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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning , and ending

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☒ Application pending

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

C Name of organization
BELCO COMMUNITY CREDIT UNION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
449 EISENHOWER BLVD

City or town, state or country, and ZIP + 4
HARRISBURG PA 17111

D Employer identification number
23-1445884

E Telephone number
800-642-4482

G Gross receipts $ 25,304,295

F Name and address of principal officer
LONNY J MAURER
449 EISENHOWER BLVD
HARRISBURG PA 17111

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

H(b) Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

I Tax-exempt status ☒ 501(c) (14) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.BELCO.ORG

H(c) Group exemption number ▶

K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1939

M State of legal domicile PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities.
BUILD TRUST, CREATE AND GROW RELATIONSHIPS AND PROVIDE GOLD STAR SERVICE.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	3	9
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	9
5 Total number of employees (Part V, line 2a)	5	201
6 Total number of volunteers (estimate if necessary)	6	14
7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	255,293
b Net unrelated business taxable income from Form 990-T, line 34	7b	-41,854

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)		
9 Program service revenue (Part VIII, line 2g)	19,565,577	20,759,769
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,574,985	1,843,980
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,637,784	2,700,546
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	22,778,346	25,304,295
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		
14 Benefits paid to or for members (Part IX, column (A), line 4)		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	7,383,057	7,714,392
16a Professional fundraising fees (Part IX, column (A), line 11e)		
b Total fundraising expenses (Part IX, column (D), line 25) ▶		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	18,372,490	16,759,217
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	25,755,547	24,473,609
19 Revenue less expenses. Subtract line 18 from line 12	-2,977,201	830,686

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	279,976,287	315,314,995
21 Total liabilities (Part X, line 26)	258,697,356	288,191,289
22 Net assets or fund balances Subtract line 21 from line 20	21,278,931	27,123,706

SCANNED SEP 13 2010

RECEIVED AUG 16 2010 362 OGDEN, UT IRS-OSC

Part II Signature Block

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

Sign Here

Signature of officer — Date 8/12/2010

PAUL R. PERINI III VICE-PRESIDENT OF FINANCE

Type or print name and title

Paid Preparer's Use Only

Preparer's signature: FREDERICK A. TABOR	Date 07/19/10	Check if self-employed ▶ ☐	Preparer's identifying number (see instructions) P00193630
Firm's name (or yours if self-employed), address, and ZIP + 4: PADDEN, GUERRINI & ASSOCIATES, P.C. 3425 SIMPSON FERRY ROAD CAMP HILL, PA 17011		EIN ▶ 23-2290841	Phone no ▶ 717-763-1644

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

BUILD TRUST, CREATE AND GROW RELATIONSHIPS AND PROVIDE GOLD STAR SERVICE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ including grants of $) (Revenue $)

PROVIDE LOANS TO 49,128 MEMBERS

4b (Code) (Expenses $ including grants of $) (Revenue $)

PROVIDE FINANCIAL SERVICES TO 49,128 MEMBERS.

4c (Code) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses ▶**

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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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		X
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	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			
	• 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			
	• 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 reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 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 Schedule D, Parts XI, XII, and XIII	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional (Yes: , No: X)	12A		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
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		X
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		X
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		X
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		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

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 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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 2? If "Yes," complete Schedule I, Parts I and III	22		X
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 employees? If "Yes," complete Schedule J	23	X	
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		X
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	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		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		X
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)			
a	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 Schedule L, Part IV	28b		X
c	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		X
29	Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
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		X
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 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, III, IV, and V, line 1	34		X
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		X
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
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	1a	17471		
b	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?		1c	X	
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	2a	201		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	X	
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		X
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		5a		X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5c		
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		6a		X
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?		6b		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods 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		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 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		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**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				
a	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	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
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	12b			

Part XIV Supplemental Information (continued)

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

Section 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		
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		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 was 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	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
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		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		X
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
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?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, 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	X	
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		X

Section 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 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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ **PAUL R. PERINI III 449 EISENHOWER BLVD HARRISBURG PA 17111 717-720-6200**

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 "
- 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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RICHARD LYTLE CHAIRMAN	5.00	X						0	0	0
WILLIAM O'DONNELL VICE-CHAIR	5.00	X						0	0	0
STEPHANIE MILLER TREASURER	5.00	X						0	0	0
DONALD PERSON DIRECTOR	5.00	X						0	0	0
LAVERN SHEARER SECRETARY	5.00	X						0	0	0
SAMUEL HUMMERT ASST. TREAS	5.00	X						0	0	0
JOANNE ADAMS ASST. SECRET	5.00	X						0	0	0
SUZANNE HOFFER DIRECTOR	5.00	X						0	0	0
J. WILLIAM JANES DIRECTOR	5.00	X						0	0	0
LONNY MAURER CEO	60.00			X				204,626	0	101,612
PAUL PERINI III VP FINANCE	45.00			X				74,350	0	14,615
CHARLES DELMARCELLE COO	50.00					X		140,846	0	67,894

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Total ▶								419,822		184,121

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 2

		Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
AFTECH/FISERV 455 SOUTH GULPH ROAD KING OF PRUSSIA PA 19406	DATA PROCESSING	530,638
DIEBOLD, INCORPORATED 5995 MAYFAIR ROAD NORTH CANTON OH 44720	ATM/SECURITY	361,227
CONCEPTONE, INC. 9 SHETLAND DRIVE SHREWSBURY PA 17361	MARKETING/AD	320,099
PENNLANTIC 435 MARKET STREET LEMOYNE PA 17043	IT/BUS. SYSTEMS	202,225
OVERTON & ASSOCIATES 909 BALTIMORE BLVD WESTMINSTER MD 21157	DESIGN/BUILD	181,115

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 7

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f $					
	h Total. Add lines 1a–1f ▶					
Program Service Revenue		Busn. Code				
	2a INTEREST INCOME		15,839,381	15,839,381		
	b FEE INCOME		4,841,606	4,841,606		
	c NON-MEMBER ATM INCOME	522100	78,782		78,782	
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a–2f ▶		20,759,769			
	3 Investment income (including dividends, interest, and other similar amounts) ▶		1,843,980			1,843,980
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
		(i) Real	(ii) Personal			
	6a Gross Rents	991,513				
	b Less rental exps					
	c Rental inc or (loss)	991,513				
	d Net rental income or (loss) ▶		991,513			991,513
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b Less cost or other basis & sales exps					
	c Gain or (loss)					
	d Net gain or (loss) ▶					
Other Revenue	8a Gross income from fundraising events (not including $ of contributions reported on line 1c) See Part IV, line 18 a					
	b Less direct expenses b					
	c Net income or (loss) from fundraising events ▶					
	9a Gross income from gaming activities See Part IV, line 19 a					
	b Less direct expenses b					
	c Net income or (loss) from gaming activities ▶					
	10a Gross sales of inventory, less returns and allowances a					
	b Less cost of goods sold b					
	c Net income or (loss) from sales of inventory ▶					
	Miscellaneous Revenue	Busn. Code				
	11a RECAPITALIZATION NCUSIF DEPOS		1,532,522	1,532,522		
	b MEMBERS FINANCIAL INCOME	522100	87,383		87,383	
	c MEMBER CONNECT	522100	60,127		60,127	
	d All other revenue		29,001		29,001	
	e Total. Add lines 11a–11d ▶		1,709,033			
	12 Total Revenue. See instructions ▶		25,304,295	22,213,509	255,293	2,835,493

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	567,216			
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	4,837,249			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	702,198			
9 Other employee benefits	1,134,903			
10 Payroll taxes	472,826			
11 Fees for services (non-employees)				
a Management				
b Legal	34,528			
c Accounting	104,034			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	1,245,177			
13 Office expenses	659,555			
14 Information technology				
15 Royalties				
16 Occupancy	940,869			
17 Travel	61,576			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	150,265			
20 Interest	4,669,871			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,734,345			
23 Insurance	281,138			
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)				
a PROVISION FOR LOAN LOSS	2,945,023			
b IMPAIRMENT MACFCU DEPOSIT	452,533			
c VISA DPS MONTHLY SERVICE	391,443			
d VISA USA CHK FEES	262,168			
e AFTECH SFT/HDW PREV MO	260,209			
f All other expenses	2,566,483			
25 Total functional expenses. Add lines 1 through 24f	24,473,609			
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				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest bearing		5,550,562	1	5,222,573
	2	Savings and temporary cash investments		7,772,411	2	7,579,496
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		770,893	4	871,818
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net		207,499,355	7	217,599,656
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		1,102,508	9	1,493,634
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 33,929,543			
	b	Less accumulated depreciation	10b 8,842,090	23,450,833	10c	25,087,453
	11	Investments—publicly traded securities		16,776,039	11	28,672,457
	12	Investments—other securities See Part IV, line 11		13,851,886	12	13,746,706
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		3,201,800	15	15,041,202
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		279,976,287	16	315,314,995
Liabilities	17	Accounts payable and accrued expenses		2,669,712	17	1,583,023
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		20,000,000	23	6,000,000
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		236,027,644	25	280,608,266
	26	**Total liabilities.** Add lines 17 through 25		258,697,356	26	288,191,289
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets			27	
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ ☒ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds		21,278,931	32	27,123,706
	33	Total net assets or fund balances		21,278,931	33	27,123,706
	34	Total liabilities and net assets/fund balances		279,976,287	34	315,314,995

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	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		

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

2009

Open to Public Inspection

Name of the organization

BELCO COMMUNITY CREDIT UNION

Employer identification number

23-1445884

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
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 that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive 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

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _ _ _ _ _

4 Number of states where property subject to conservation easement is located ▶ _ _ _ _ _

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _ _ _ _ _ _ _

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _ _ _ _ _ _ _

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _ _ _ _ _ _ _

(ii) Assets included in Form 990, Part X ▶ $ _ _ _ _ _ _ _

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 these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _ _ _ _ _ _ _

b Assets included in Form 990, Part X ▶ $ _ _ _ _ _ _ _

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and 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 year end balance held as

- a Board designated or quasi-endowment ▶ _ _ _ _ %
- b Permanent endowment ▶ _ _ _ _ %
- c Term endowment ▶ _ _ _ _ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations 3a(i)		
(ii) related organizations 3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		3,791,906		3,791,906
b Buildings		19,817,402	1,993,923	17,823,479
c Leasehold improvements		313,702	199,952	113,750
d Equipment		8,429,408	6,648,215	1,781,193
e Other		1,577,125		1,577,125
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))			▶	25,087,453

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(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		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
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
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 SHARES AND SAVINGS	192,626,926
MEMBER CERTIFICATES OF DEPOSIT	86,270,392
ACCRUED DEFERRED COMPENSATION PLANS	1,710,948
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	280,608,266

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	25,304,295
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	24,473,609
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	830,686
4	Net unrealized gains (losses) on investments	4	1,639,908
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	3,374,181
9	Total adjustments (net) Add lines 4 through 8	9	5,014,089
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	5,844,775

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	30,318,384
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	1,639,908		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	3,374,181		
e	Add lines 2a through 2d			2e	5,014,089
3	Subtract line 2e from line 1			3	25,304,295
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	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	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	25,304,295

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	24,473,609
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	24,473,609
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	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	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	24,473,609

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b 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 this part to provide any additional information

PART XI, LINE 8 - RECONCILIATION OF CHANGES - OTHER

NET CHANGE IN UNREALIZED GAIN/LOSS ON PENSION LIABILITY $ 3,374,181

PART XII, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER

NET CHANGE IN UNREALIZED GAIN/LOSS ON PENSION LIABILITY $ 3,374,181

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 23.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No 1545-0047

2009

Open To Public Inspection

Name of the organization

BELCO COMMUNITY CREDIT UNION

Employer identification number

23-1445884

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain — 1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? — 2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☒ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment? — 4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan? — 4b	X	
c	Participate in, or receive payment from, an equity-based compensation arrangement? — 4c		X
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	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, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	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, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III — 7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III — 8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? — 9		

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
LONNY MAURER	(i)	204,626	0	0	84,796	16,816	306,238	0
	(ii)	0	0	0	0	0	0	0
CHARLES DELMARCELLE	(i)	140,846	0	0	51,293	16,601	208,740	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(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

PART I, LINE 4 - SEVERANCE, NONQUALIFIED, AND EQUITY-BASED PAYMENTS

	SEVERANCE	NONQUALIFIED	EQUITY-BASED
LONNY MAURER	0	172,013	0
CHARLES DELMARCELLE	0	181,230	0

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
BELCO COMMUNITY CREDIT UNION

Employer identification number
23-1445884

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS

THE CREDIT UNION IS OWNED BY ITS 49,128 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 MEMBERS TO 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 CREDIT UNION'S BOARD OF DIRECTORS AND SUPERVISORY COMMITTEE IS PROVIDED WITH A COPY OF THE FORM 990 AT A MONTHLY BOARD MEETING PRIOR TO THE FILING OF THE RETURN. THE MEETING IS ATTENDED BY THE CREDIT UNION'S SENIOR MANAGEMENT AND THE CREDIT UNION'S AUDITORS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE BOARD OF DIRECTORS IS RESPONSIBLE FOR SETTING CRITERIA FOR EVALUATING THE PERFORMANCE OF CEO AND COO. THE BOARD OF DIRECTORS USES 6 CRITERIA MEASURES: 1) SAFETY AND SOUNDNESS OF CU, 2) THOROUGH EVALUATION OF FULFILLMENT OF STRATEGIC PLAN, 3) CURRENT CREDIT UNION FINANCIAL REPORTS, 4) ADHERENCE TO APPROVED BUDGET, 5) BOARD/EXECUTIVE TEAM RELATIONSHIP AND 6) CURRENT C.A.M.E.L.

SALARY BASES FOR THE CEO AND COO ARE BASED ON THE FOLLOWING SOURCES:

THE CU USES AN INDEPENDENT NATIONAL PEER COMPARISON STUDY BY THE CREDIT UNION NATIONAL ASSOCIATION. THE COMPLETE SALARY SURVEY IS CALLED "CREDIT UNION STAFF SALARY SURVEY". A SECOND SURVEY IS ALSO USED FROM THE SAME SOURCE. HOWEVER, THIS SURVEY IS CUSTOMIZED TO THE GEOGRAPHIC AREA OF THE U.S. WHERE THE CU IS LOCATED. CRITERIA USED TO COMPLETE THE SURVEY IS AS FOLLOWS: SPECIFIC JOB TITLES AND POSITION DESCRIPTIONS, CREDIT UNION ASSET SIZE, NUMBER OF EMPLOYEES, FULL-TIME/PART-TIME EMPLOYEES, NUMBER OF SERVICES, NUMBER OF MEMBERS AND NUMBER OF BRANCHES. COMPARISON DATA INCLUDES AVERAGE WAGE FOR POSITION, 25 PERCENTILE WAGES, MEDIAN WAGES, AND 75 PERCENTILE WAGES. CU USES 75 PERCENTILE WAGES. THE DATA ALSO INCLUDES TRENDING OF BONUSES AND INCENTIVES PER POSITION.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

SALARY BASES FOR ALL EMPLOYEES EXCEPT FOR THE CEO AND COO ARE BASED ON THE FOLLOWING SOURCES:

THE CU USES AN INDEPENDENT NATIONAL PEER COMPARISON STUDY BY THE CREDIT UNION NATIONAL ASSOCIATION. THE COMPLETE SALARY SURVEY IS CALLED "CREDIT UNION STAFF SALARY SURVEY". A SECOND SURVEY IS ALSO USED FROM THE SAME SOURCE. HOWEVER, THIS SURVEY IS CUSTOMIZED TO THE GEOGRAPHIC AREA OF THE U.S. WHERE THE CU IS LOCATED. CRITERIA USED TO COMPLETE THE SURVEY IS AS FOLLOWS: SPECIFIC JOB TITLES AND POSITION DESCRIPTIONS, CREDIT UNION ASSET SIZE, NUMBER OF EMPLOYEES, FULL-TIME/PART-TIME EMPLOYEES, NUMBER OF SERVICES, NUMBER OF MEMBERS AND NUMBER OF BRANCHES. COMPARISON DATA INCLUDES AVERAGE WAGE FOR POSITION, 25 PERCENTILE WAGES, MEDIAN WAGES, AND 75 PERCENTILE WAGES. CU USES 75 PERCENTILE WAGES. THE DATA ALSO INCLUDES TRENDING OF BONUSES AND INCENTIVES PER POSITION.

THE ABOVE INFORMATION IS USED TO EVALUATE EACH POSITION WITHIN THE CREDIT

Name of the organization: BELCO COMMUNITY CREDIT UNION

Employer identification number: 23-1445884

UNION. THE AVP OF HR/TD MAKES RECOMMENDATIONS FOR ANY CHANGE IN SALARY IDENTIFIED THROUGH THE REVIEW. CEO AND COO GIVE FINAL APPROVAL FOR ANY CHANGES NEEDED.

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.

Forms 990 / 990-PF

Other Notes and Loans Receivable

For calendar year 2009, or tax year beginning , and ending

2009

Name

BELCO COMMUNITY CREDIT UNION

Employer Identification Number

23-1445884

FORM 990, PART X, LINE 7 - ADDITIONAL INFORMATION

	Name of borrower	Relationship to disqualified person
(1)	LOANS TO CREDIT UNION MEMBERS	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

	Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

	Security provided by borrower	Purpose of loan
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

	Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
(1)		207,499,355	217,599,656	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Totals		207,499,355	217,599,656	

Forms 990 / 990-PF

Mortgages and Other Notes Payable

For calendar year 2009, or tax year beginning , and ending

2009

Name

BELCO COMMUNITY CREDIT UNION

Employer Identification Number

23-1445884

FORM 990, PART X, LINE 23 - ADDITIONAL INFORMATION

	Name of lender	Relationship to disqualified person
(1)	NOTE PAYABLE - CORP. CREDIT UNION	
(2)	LINE OF CREDIT - CORP. CREDIT UNION	
(3)	NOTE PAYBLE - CORP CREDIT UNION	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

	Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)	17,000,000	12/19/08	01/20/09	FIXED RATE TERM	1.500
(2)	3,000,000	12/03/09	VARIOUS	REVOLVING VARIABLE RATE	1.980
(3)	6,000,000	12/14/09	01/14/10	FIXED RATE TERM	0.920
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

	Security provided by borrower	Purpose of loan
(1)	LOAN ASSETS	LIQUIDITY
(2)	LOAN ASSETS	LIQUIDITY
(3)	LOAN ASSETS	LIQUIDITY
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

	Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)		17,000,000	
(2)		3,000,000	
(3)			6,000,000
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Totals		20,000,000	6,000,000

Federal Statements

Taxable Interest on Investments

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75
SAVINGS ACCOUNTS	$ 37,507		14		
TOTAL	$ 37,507				

Taxable Dividends from Securities

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75
INVESTMENT INCOME	$ 1,806,473		14		
TOTAL	$ 1,806,473				

Federal Statements

Form 990, Part IX, Line 24f - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
NEGATIVE SHARE LOSSES	$ 169,283	$ 169,283	$	$
PHEAA Q2/ ANN *07	166,568	166,568		
PLASTIC CARD LOSS FRAUD)	165,331	165,331		
CREDIT RPTS/CONS LNS *MO	144,684	144,684		
SVC FEES/PARTICIPATIONS/I	144,092	144,092		
MID ATLANTIC SERVICE	140,144	140,144		
CONS LN/MISCELLANEOUS	119,838	119,838		
BRANCH SECURITY	119,043	119,043		
VISA USA PNB/INTNL FEE	117,978	117,978		
CONSULTING MISC ALL)	115,180	115,180		
APPRAISALS	86,999	86,999		
ATM SERVICE EXP *08 *RP	82,503	82,503		
OPERATING MISC ALL BRS)	78,554	78,554		
STATE EXAMINATION FEE	77,995	77,995		
MICROSOFT OFFICE LICENSE	62,210	62,210		
PAYROLL/BENEFITS *WKLY	61,108	61,108		
VISA USA CVC FEES	60,622	60,622		
STATEMENT PROCESSING *MO	59,619	59,619		
ATM MAINT-ALL *08 *RP	56,365	56,365		
SRMS NETWORK TECHNOLOGIES	54,660	54,660		
IA SYSTEMS *MO	54,008	54,008		
ATM PROCESSING PREV MO	44,273	44,273		
EVAULT *MO	42,339	42,339		
RADDON FIN-CEO HOUSE *01	41,922	41,922		
COLLECTION COSTS/LOANS	39,833	39,833		
LANDMARK LEASE COMM *MO	39,732	39,732		
MAIN EQUIP MISC *01 *RP	37,630	37,630		
IMPAIRMENT OF STOCK	36,356	36,356		
SECURE WORKS *MO	33,407	33,407		
VISA USA GLD FEES	29,782	29,782		
DUES ALL SHARED	28,601	28,601		
PENNLANTIC SUPP *MO	26,159	26,159		
ACCEL MBRS FIN *MO	22,992	22,992		
LENDING SOLUTION *MO	22,443	22,443		
ANNUAL MTG MISCELLANEOUS	17,966	17,966		
ANNUAL MEETING DINNER	17,608	17,608		
VISA USA PLT FEES	17,074	17,074		

Federal Statements

Form 990, Part IX, Line 24f - All Other Expenses (continued)

Description	Total Expenses	Program Service	Management & General	Fund Raising
IPS MAINT SUPP/GL &AP	$ 15,162	$ 15,162	$	$
INTEGRATED MEDIA MGMNT *M	12,883	12,883		
PASSAGEWAYS/INTRANET *MO	12,543	12,543		
IMAGESOFT MAINT	12,197	12,197		
CUNA/IRA ADMIN Q2	11,789	11,789		
WEB/NETW SOL/DIG DEF *RP	11,097	11,097		
DEPOSIT ERROR O/S	9,527	9,527		
FIMAC SOLUTIONS SUPPORT	8,980	8,980		
PLASTIC CARD PROD PNB	8,169	8,169		
TITLE FEES	7,530	7,530		
TRICHYS HOSTING FEE *QTRL	7,200	7,200		
WOLTERS KLUWER FIN SVCS *	6,895	6,895		
INTEGRATED COMP SOLUTIONS	5,974	5,974		
LIEBERT GLOBAL SVCS	5,425	5,425		
PLASTIC CARD PROD CHK	5,354	5,354		
INTERNET CONN *MO	5,285	5,285		
MCAFEE ANTIVIRUS SFTWR 1	4,800	4,800		
PLASTIC CARD PROD GLD	4,652	4,652		
CETO CASH CALC SFTWR	4,403	4,403		
LASER SUPPORT/LENDING	4,327	4,327		
PLASTIC CARD PROD CVC	4,119	4,119		
ANNUAL MEETING REPORTS	3,868	3,868		
RENT EQUIP MISC	3,657	3,657		
ANNUAL MTG/PRIZES	3,274	3,274		
TECH SERVICES	3,046	3,046		
MISC GENERAL EXP	2,944	2,944		
PARADIGM SOLUTIONS *MO	2,937	2,937		
INCOME/LOSS MISCELLANEOUS	2,633	2,633		
FISHER-RAGER CONSULTING *	2,500	2,500		
ANNUAL MTG/ENTERTAINMENT	2,500	2,500		
INTUIT/QUICKEN *MO	2,500	2,500		
BANCSOURCE DOC/CK SCAN AN	2,321	2,321		
OFAC SUPPORT	2,140	2,140		
NOTARIES/LICENSE ALL)	1,868	1,868		
NEXSAN TECH MO*	1,271	1,271		
ANN MTG CENTERPIECES	1,207	1,207		
VEHICLE GUIDES ALL)	600	600		

Federal Statements

Form 990, Part IX, Line 24f - All Other Expenses (continued)

Description	Total Expenses	Program Service	Management & General	Fund Raising
PLASTIC CARD PROD PLAT	$ -4,085	$	$ -4,085	$
LESS SALE OF TICKETS	-8,027		-8,027	
OTHER FRAUD LOSS	-14,230		-14,230	
SHARE INSURANCE EXPENSE	-249,653		-249,653	
TOTAL	$ 2,566,483	$ 2,842,478	$ -275,995	$ 0