	Financial Statements and Reporting						
1	Acco	unting method used to prepare the Form 990 Cash	Accr	ual Other			Yes	No
2a	Were	the organization's financial statements compiled or reviewed by	an ind	lependent account	tant?	2a	Yes	
b	Were	the organization's financial statements audited by an independent	nt acc	ountant?		2b	Yes	
c		es" to 2a or 2b, does the organization have a committee that ass , review, or compilation of its financial statements and selection				2c	Yes	
3a		result of a federal award, was the organization required to underg e Audit Act and OMB Circular A-133?			set forth in the	3a		No
b	If "Ye	es," did the organization undergo the required audit or audits? $$.				3b		

Additional Data

Software ID:

Software Version:

EIN: 48-6107341

Name: CESSNA EMPLOYEES CREDIT UNION

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
DIVIDENDS TO MEMBERS	3,796,153			
DEBIT,ATM,CHECKING SERV	467,065			
SHARED BRANCH/LOAN PROC	451,243			
MISCELLANEOUS	416,015			
PROVISION FOR LOAN LOSS	416,000			

DLN: 93493171000251

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

1120-POL, line 17b

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities) ◆ Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B ◆ Section 527 organizations complete Part I-A only If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities) ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) ◆ Section 501(c)(4), (5), or (6) organizations complete Part III Name of the organization Employer identification number CESSNA EMPLOYEES CREDIT UNION 48-6107341 Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations. (See the instructions for Schedule C for details.) Provide a description of the organization's direct and indirect political campaign activities in Part IV 1 2 Political expenditures 3 Volunteer hours Part I-B To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.) 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred in a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3). (See the instructions for Schedule C for details.) 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 395 Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt funtion activities

Did the filing organization file Form 1120-POL for this year? State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate

segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form

(e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and internal funds If none, directly delivered to a enter -0separate political organization If none, enter -0-KANSAS CREDIT UNION 650 S WESTDALE DR SUITE 100 LEGISLATIVE ACTION COMMITTEE 395 48-0288307 WICHITA, KS 67209

d Grassroots non-taxable amount

f Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line d, column (e))

P	art II-A To be completed by (election under sec						768
	Check If the filing organization	belongs to an affili	ated group				
<u>B</u>	Check If the filing organization Limits on Lo (The term "expenditure	bbying Expend	litures—		oly	(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion	(grass roots lob	bying)			
ь	Total lobbying expenditures to influe	nce a legislative b	ody (direct lobby	yıng)			
c	Total lobbying expenditures (add line	es 1a and 1b)					
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures	(add lines 1c and 1	Ld)				
f	Lobbying nontaxable amount Enters columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000		taxable amount				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$	500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	of the excess over \$	51,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	f the excess over \$1	1,500,000			
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (ente	er 25% of line 1f)					
h	Subtract line 1g from line 1a Enter	0- ıflıne g ıs more	than line a				
i	Subtract line 1f from line 1c Enter-	0- ıflıne fıs more t	than line c				
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h c	or line 11, did the	organization file	Form 4720 rep	orting	┌ Yes ┌ No
	(Some organizations tha columns below.		on 501(h) el	ection do not	: have to cor		he five
	Lobb	ying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fisca beginning in)	l year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
_2a	Lobbying non-taxable amount						
	Lobbying ceiling amount (150% of line 2a, column(e))						
	: Total lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2008

	5768 (election under section 501(h)). (See the instructions for Schedule C for d					
		(a	1)		(b)	
	·	Yes	No	A	moun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
а	referendum, through the use of Volunteers?					
ь				1		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?					
i	Other activities If "Yes," describe in Part IV					
j	Total lines 1c through					
-	1) Did the patientias in line 1 agree the argument on to be not decombed in pastion F01/a\/2\/2		Ī	1		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes" enter the amount of any tax incurred under section 4912			+		
	If "Yes" enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	t III-A To be completed by all organizations exempt under section 501(c)(4), sec	tion	5016) or	
G.	section 501(c)(6). (See the instructions for Schedule C for details.)		301(,, 0.	
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		<u> </u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Par	t III-B To be completed by all organizations exempt under section 501(c)(4), sec					
	section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" (question 3 is answered "Yes." (See the instructions for Schedule C for details.)	OK II	Part	III-A	٠,	
1	Dues, assessments and similar amounts from members	T	1 \$			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	F	'			
	expenses for which the section 527(f) tax was paid).					
	Current Year		2a \$			
b	Carryover from last year		2b\$			
c	Total	<u> </u>	2c \$			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	-	3 \$			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political					
	expenditure next year?		4 \$			
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5 \$			
Pā	Supplemental Information	•				
	mplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and F so, complete this part for any additional information	Part II	l-B, line	e 1ı		
	Identifier Return Reference Explanation	on				

Part IV Supplemental Information								
Ident if ier	Return Reference	Explanation						

Schedule C (Form 990 or 990EZ) 2008

For Paperwork Reduction Act Notice, see the Intructions for Form 990

OMB No 1545-0047

Open to Public Inspection

Schedule D (Form 990) 2008

SCHEDULE D (Form 990)

Department of the Treasury

▶ 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

Internal Revenue Service Name of the organization Employer identification number CESSNA EMPLOYEES CREDIT UNION

			48-610/34	· 1
art I	Organizations Maintaining Donor Acorganization answered "Yes" to Form 99			
		(a) Donor advised funds	(b) Fund	ls and other accounts
Total	number at end of year			
Aggre	gate contributions to (during year)			
Aggre	gate grants from (during year)			
Aggre	gate value at end of year			
	ne organization inform all donors and donor advi are the organization's property, subject to the o		or advised	□Yes □No
used (imper	ne organization inform all grantees, donors, and only for charitable purposes and not for the benimissible private benefit?		•	┌ Yes
rt II	Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	o Form 990,	Part IV, line 7.
Г Р Г Р	use(s) of conservation easements held by the or treservation of land for public use (e g , recreati trotection of natural habitat treservation of open space whete lines 2a-2d if the organization held a quali	on or pleasure) Preservation of an Preservation of ce	rtıfıed hıstorıc	
	e last day of the tax year	ned conservation contribution in the form		Held at the End of the Yea
Toto	I number of conservation easements		2a	
			2b	
	Il acreage restricted by conservation easement			
	ber of conservation easements on a certified hi	. ,	2c	
Num	iber of conservation easements included in (c) a	acquired after 8/17/06	2d	
Numb	er of conservation easements modified, transfe	rred, released, extinguished, or terminate	d by the organ	ization during
the ta	xable year 🗠			
Numb	er of states where property subject to conserva	ation easement is located 🟲		
	the organization have a written policy regarding cement of the conservation easements it holds?	· · · · · · · · · · · · · · · · · · ·	ations, and	┌ Yes
Staff	or volunteer hours devoted to monitoring, inspe	cting and enforcing easements during the	year ►	
A mou	int of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ear ► \$	
	each conservation easement reported on line 2 n)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion	┌ Yes ┌ No
balan	rt XIV, describe how the organization reports co ce sheet, and include, if applicable, the text of t ganization's accounting for conservation easen	he footnote to the organization's financial nents	statements th	nat describes
rt III	Organizations Maintaining Collectio Complete If the organization answered "		or Other Si	milar Assets.
art, hı	organization elected, as permitted under SFAS istorical treasures, or other similar assets held de, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furtherand	
hıstor	organization elected, as permitted under SFAS rical treasures, or other similar assets held for p de the following amounts relating to these items	public exhibition, education, or research i		
(i) Re	evenues included in Form 990, Part VIII, line 1		•	- \$
(ii) As	ssets included in Form 990, Part X		> 9	\$
Ifthe	organization received or held works of art, historing amounts required to be reported under SFA	•	or financial gair	n, provide the
Rever	nues included in Form 990, Part VIII, line 1		▶ 5	\$
Asset	ts included in Form 990, Part X		▶ - \$	

Cat No 52283D

Part	IIII Organizations Maintaining Co	llections of Art	, His	tori	cal Tr	easu	ires, or C	the	r Similar Ass	ets (co	ntınued)
	Using the organization's accession and other items (check all that apply)	r records, check and	y of th	e foll	owing t	that ar	e a significa	ant u	se of its collectio	n	
а	Public exhibition		d	Γ	Loan	orexc	hange progi	ams			
b	Scholarly research		e	Γ	Other	-					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın hov	v the y	/ furthe	erthed	organızatıor	ı's ex	empt purpose in		
	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	Г No
Part	Part IV, line 9, or reported an an						anızatıon a	nsw	ered "Yes" to F	orm 9	90,
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	for c	ontrıbu	tions	or other ass	etsı		Yes	☐ No
b	If "Yes," explain why in Part XIV and comple	te the following tab	le				Г		A mo	unt	
с	Reginning halance						-	1c	Allo	unt	
d	Beginning balance Additions during the year						-	1d			
e	Distributions during the year						}	1e			
f	Ending balance						_	1f			
		000 D- at V I	- 242				L	11			
	Did the organization include an amount on Fo		e 217						ı	Yes	No
	If "Yes," explain the arrangement in Part XIV				ما الام	o!! +o	Farm 000	Day	+ T\/ line 10		
Par	t V Endowment Funds. Complete	(a)Current Year		Mere Prior Y			rorm 990, o Years Back			≘) Four Ye	ears Back
1a	Beginning of year balance	(,	<u> </u>			(-,		(=)		,	
ь	Contributions										
с	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held a	as								
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment										
c	Term endowment ▶										
	Are there endowment funds not in the posses organization by	ssion of the organiz	ation 1	hat a	re held	danda	administere	d for	the	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(II), are the related organization	•							3b		
4	Describe in Part XIV the intended uses of the										
Part	t VI Investments—Land, Buildings	s, and Equipme	<u>nt. S</u>	<u>ee F</u>	orm 9	90, P	art X, lıne	10.			
	Description of investment				Cost or s (invest		(b)Cost or o basis (othe		(c) Depreciation	(d) Bo	ok value
1 a L	and										
b B	Buildings						1,062	2,045	507,967		554,078
c L	easehold improvements						112	2,555	112,555		0
d E	Equipment						1,487	7,701	855,662		632,039
e 0	Other	<u></u>									
Total	. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	rm 990, Part X, colur	nn (B)	, line	10(c).)						1,186,117
									Schedule D (Form 9	90) 2008

uncertain tax positions under FIN 48

(a) Description of security or category	(b)Book value		d of valuation
(including name of security)	(b)book value	Cost or end-of	year market value
Financial derivatives and other financial products			
Closely-held equity interests Other			
NCUA SHARE INSURANCE FUND	1,056,727		F
AVAILABLE FOR SALE SECURITIES	36,204,361		F
FEDERAL AGENCY SECURITIES	22,896		F
CUSO'S	744,812		С
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Se	38,028,796 ee Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
	. ,	Cost or end-of	year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, II (a) Descri			(b) Book value
(a) Descri	ption		(b) Book value
Table (Colores (I)) observed social Serve 2000 Book V and (B) have	45.		
Part X Other Liabilities. See Form 990, Part X, col.(B) line		<u></u>	
(a) Description of Liability	(b) A mount		
Federal Income Taxes	9,368		
MEMBER SHARE DEPOSITS	115,197,919		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	115,207,287		
In Part XIV, provide the text of the footnote to the organiza		I that reports the organizat	ion's liability for

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	11,303,014
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	8,511,494
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,791,520
4	Net unrealized gains (losses) on investments	4	-109,590
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-109,590
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	2,681,930
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial		11,303,014
	statements	1	
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	11,303,014
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	11,303,014
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1	Total expenses and losses per audited financial statements	1	8,511,494
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	1	
b	Prior year adjustments	1	
С	Losses reported on Form 990, Part IX, line 25	1	
d	Other (Describe in Part XIV)]	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	8,511,494
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a]	
b	Other (Describe in Part XIV) 4b]	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	8,511,494
Pai	rt XIV Supplemental Information		
Cor	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P	art IV	, lines 1b and 2b,

Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
	Positions Under FIN 48	IN THE OPINION OF MANAGEMENT, THE ESTIMATED LIABILITY RECORDED AND ANY POTENTIAL ADDITIONAL LIABILITY RESULTING FROM TAXING AUTHORITIES IMPOSING ADDITIONAL TAXES, PENALTIES, AND INTEREST ON TAXES DUE IS NOT EXPECTED TO HAVE A MATERIAL EFFECT ON THE CREDIT UNION'S FINANCIAL POSITION OR RESULTS OF OPERATION

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OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

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.

2008

Open to Public Inspection

Name of the organization CESSNA EMPLOYEES CREDIT UNION **Employer identification number**

48-6107341

Pa	rt I Questions Regarding Compensatio	n				
					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	\vdash	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "N			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organizationg organization's CEO/Executive Director Check all the		·			
	Compensation committee		Written employment contract			
	Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	<u> -</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part V I	I, Section A, line 1a			
а	Receive a severance payment or change of control [paymen	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal nor	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	mplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a	, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	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," o		, ,	7		
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III		•			

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	f W-2 and/or 1099-MI:	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation benefits		(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
LA WRENCE DAMM (I	.	19,100				161,224	
(ii)						
(i)							
(ii)						
(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	Explanat ion
-		
	•	

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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.

Name of the organization CESSNA EMPLOYEES CREDIT UNION Employer identification number
48-6107341

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		ORGANIZATION SERVES MEMBERS WHO HOLD A MEMBERSHIP SHARE ACCOUNT

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		EACH MEMBER HAS PRIVILEGE OF ONE VOTE TO ELECT MEMBERS TO THE BOARD OF DIRECTORS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		FORM 990 WAS PRESENTED TO BOARD OF DIRECTORS AND REVIEWED AT A REGULAR BOARD MEETING

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		ORGANIZATION HAS OVERSIGHT BY A SUPERVISORY COMMITTEE AS WELL AS AN ON- STAFF COMPLIANCE SPECIALIST

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		EXECUTIVE COMMITTEE OF BOARD OF DIRECTORS REVIEWS AND APPROVES COMPENSATION OF CEO

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		INDIVIDUALS MAY MAKE FORMAL REQUEST BY MAIL, EMAIL, OR IN PERSON TO ORGANIZATION AND WILL BE ALLOWED TO INSPECT REFERENCED INFORMATION A COPY WILL BE PROVIDED FOR A NOMINAL FEE FINANCIAL INFORMATION IS ALSO AVAILABLE TO THE PUBLIC THROUGH WWW NCUA COM ON FORM 5300

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

DLN: 93493171000251

2008

OMB No 1545-0047

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Schedule R (Form 990) 2008

Related Organizations and Unrelated Partnerships

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

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.

Name of the organization **Employer identification number** CESSNA EMPLOYEES CREDIT UNION 48-6107341 **Identification of Disregarded Entities** Part I (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

Cat No 50135Y

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(Direct o en	D) ontrolling itity	(E) Predominant income(related investment, unrelated)	,	(F) Share of total	income	Share c	(G) If end-of-year assets	(H Dispro alloca	1) prtionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene man part	i J) eral or laging tner?
											Yes	No		Yes	No
MACCESS CUSO LLC PO BOX 7704 WICHITA, KS67277 47-0888510		KS			RELATED					282,599		No		Yes	
Part IV Identification of Rel	ated Organiz	ations Tax	able as	a Corp	oration or Tı	us	t								
(A) Name, address, and EIN of related organizat				Leg	(C) gal domicile (state or foreign country)		(D) rect controlling entity	Type (C cor	(E) of entity o, S corp, trust)	(F) Share of tota Income		(G) Share cend-of-yearsets	ear ownership		

Part V	Transactions with Related Organizations
--------	---

Pel	τν	Transactions with Related Organizations							
	Note.	Complete line 1 if any entity is listed in Parts II, III or IV			Ye	s No			
1 Du	rıng th	e tax year, did the orgranization engage in any of the following transaction	s with one or more related organizations listed in Parts II-	IV?		T			
а	Recei	pt of (i) ınterest (ii) annuıtıes (iii) royaltıes (iv) rent from a controlled entı	ity		1a	No			
b	Gıft, g	rant, or capital contribution to other organization(s)			1b	No			
c	Gıft, g	rant, or capital contribution from other organization(s)			1c	No			
d	Loans	or loan guarantees to or for other organization(s)			1d	No			
e	Loans	or loan guarantees by other organization(s)			1e	No			
f	Sale o	f assets to other organization(s)			1f	No			
g	Purch	ase of assets from other organization(s)		<u>:</u>	1g	No			
h	Excha	nge of assets		<u>:</u>	1h	No			
i 1	Lease	of facilities, equipment, or other assets to other organization(s)			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	anızatıon(s)	<u>:</u>	1k	No			
1 1	l Performance of services or membership or fundraising solicitations by other organization(s)								
m	m Sharing of facilities, equipment, mailing lists, or other assets								
n	Sharır	ng of paid employees		<u>:</u>	1n	No			
o	Reımb	ursement paid to other organization for expenses		<u> </u>	10	No			
р	Reımb	ursement paid by other organization for expenses		<u> </u>	1p	No			
q	Other	transfer of cash or property to other organization(s)		<u> </u>	1q	No			
r	O ther	transfer of cash or property from other organization(s)		Ĺ	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 relationsl	nips 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			(G) Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?)
			Yes	No		Yes	No		Yes	No
			•	•		•		Cabadul	D / Form	