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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)

OMB No 1545-0047 **2009** Open to Public

Inte	mal Revenu	e Service	► The organization may have to use a copy of	this return to satisfy st	ate reporting req	uirements	Inspection
<u>A</u>	For the 20	09 ca <u>lenda</u>		ending			
В	Check if applic		• mana and a significant and a	CATORS		D Emplo	yer identification number
	Address chang	use IR label o				1	
	Name change	print o	1 D D 4		<u> </u>	23-	0338105
$\overline{\Box}$	Initial return	type.	Number and street (or P O box if mail is not delivered to street addre	255)	Room/suite		one number
\equiv	Termination	See Specifi	P O BOX 4388		<u> </u>	7	<u>-820-0145</u>
\vdash		instruc		105		G Gross rece	ipts 12,395,162
	Amended retu			105		4	
X	Application per	iuuig	ne and address of principal officer DSEMARIE E. KRANTZ			1	a group return for
		l l	O BOX 4388			affiliate H(b) Are all	affiliates 🗂 🧮
		l l	LLENTOWN PA 181	105		include	d? Yes No
$\overline{}$	Tax-exemp			527		1 " ""	attaci a usc (see insudedons)
			LVECU.ORG	327		H(c) Gmun	exemption number
_	Type of organ			ÌL	Year of formation 1		M State of legal domicile PA
	Part I	Summ				 	
			the organization's mission or most significant activitie	es			
ë	T	HE LEH	IGH VALLEY EDUCATORS CREDIT UNI	ON, A NOT OF	PROFIT FIN	NANCIAL	SERVICE
ā	0		ATION, PROVIDES QUALITY FINANCI				
Governance	E	ACH ME	MBER WHILE MAINTAINING A SOUND	BUSINESS STRU	CTURE.		
Š	2 Che	ck this box	If the organization discontinued its operations o	r disposed of more tha	n 25% of its net	assets	
ઍ	3 Nun	nber of voti	ng members of the governing body (Part VI, line 1a)			3	9
es	4 Nun	nber of inde	pendent voting members of the governing body (Part	VI, line 1b)		4	9
Activities &	5 Tota	al number o	f employees (Part V, line 2a)			5	38
Act	6 Tota	al number o	f volunteers (estimate if necessary)			6	
•	7a Tota	al gross un	elated business revenue from Part VIII, column (C), lir	ne 12		7a	18,409
	b Net	unrelated l	usiness taxable income from Form 990-T, line 34			7b	
			nd grants (Part VIII, line 1h)		Prior Ye	ear	Current Year
ne	8 Con		F 40	1 240	E ECC 200		
/en	9 Proc		e revenue (Part VIII, line 2g)			1,240	5,566,399
.∜⊎ Revenue	10 Inve		ome (Part VIII, column (A), lines 3, 4, and 7d)	. \	0,02	3,275 994	5,606,960 1,221,803
ž	11 000		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e - add lines 8 through 11 (must equal Part VIII, column		11,50	5,509	12,395,162
	1		3,309	12,393,102			
·°			ular amounts paid (Part IX, column (A), lines 1–3)				
۵.	15 Sale		or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A)	\ lines 5, 10\	1.55	8,209	1,614,078
Expenses	160 Drot		ndraising fees (Part IX, column (A), line 11e)), lines 5–10)	1,33	0,209	1,014,070
Š	h Tota		indicating fees (Part IX, column (A), line 11e) ig expenses (Part IX, column (D), line 25) ▶		===		<u> </u>
Ä	17 Oth		s (Part IX, column (A), lines 11a–11d, 11f–24f)	RECEIVE	7 7 7 4	2,471	9,120,359
1				25\		0,680	10,734,437
	19 Rev	enue less	Add lines 13–17 (must equal Part IX, column (A), linexpenses Subtract line 18 from line 12	NAV. 9 9 201		4,829	1,660,725
5	5	U.IGO 1633 I	September 10 Honring 12	···•**********************************	Beginning of Cu	urrent Year	End of Year
Net Assets or	20 Tota	al assets (F	art X, line 16)			9,308	247,506,237
TAS.	21 Tota		(Part X, line 26)	OGDEN. U	186,56	4,280	208,896,493
2	22 Net	assets or f	und balances Subtract line 21 from line 20	9 6 B E 7 1, O	34,33	5,028	38,609,744
	Part II "	Signat	ure Block				
		Under per	alties of perjury, I declare that I have examined this return, inc	luding accompanying sche	edules and stateme	ents, and to th	e best of my knowledge
		and beller	It is true, correct, and complete Declaration of preparer (othe	r man onicer) is based on	all information of w	mich preparer	, /
	gn		Colmand C. Diante	 		/	1/15/2010
He	ere		ture of officer			Date	/
			DSEMARIE E. KRANTZ	CEO			
_		▼ Type	or print name and title				December of the second
Pa	id	Preparer's		Date	Check self-	k if	Preparer's identifying number (see instructions)
	lio eparer's	signature	FREDERICK A. TABOR		11/10 emplo	oyed 🕨 📙	P00193630
	eparer s se Only	Firm's nar			P.C.	EIN ▶	23-2290841
US	e Only	ıf self-emp	loyed), 3425 SIMPSON FERRY	ROAD	 _	Phone	
_			nd ZIP + 4 CAMP HILL, PA 1701			no 🕨	717-763-1644
			return with the preparer shown above? (see instruction				X Yes No
Fo	r Privacy A	Act and Pa	perwork Reduction Act Notice, see the separate in	structions.			Form 990 (2009)

art III : Statement of Program Service	ATORS23-0	338105	Page 2
	Accomplishments		
Briefly describe the organization's mission THE LEHIGH VALLEY EDUCATOR DRGANIZATION, PROVIDES QUA EACH MEMBER WHILE MAINTAIN	ALITY FINANCIAL SERVI	CES OF EXCEPTIONAL	
Did the organization undertake any significant prog the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule	· · · · · · · · · · · · · · · · · · ·	not listed on	Yes X No
Did the organization cease conducting, or make sign services? If "Yes," describe these changes on Schedule O		orogram [Yes X No
Describe the exempt purpose achievements for ea Section 501(c)(3) and 501(c)(4) organizations and allocations to others, the total expenses, and rever	section 4947(a)(1) trusts are required to re	eport the amount of grants and	
(Code)(Expenses \$ PROVIDE 8,398 LOANS TO 15,	including grants of \$.860 MEMBERS.) (Revenue \$)
Code)(Expenses \$ PROVIDE FINANCIAL SERVICES	including grants of \$ 5 TO 15,860 MEMBERS.) (Revenue \$)
,			
Code) (Expenses \$	including grants of\$) (Revenue \$)

Form 990 (2009) LEHIGH VALLEY EDUCATORS 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_		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	-	<u>X</u>
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_		<u>X</u>
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 similar funds or 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		_X_
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
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		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Χ	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	,3°-7	~a~! !	7
	Schedule D, Part VI	<i>.</i> 146		
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VII			#1821 13 #221 13
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets		144,298	-2557
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		13	
•	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	12.	, (; r)	25 (3) 1 2 25 (3) 2
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		2 6 2 2	
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	\$1000000 \$1000000 \$10000000		
	Schedule D, Parts XI, XII, and XIII	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	######################################	1000	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.	######################################		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Χ
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
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		X
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u></u>	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Χ
			990	

Form 990 (2009) LEHIGH VALLEY EDUCATORS

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		163	NO
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2º If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	1		
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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	ì	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		Χ
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	t . ##.	,	~ ^
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	1		
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		Χ
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Χ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	ļ	Х
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1		۱
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	١		٠,,
	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			١,,
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
07	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,	27		🗸
20	Part VI	37	\vdash	_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	38	X	
	19° Note. All Form 990 filers are required to complete Schedule O.		990	(0000)

	WHY Statements Describing Other IDE Eilings and Tay Compliance			age e
<u>Pč</u>	art V Statements Regarding Other IRS Filings and Tax Compliance		Yes	No
12	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	<u> </u>	163	110
	U.S. Information Returns Enter -0- if not applicable 1a 10164			
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	——[j		1
·	gaming (gambling) winnings to prize winners?	1c	X	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
20	Statements, filed for the calendar year ending with or within the year covered by this return 2a 38	1		
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	l
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	1	1	
	instructions)		,	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	;		
-	this return?	3a	X	ļ
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	52		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ▶	1		
_	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank	4.4		
	and Financial Accounts	ĺ	1	1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			<u> </u>
•	Prohibited Tax Shelter Transaction?	5c		
6a				
-	organization solicit any contributions that were not tax deductible?	6a	1	Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	1		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1	;	
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	ļ	
d	If "Yes," indicate the number of Forms 8282 filed during the year [7d]	######################################	, 'a_78_8	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7 : 1 2	1 7 7 8	ı Tiği
	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h	<u> </u>	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	1 .		1
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	1		i
	organization, have excess business holdings at any time during the year?	8	<u> </u>	$oldsymbol{ol}}}}}}}}}}}}}}}}}$
9	Sponsoring organizations maintaining donor advised funds.	1		1
а	Did the organization make any taxable distributions under section 4966?	9a	<u> </u>	<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	
10	Section 501(c)(7) organizations. Enter		je jej	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		-, -,	22.000
11	Section 501(c)(12) organizations. Enter:			,
а	Gross income from members or shareholders		ľ . Ĺ .	
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
	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	1	1

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b

Form 990 (2009) LEHIGH VALLEY EDUCATORS 23-0338105 Pag
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in

	Schedule O. See instructions.					
Sec	tion A. Governing Body and Management					
		•			Yes	No
1a	Enter the number of voting members of the governing body	1a	9			
b	Enter the number of voting members that are independent	1b	9	:		1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			Ŀ		
	any other officer, director, trustee, or key employee?			. 2		X
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		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 w	as filed	? .	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?			5		X
6	Does the organization have members or stockholders?			6	X	\perp
7a	Does the organization have members, stockholders, or other persons who may elect one or more members					
	of the governing body?			7:		
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?			71	<u> </u>	\bot
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			1	,	
	the year by the following:				== ====	
а	The governing body?			8	_	
b	Each committee with authority to act on behalf of the governing body?			81	<u> </u>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached					
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		<u> </u>
	ction B. Policies (This Section B requests information about policies not required by t	he In	terna			
Rev	venue Code.)					
				_	Yes	
10a	Does the organization have local chapters, branches, or affiliates?			10	a	<u> X</u>
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?			10	<u>b</u>	↓
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			1		
	form?			1	<u> </u>	X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			<u>i</u>		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12	<u>a X</u>	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give					
	rise to conflicts?			12	b	X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this is done			12	$\overline{}$	X
13	Does the organization have a written whistleblower policy?			1	_	<u> </u>
14	Does the organization have a written document retention and destruction policy?			1	1 X	
15	Did the process for determining compensation of the following persons include a review and approval by			l)		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision	nγ				
а	The organization's CEO, Executive Director, or top management official			15		X
b	Other officers or key employees of the organization			15	b	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			li li	1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			ļi:::	:	
	with a taxable entity during the year?			16	a	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate				~ 3	
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			lie:		
	the organization's exempt status with respect to such arrangements?			16	b	
Sec	ction C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c))	3)s on	y)			
	available for public inspection. Indicate how you make these available. Check all that apply					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of	ınteres	it			
	policy, and financial statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	Į.			
	organization. ► RONALD W HOUCK P O BOX 4388				• •	
7	TTENTOWN DX 101	115		610_9	20	n + n = 1

DAA

Form **990** (2009)

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees See instructions for definition of "key employee"

Check this box if the organization did not compensate any current officer, director, or trustee

- 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, and 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

(A) Name and Title	(B) Average	Position		(C check)		pply)	(D) Reportable	(E) Reportable [*]	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
ROBERT BOLD										
BOARD CHAIR	1.00	X						599	0	0
GARY PHILLIPS BOARD VICE CHAIR	1.00	х						450	0	0
EUGENIA EMERT SECRETARY/TREASURER	1.00	X						450	0	0
CARMEN RIOLA DIRECTOR	1.00	х						450	0	0_
ROBERT MAZA DIRECTOR	1.00	Х						450	0	0
WILLIAM AYERS DIRECTOR	1.00	Х						250	0	0
DANIEL JOSEPH DIRECTOR	1.00	X						250	0	0
DANIEL WEAVER DIRECTOR	1.00	x						250	0	0
GARY FEDORCHA DIRECTOR	1.00	X						250	0	0
ROSEMARIE E KRAN CEO				Х				88,423	0	31,150
RONALD W HOUCK	40.00			Х				80,119	0	26,502
									<u></u>	

Part VII	Section A. Officer	- Directors Tr							23-033		Page
		rs, Directors, 11	uste	es, I	(ey	Emp	loye	es,	and Highest Compensat	ted Employees (continued)	
Nan	(A) ne and Title	(B) Average hours per week	individual trustee or director	_		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
											
		1	-	_	_						
1b Total 2 Total nu	mber of individuals	(including but no	t limit	ed to	n the	se li	sted	▶	171,941 vve) who received more that	an \$100 000 in	57,652
3 Did the comploye 4 For any the orgal individual 5 Did any	le compensation fro organization list any le on line 1a? If "Yes individual listed on li nization and related at	former officer, cos," complete Schine 1a, is the sur organizations gi	on bedirected by the control of the	or or or epor	trus or su rtabl n \$1 nper	stee, ch ir e coi 50,0	key ndivid mper 00?	emp dual nsati If "Y	oloyee, or highest compension and other compensation es," complete Schedule J	sated on from for such	3 X 4 X 1, n, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
1 Complet		five highest com	pens	atec	i ınd	eper	nden	t con	ntractors that received mor	re than \$100,000 of	
	sation from the orga Name ar	(A) nd business address								(B) otion of services	(C) Compensation
FISERV BROOKF	'IELD Y NATIONAL	W.			08			<u> </u>	ERV DRIVE DATA PROCESSI ERSIDE AVE	NG	349,705
	NATIONAL		L 3						PYMT PROCESSI	NG	194,78
			- ,				-				

art V	0 (2009) LEHIGH VAL		DOCKITORO.		23-0338105		Page
	Statement of Nev		:	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1a b c	Federated campaigns Membership dues Fundraising events	1a 1b				—	
е	Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above	1d 1e				· · · ·	
g h	Noncash contributions included in lines Total. Add lines 1a–1f		•	<u>.</u>	,	—	,
			Busn. Code				
2a	LOAN INTEREST INCO	OME		4,720,768	4,720,768		
Ь				671,328	671,328		
c		ıL		155,894	155,894		_
1 .			525990		133,074	8,587	
d							
e	NON-MEMBER ATM FEI		525990			4,714	
f	All other program service rev	enue/		5,108		5,108	
9	Total. Add lines 2a-2f		<u> </u>	5,566,399	, ;		
3	Investment income (including	g dividends	, interest, and	!			
	other similar amounts)		•	5,606,960	35,755		5,571,20
4	Income from investment of to	ax-exempt	bond proceeds				
5	Royalties	an onompt	>				
"	(i) Real		(II) Personal				1
1			(II) Personal	1 :	F	•	
6a	Gross Rents				, ,	† †	
b	Less rental exps			1 1	1	•	_
С	Rental inc or (loss)				1 1 1		
d	Net rental income or (loss)		•		***************************************		
7a	Gross amount from (i) Securition	es	(II) Other	1			i i
Į.	sales of assets		(.,, =	<u> </u>		s	
١.	other than inventory					32	- "
b				!	1 1	,	1
	basis & sales exps				1 .	1	
c	Gain or (loss)					ใการใช้เกากก อาการไการีส์เกลม	
d	Net gain or (loss)		•				
8a	Gross income from fundraising e	vents				,	
Oa	(not including \$						
1	- ·	10)					
	of contributions reported on line	•				-	1
ĺ	See Part IV, line 18	a		;	,	, i	, :
	Less direct expenses	b					L
c	Net income or (loss) from fui	ndraisin <u>g e</u>	vents >				
9a	Gross income from gaming activ	ities -		,		,	1 .
1	See Part IV, line 19	a		3 1		į į	i
_	Less: direct expenses	БH	-	ļ!			i
	•		tion	 			
	Net income or (loss) from ga		ties	3 °		2 11	fr. 7
10a	Gross sales of inventory, les	s		12 4	- 1 - 1		\$1.00
1	returns and allowances	a				- 1	
b	Less cost of goods sold	b					L
L c	Net income or (loss) from sa	les of invei	ntory				L
	Miscellaneous Reveni		Busn. Code				1 1
11a				1,217,891	1,217,891	· · · · · · · · · · · · · · · · · · ·	l
[LCOVEKI		2,792			
			-				
þ	MISCELLANEOUS INCOM	ίΕ	1	1,120	1,120		
C	MISCEDEMICOS INCOM						
С	All other revenue		•	1,221,803	6,805,548		10 mm

Form 990 (2009) LEHIGH VALLEY EDUCATORS

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).

Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<u>7b,</u>	8b, 9b, and 10b of Part VIII.		expenses	general expenses	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				1 1
3	Grants and other assistance to governments,			1	
	organizations, and individuals outside the		•		
	U S See Part IV, lines 15 and 16			,	
4	Benefits paid to or for members			<u> </u>	
5	Compensation of current officers, directors,				
	trustees, and key employees	226,194			
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	863,647			
8	Pension plan contributions (include section 401(k)	000/01.			
-	and section 403(b) employer contributions)	168-136			
9	Other employee benefits	168,136 266,255			
10	Payroll taxes	89,846			
11	Fees for services (non-employees)	05,010			_
''	Management				
b	Legal	48,166			
C	Accounting	25,186			
ď	Lobbying	23,100			
u	Professional fundraising services. See Part IV, line 1	7	77777777777777777777777777777777777777	C20 00000000000000000000000000000000000	
	_	I	' - '.435"Edw4) -4 1- 4-935655	1 1111111111111111111111111111111111111	
f	Investment management fees	79,409			
g	Other	316,104			<u> </u>
12	Advertising and promotion	626,290			-
13	Office expenses		·		
14	Information technology	232,465			
15	Royalties	220 524			
16	Occupancy	232,524			
17	Travel	3,169			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	24 010			
19	Conferences, conventions, and meetings	34,910			
20	Interest	3,335,991			
21	Payments to affiliates	0.1.0			
22	Depreciation, depletion, and amortization	314,996			
23	Insurance	68,604	MARKAGONIA I I AND I I I I I I I I I I I I I I I I I I I	THESE DATES SEAL ASSESSMENT OF S	(2)
		Antonia cranela la gali a			1,000 100 100 100 100 100 100 100 100 10
24	Other expenses Itemize expenses not	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed	7,3336 7,7336 7,7336 7,7336			
	5% of total expenses shown on line 25 below				
а	PROVISION FOR LOAN LOSS	<u>1,304,880</u>			
b	NCUSIF IMPAIRMENT	1,217,891			
С	LENDING EXPENSES	561,801			
d	CORPORATE CU IMPAIRMENT	347,141			
e	NCUSIF PREMIUM	297,504			
f	All other expenses	73,328			
25	Total functional expenses. Add lines 1 through 2	f 10,734,437			
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				
DAA		- · · · · · · · · · · · · · · · · · · ·	 	·····	Farm 990 (2000)

<u>Pàrt</u>	X Balance Sheet		1		,					
			(A) Beginning of year		(B) End of year					
1	Cash—non-interest bearing	•	803,975	1	927,970					
2	Savings and temporary cash investments		12,135,122	_ 2	15,540,315					
3	Pledges and grants receivable, net			3						
4	Accounts receivable, net		1,668,792	4	1,791,801					
5	Receivables from current and former officers, directors	, trustees, key								
	employees, and highest compensated employees. Con	plete Part II of	1							
	Schedule L			5						
6	Receivables from other disqualified persons (as define	d under section		1						
	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete	1		,					
۱ م	Part II of Schedule L			6						
7 8	Notes and loans receivable, net		69,590,049	7	75,686,540					
8 6	Inventones for sale or use			8						
¹ 9	Prepaid expenses and deferred charges		78,943	9	122,104					
10a	Land, buildings, and equipment cost or			1						
	other basis Complete Part VI of Schedule D	10a 8,643,6								
b	Less. accumulated depreciation	10b 2,006,4			6,637,266					
11	Investments—publicly traded securities		100,662,576	11	116,927,406					
12	Investments—other securities See Part IV, line 11		26,547,000	12	26,964,000					
13	Investments—program-related See Part IV, line 11			13						
14	Intangible assets			14						
15	Other assets See Part IV, line 11		2,505,649	15	2,908,835					
16	Total assets. Add lines 1 through 15 (must equal line 3	34)	220,899,308	16	247,506,237					
17	Accounts payable and accrued expenses		965,666	17	928,161					
18	Grants payable		18							
19	Deferred revenue	· ·								
20	Tax-exempt bond liabilities			20						
21 22 28 28	Escrow or custodial account liability Complete Part IV	of Schedule D		21						
22	Payables to current and former officers, directors, trust	ees, key	1.40							
<u> </u>	employees, highest compensated employees, and disc	ualified								
<u> </u>	persons. Complete Part II of Schedule L			22						
23	Secured mortgages and notes payable to unrelated thin	rd parties		23						
24	Unsecured notes and loans payable to unrelated third	parties		24						
25	Other liabilities Complete Part X of Schedule D		185,598,614	25	207,968,332					
26	Total liabilities. Add lines 17 through 25		186,564,280	26	208,896,493					
27	Organizations that follow SFAS 117, check here	and	377 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 [
<u> </u>	complete lines 27 through 29, and lines 33 and 34.		**************************************	. 1						
27	Unrestricted net assets			27						
28	Temporanly restricted net assets			28						
29 L	Permanently restricted net assets	<u></u>		29						
	Organizations that do not follow SFAS 117, check I	nere (X								
5	and complete lines 30 through 34.	nd complete lines 30 through 34.								
2 30	Capital stock or trust principal, or current funds			30						
30 31 32 32	Paid-in or capital surplus, or land, building, or equipme	nt fund		31	1					
	Retained earnings, endowment, accumulated income,	or other funds	34,335,028		38,609,744					
33 34	Total net assets or fund balances		34,335,028		38,609,744					
Z 34	Total liabilities and net assets/fund balances		220,899,308	34	247,506,237					

For	m 990 (2009) LEHIGH VALLEY EDUCATORS 23-0338105		Pag	<u>je 12</u>
P	art XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990.			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O	innauu	***	
28	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
t	Were the organization's financial statements audited by an independent accountant?	2b	Χ	
C	If "Yes" to line 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	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in			1
	Schedule O		· • •	1
C	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	44.00	, °,	
	issued on a consolidated basis, separate basis, or both.	1		
	X Separate basis Consolidated basis Both consolidated and separate basis	1		
38	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		X
t	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		<u> </u>
		Form	990	(2009)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public i

	e of the organization		Employer identification number							
	EHIGH VALLEY EDUCATORS		23-0338105							
	REDIT UNION Int I Organizations Maintaining Donor Advised F	iundo or Other Similar Funda								
ГС	the organization answered "Yes" to Form 990). Part IV. line 6.	or Accounts. Complete in							
		(a) Donor advised funds	(b) Funds and other accounts							
1	Total number at end of year									
2	Aggregate contributions to (during year)									
3	Aggregate grants from (during year)									
4	Aggregate value at end of year									
5	Did the organization inform all donors and donor advisors in writing th	nat the assets held in donor advised								
	funds are the organization's property, subject to the organization's ex	clusive legal control?	Yes No							
6	Did the organization inform all grantees, donors, and donor advisors	in writing that grant funds can be								
	used only for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other								
	purpose conferring impermissible private benefit?		Yes No							
"Pa	Conservation Easements. Complete if the or		Form 990, Part IV, line 7.							
1	Purpose(s) of conservation easements held by the organization (chec									
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically in	•							
	Protection of natural habitat	Preservation of certified historic	structure							
	Preservation of open space									
2	Complete lines 2a through 2d if the organization held a qualified cons	servation contribution in the form of a cor	nservation							
	easement on the last day of the tax year		でで報。 レーレー・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・							
_	Total combine of concernation concerns		Held at the End of the Tax Year							
a	Total number of conservation easements		2a							
b	Total acreage restricted by conservation easements	inluded in (a)	2b 2c							
c d	Number of conservation easements included in (c) acquired after 8/1	Number of conservation easements on a certified historic structure included in (a)								
3	Number of conservation easements modified, transferred, released, or	rzation during								
٠	the taxable year	extinguished, or terminated by the organi	zation during							
4	Number of states where property subject to conservation easement is	s located >								
5	Does the organization have a written policy regarding the periodic mo									
-	violations, and enforcement of the conservation easements it holds?	,	☐ Yes ☐ No							
6	Staff and volunteer hours devoted to monitoring, inspecting, and enfo	orcing conservation easements during the	e year							
	>		•							
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	g conservation easements during the yea	ar							
	▶ \$									
8	Does each conservation easement reported on line 2(d) above satisf	y the requirements of section								
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		Yes No							
9	In Part XIV, describe how the organization reports conservation ease	•								
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's financial statements tha	it describes							
12/	the organization's accounting for conservation easements									
::Pa	Organizations Maintaining Collections of A		ner Similar Assets.							
	Complete if the organization answered "Yes"									
1a	If the organization elected, as permitted under SFAS 116, not to repo									
	art, historical treasures, or other similar assets held for public exhibiting provide, in Part XIV, the text of the footnote to its financial statements		e of public service,							
h	If the organization elected, as permitted under SFAS 116, to report in		ot works of art							
U	historical treasures, or other similar assets held for public exhibition,									
	provide the following amounts relating to these items	oddoddon, or rededicti in futtherafice of	public del Floci							
	(i) Revenues included in Form 990, Part VIII, line 1		Š \$							
	(ii) Assets included in Form 990, Part X		• •							
2	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	-	F. C.							
а	Revenues included in Form 990, Part VIII, line 1		▶ \$							
ь	Assets included in Form 990, Part X		▶ \$							
	•									

	dule D (Form 990) 2009 LEHIGH VAI				03381		Page 2						
	rt III Organizations Maintaining						ssets (continuea)						
3	Using the organization's acquisition, accession collection items (check all that apply):	n, and other records, ch	eck any of the follow	wng that are a s	ignificant i	use of its							
а	Public exhibition	d 🔲 Loan	or exchange progra	ms									
b	Scholarly research	e 🗌 Other											
С	Preservation for future generations												
4	Provide a description of the organization's coll Part XIV	ections and explain how	w they further the org	ganızatıon's exe	mpt purpo	se in							
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	receive donations of ar	t, historical treasures	s, or other simila	ır		☐ Yes ☐ No						
Pa	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part												
	IV, line 9, or reported an am	nount on Form 99	0, Part X, line 2	<u>1. </u>									
1a	Is the organization an agent, trustee, custodia	n or other intermediary	for contributions or o	other assets not									
	ıncluded on Form 990, Part X?						Yes No						
b	If "Yes," explain the arrangement in Part XIV a	and complete the follow	ng table.										
							Amount						
C	Beginning balance					1c							
d	Additions during the year					1d							
е	Distributions during the year					1e							
f	Ending balance					1f							
2a	Did the organization include an amount on For	rm 990, Part X, line 217	•				Yes No						
	If "Yes," explain the arrangement in Part XIV												
	rt V Endowment Funds. Compl	ete if organization	answered "Yes	s" to Form 9	90, Part	IV, line	10.						
		(a) Current year	(b) Prior year	(c) Two years ba		ree years b							
1a	Beginning of year balance			- 1-2	[* 1 *							
b	Contributions												
c	Net investment earnings, gains,				obilită i	- J.	eran adkuras oo t						
·	and losses	1				ya . rg							
ч	Grants or scholarships			······································	<u> </u>								
	Other expenditures for facilities				1.025		lanas - Mellenes est un en						
-	and programs						THE CONTROL OF A CANADA						
	· -			**************************************	1 . N 2	4 2 145 4 145 146 146 146 146 146 146 146 146 146 146	# 7 0						
	Administrative expenses				TOT HERE WE MANUEL								
g	End of year balance				3245 " 31 " 44.	4 7-41 7 35-7 2];"						
2	Provide the estimated percentage of the year												
a	Board designated or quasi-endowment	⁷											
b	Permanent endowment ▶ %												
C	Term endowment ▶ %												
Ja	Are there endowment funds not in the possess	sion of the organization	that are neld and ad	aministered for t	ne		TV. Tu.						
	organization by						Yes No						
	(i) unrelated organizations						3a(i)						
	(ii) related organizations						3a(ii)						
Ь	If "Yes" to 3a(II), are the related organizations	· · · · · · · · · · · · · · · · · · ·					3b						
4	Describe in Part XIV the intended uses of the			000 D-+ V	1: 40								
Pa	irt VI: Investments—Land, Buildi												
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or ot basis (other) Accumula: depreciation		(d) Book value						
19	Land		<u></u>	,502 Jul		, [1,478,502						
	Buildings		5,607			,152	4,708,687						
	Leasehold improvements		3,007	, , , ,	099	1 1 2 4	<u> </u>						
	Equipment		1,557	,329	1,107	, 252	450,077						
	Other												
	I. Add lines 1a through 1e (Column (d) must ed	qual Form 990, Part X,	column (B), line 10(d	c))		▶	6,637,266						

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 LEHIGH VALLEY EDUCATO	ORS	23-0338105	Page 3									
Part VII Investments—Other Securities. See Form 9		4.5.44										
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market value										
Financial derivatives												
Closely-held equity interests												
Other _ CERTIFICATES OF DEPOSIT	26,964,000	COST										
												
			· -·									
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	26,964,000											
Part VIII Investments—Program Related. See Form												
(a) Description of investment type	(b) Book value	(c) Method of valua										
		Cost or end-of-year mar	ket value									
			. <u>.</u>									
												
												
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX : Other Assets. See Form 990, Part X, line 15			***									
(a) Description).		(b) Book value									
(2) 2000 (4.00)			(5) 25011 14.45									
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		•										
Part X Other Liabilities. See Form 990, Part X, line	25.											
1 (a) Description of liability	(b) Amount	*	• •									
Federal income taxes												
MEMBER SHARE AND SAVINGS ACCOUNTS	207,968,332	Andrew W	Western .									
			4 . *-									
	 											
		- 11 1232	77, 47,									
	+											
	 											
		- 10 1/2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2										
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	207,968,332		, 1									
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the org			<u></u>									
organization's liability for uncertain tax positions under FIN 48_												

<u>Sche</u>	edule D (Form 990) 2009 LEHIGH VALLEY EDUCATORS 23-0338		Page 4
_Pà	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	tateme	ents
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1_	12,395,162
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	<u>10,734,437</u>
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3_	1,660,725
4	Net unrealized gains (losses) on investments	4	2,544,756
5	Donated services and use of facilities	5	
6	Investment expenses	6	. <u></u>
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	69,235
9	Total adjustments (net) Add lines 4 through 8	9_	<u>2,613,991</u>
10		10	4,274,716
Pa	art XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Retu	ırn
1	Total revenue, gains, and other support per audited financial statements	1	15,009,153
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments 2, 544, 75	66	
b	Donated services and use of facilities 2b		
С		_ !.	
d	Other (Describe in Part XIV) 2d 69, 23	35 .	
е	Add lines 2a through 2d	2e	2,613,991
3	Subtract line 2e from line 1	3	12,395,162
4	Amounts 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		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	. 5	12,395,162
P	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per R	eturn
1	Total expenses and losses per audited financial statements	1	10,734,437
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	7.7	
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIV)	##:	
е	Add lines 2a through 2d	<u>2e</u>	
3	Subtract line 2e from line 1	3_	10,734,437
4	Amounts 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		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c_	
5_	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	_ 5	10,734,437
	art XIV Supplemental Information	_	
	uplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines		
and	2b, Part V, line 4, Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete	te	
	part to provide any additional information.		
_P	<u> ART XI, LINE 8 - RECONCILATION OF CHANGES - OTHER</u>		
M	ET_CHANGE_IN_PENSION_LIABILITY	S	69.235
— 1.		⁻ -	
			- - -
P	ART XII, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIA	LS -	OTHER
-N	<u>ET_CHANGE_IN_PENSION_LIABILITY</u>	\$_	69_, 235_

Schedule	D (Fo	orm 99	0) 20	09	LE	HIC	ΞH	VA	LL]	EΥ	ED	UC	AT(ORS	3					2	3 - 0	338	310	5				Page 5
Schedule Part X	(IV	Sup	plen	nen	tal	Info	rma	tion	i (cc	ontin	ued)																
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Name of the organization LEHIGH VALLEY EDUCATORS

CREDIT UNION

Employer identification number 23-0338105

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS THE CREDIT UNION HAS 15,860 MEMBERS.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

THE CREDIT UNION HAS A SINGLE CLASS OF MEMBERS. EACH MEMBER HAS A SINGLE

VOTE IN THE ELECTION OF THE CREDIT UNION'S BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS THE CREDIT UNION'S MEMBERS HAVE A SINGLE VOTE IN THE ELECTION OF MEMBERS TO THE CREDIT UNION'S BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE FORM 990 IS REVIEWED BY THE CREDIT UNION'S MANAGEMENT PRIOR TO SUBMISSION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE CREDIT UNION'S FINANCIAL STATEMENTS ARE POSTED IN THE LOBBIES OF ALL BRANCHES ON A MONTHLY BASIS. QUARTERLY FINANCIAL STATMENTS (CALL REPORTS) ARE AVAILABLE ON WWW.NCUA.GOV.