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Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2009

Open to Public

Internal F	Revenue	Service Fine of	rganization may nave to t	ise a copy of this return to	satisty sta	te reporting	requirements	Inspection		
A Fo	the 2	2009 calendar yea	r, or tax year beginning (11-01-2009 and ending 12	2-31-2009		D Employer ide	ntification number		
		pplicable Please	C Name of organization Taleris Credit Union Inc							
Address change use IRS label or Doing Business As							34-0153040 E Telephone nu			
│ Nan		type. See					(216) 739-2	2300		
厂 Inıtı ⊏ –		Instruc-	Number and street (or P O 1250 E Granger Road	box if mail is not delivered to sti	reet address)	Room/suite	G Gross receipts			
∏ Теп — .			_							
厂 Am∈			City or town, state or coun Brooklyn Heights, OH 4413							
J App	lication	n pending					İ			
			me and address of princip O Thomas	al officer		H(a) Is the affilia	is a group return ites?	for		
			East Granger Road yn Heights, OH 44131			411114				
		BIOOKI	yn neights, On 44131			• •	l affiliates include			
Tax	-exem	npt status 🔽 501(c) (14) ◀ (insert no)	947(a)(1) or			o," attach a list ip exemption nui	(see instructions) mber ►		
J W	ebsit e	:: ► www.taleriscu	org			(-)				
K Form	n of ord	ganization 🔽 Corporat	tion Trust Association	Other 🏲		L Year of fo	rmation 1935 M	State of legal domicile OH		
Par		Summary	,			12 / 04/ 0/ / 0		State of logar dominate on		
	1	•	-	or most significant activitie	es.					
ا بر		The Credit Union p	provides financial service	es to qualified members						
Governance										
E ∣	_									
၌ ၂		•		ontinued its operations or d				_		
	3 4	-		g body (Part VI, line 1a) the governing body (Part VI				<u>8</u>		
Activities &	-		nployees (Part V, line 2a		i, iiile ib)			48		
			olunteers (estimate if nec				6	14		
ď			•	m Part VIII, column (C), lıı	ne 12 .	•	7a	46,225		
	b Net unrelated business taxable income from Form 990-T, line 34						7b	-40,847		
						Prio	or Year	Current Year		
I	8	Contributions and	d grants (Part VIII, line 1	lh)				0		
an le	9			2g)			4,112,492	3,776,845		
Revenue	10		, ,), lines 3, 4, and 7d) .			1,133,176	962,601		
_	11 12			es 5, 6d, 8c, 9c, 10c, and 1 ust equal Part VIII, columr			1,148,254	150,755		
	12						6,393,922	4,890,201		
	13			column (A), lines $1-3$).				0		
	14	·	or for members (Part IX, o			1,172,039	696,377			
8	15	Salaries, other co	ompensation, employee b), lines 5-		2,736,643	2,427,418			
Expenses	16a	•	draising fees (Part IX, col				0			
<u>ਵੇਂ</u>	ь	Total fundraising exp	penses (Part IX, column (D), lir							
	17	Other expenses	(Part IX, column (A), line			2,716,662	2,893,098			
	18	Total expenses /	Add lines 13–17 (must e	qual Part IX, column (A), lı	ne 25)		6,625,344	6,016,893		
	19	Revenue less exp	penses Subtract line 18	from line 12			-231,422	-1,126,692		
Net Assets or Fund Balances							g of Current 'ear	End of Year		
tege Tege	20	Total assets (Pai	rt X, line 16)				76,880,280	76,379,069		
8 B	21						64,180,954	63,937,325		
žĒ	22	Net assets or fun	nd balances Subtract line	21 from line 20			12,699,326	12,441,744		
Par	t II	Signature Bl	ock					_		
				amined this return, including accortion of preparer (other than office						
Sign		*****					09-27			
Here	•	Signature of office				Date				
		Robin D Thomas Type or print nam								
		r 		Date	Che	eck ıf	Preparer's identify	ving number		
Paid		Preparer's signature		Date	self	f	(see instructions)			
Prepa	rer's	Firm's name (or your	s k		em	polyed 🕨 🦵				
Use C		if self-employed),	•				EIN 🕨			
	-	address, and ZIP + 4						Phone no •		
							Phone no 🕨			

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

To provide lending, savings, and other financial services to its qualifying members at terms generally better than available in the marketplace and with a service based emphasis that recognizes the members' status as "owners"

2		ion undertake any significant pi 10 or 990-EZ?	ogram services during the year wh	ich were not listed on	┌ Yes ┌ No
	If "Yes," describe	these new services on Schedu	le O		
3		ion cease conducting, or make	significant changes in how it condu	icts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Schedule O			
4	Section 501(c)(3	3) and 501(c)(4) organizations a	each of the organization's three larg and section 4947(a)(1) trusts are i venue, if any, for each program serv	required to report the am	
4a	(Code N/A) (Expenses \$	including grants of \$) (Revenue \$)
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d		services (Describe in Schedule			
	(Expenses \$	ıncludıng	grants of \$) (Revenue \$)
4e	Total program s	ervice expenses►\$			

Part IV	Checklis	t of I	Reauired	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νο
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		N o
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νo
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	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? 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 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	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ļ	ļ	ı
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
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? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If</i> "Yes," complete Schedule F, Part II	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		N o
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? <i>If</i> " <i>Yes," complete Schedule G, Part I</i>	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

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Par	t IV Checklist of Required Schedules (continued)			
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		Νo
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		Νo
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	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		No
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		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
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 owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
36	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		Νο
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	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance								

			Yes	No
a	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 2,656			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
а	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.			
h	return			
,	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
а	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	If "Yes," enter the name of the foreign country ►			
	Financial Accounts			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	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?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	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		
С	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			
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		
	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		
	Sponsoring organizations maintaining donor advised funds.			
а	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		
)	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2=	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
_	year 12b			

1250 E Granger Cleveland, OH 44131 (216) 739-2300

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 8			
ь	Enter the number of voting members that are independent 1b 8			
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	Yes	
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		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		Νo
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)		W	B.I
4.0		40	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
	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		No
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13		Νο
14	Does the organization have a written document retention and destruction policy?	14		Νο
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply			
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ie orga	nızatıor	ı -
	Robin D Thomas	•		

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, and current key employees 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did n	•	ate any	curr	ent c	r fo	rmer o	ffice	r, director, trustee o	or key employee	
(A) Name and Title	(B) (C) A verage Position (check all hours that apply)				(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other			
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Mary Jane Camarato Chairperson	2 30	Х						0	0	0
Barbara Davis treasurer	2 30	х						0	0	0
Carl DeJohn Secretary	2 30	х						О	0	0
Harry Katzenmeyer dırector	90	Х						0	0	0
James Remalia Vice Chairperson	2 30	х						0	0	0
Donald Salsbury Director	90	х						0	0	0
James Thomas II Director	90	х						0	0	0
John Gary Waugh Director	2 30	Х						0	0	0
Harley Hill Chief Financial Officer	40 00			х				81,992	0	22,271
James Mckenzie Vice President Operation	40 00			х				102,347	0	30,570
Robin D Thomas CEO & President	40 00			х				176,282	0	21,834

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? <i>If "Yes," complete Schedule J for such individual</i>	3		Νο
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			
	ındıvıdual	4	Yes	
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	5		Νo

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)	(B)	(C)
Name and business address	Description of services	Compensation
Anthem Medical 351 W Howard Taft Cincinnati, OH 45206	Medical/Dental Coverage	378,874
First Data Corp 6200 S Quebec St Greenwood Village, CO 80111	ATM Network Provider	207,843
Jack Henry & Assoc PO Box 503328 St Louis, MO 63150	Data Processer	139,219
DIEBOLD INC PO BOX 643543 PITTSBURG, PA 152643543	ATM MAINTENANCE	105,281
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►4	wno received more than	

Part V	444	Statement of Kevenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
22	1a	Federated campaigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership dues 1b					
55€	ן "						
ું.	C	Fundraising events 1c					
 ≝,₩	d	Related organizations 1d					
<u></u>	l e	Government grants (contributions)					
쓸;;;						!	!
쓸놂	f	All other contributions, gifts, grants, and similar amounts not included above					
ĕ₹	g	Noncash contributions included in					
ŧ₽	-	lines 1a-1f \$					
츳릁	h	Total. Add lines 1a-1f	▶				
<u>a-</u>		Business	Code				
ш	2a	Loan Interest	522,100	2,541,682	2,541,682		
s Se	ь	Fee Income	522,100	1,235,163	1,235,163		
Т	c						
3	`						
N	d						
Ę	e		T				
Program Service Revenue	f	All other program service revenue	+				
្តិ		. •					
Δ	g	Total. Add lines 2a-2f	. ▶	3,776,845			
	3	Investment income (including dividends, interest					
		and other similar amounts)	- ▶	962,601			962,601
	4	Income from investment of tax-exempt bond proceeds	- ▶				
	5	Royalties	·				
	•						
		(ı) Real (ıı) Pers	onai				
	6a	Gross Rents					
	Ь	Less rental expenses					
	c	Rental income					
		or (loss)					
	d	Net rental income or (loss)					
		(ı) Securities (ii) O t	her				
	7a	Gross amount from sales of					
		assets other					
		than inventory					
	Ь	Less cost or other basis and					
		sales expenses					
	C	Gain or (loss)					
	d	Net gain or (loss)	•				
	8a	Gross income from fundraising					
<u> </u>		events (not including					
둢		\$					
ž		of contributions reported on line 1c) See Part IV, line 18					
č		a					
<u> </u>	[
Other Revenue	b	Less direct expenses b	<u> </u>				
J	c	Net income or (loss) from fundraising events .					
	9a	Gross income from gaming activities					
		See Part IV, line 19					
	١.	a					
	Ь	Less direct expenses b					
	С	Net income or (loss) from gaming activities	-				
	10a	Gross sales of inventory, less					
		returns and allowances .					
		a					
	ь	Less cost of goods sold b					
	c	Net income or (loss) from sales of inventory .					
		Miscellaneous Revenue Business	Code				
	11a	Miscellaneous	522,100	104,530	104,530		
			522,100	46,225		46,225	
	Ь	UBIT Revenue	522,100	+0,223		70,223	
	C						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
			►	150,755			
	12	Total revenue. See Instructions	▶			_	
	l			4,890,201	3,881,375	46,225	962,601

Part IX Statement of Functional Expenses

Do no	ll other organizations must complete column (A) but are not required to ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	<u> </u>	expenses	general expenses	expenses
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	696,377			
5	Compensation of current officers, directors, trustees, and key employees	360,621			
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	1,444,243			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	132,645			
9	Other employee benefits	355,647			
LO	Payroll taxes	134,262			
1	Fees for services (non-employees)				
а	Management				
b	Legal	16,630			
c	Accounting	64,766			
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	3,870			
g	Other	155,365			
2	Advertising and promotion	99,048			
3	Office expenses	236,294			
4	Information technology	142,497			
5	Royalties				
6	Occupancy	213,713			
7	Travel	19,768			
.8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	41,219			
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	330,730			
3	Insurance	38,720			
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Provision for Loan Loss	753,277			
b	Product Support	594,966			
c	SHARE INSURANCE ASSESSM	95,234			
d	Loan Servicing	77,445			
e	ALL OTHER EXPENSES	9,556			
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	6,016,893			
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				

Pa	rt X	Balance Sheet					<u>-</u>
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			610,868	1	679,656
	2	Savings and temporary cash investments			7,091,272	2	5,938,965
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			247,228	4	238,249
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under sepersons described in section 4958(c)(3)(B) Complete Part II of		4958(f)(1)) and			
		Schedule L				6	
Assets	7	Notes and loans receivable, net			39,791,152	7	39,006,227
SS	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			158,545	9	182,573
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	6,866,587			
	ь	Less accumulated depreciation	10b	2,952,874	4,124,125	10c	3,913,713
	11	Investments—publicly traded securities			20,485,815	11	23,701,533
	12	Investments—other securities See Part IV, line 11		•	2,346,010	12	1,657,000
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			2,025,265	15	1,061,153
	16	Total assets. Add lines 1 through 15 (must equal line 34)			76,880,280	16	76,379,069
	17	Accounts payable and accrued expenses .			414,504	17	326,789
	18	Grants payable				18	
	19	Deferred revenue			13,067	19	15,876
	20	Tax-exempt bond liabilities				20	
jes	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.	•		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
217		persons Complete Part II of Schedule L		•		22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			63,753,383	25	63,594,660
	26	Total liabilities. Add lines 17 through 25			64,180,954	26	63,937,325
Fund Balances		Organizations that follow SFAS 117, check here ► and comp through 29, and lines 33 and 34.	lete li	nes 27			
anı	27	Unrestricted net assets				27	
Ba	28	Temporarily restricted net assets				28	_
F	29	Permanently restricted net assets				29	
Fui		Organizations that do not follow SFAS 117, check here ▶	d com	plete			
٥٢		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			0	30	0
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			0	31	0
	32	Retained earnings, endowment, accumulated income, or other fu	nds		12,699,326		12,441,744
Net	33	Total net assets or fund balances			12,699,326		12,441,744
	34	Total liabilities and net assets/fund balances			76,880,280	34	76,379,069

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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	Yes	
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 separated basis			
3а	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		No
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		

Form **990** (2009)

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DLN: 93493270005080

OMB No 1545-0047

Open to Public

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

► 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.

Supplemental Financial Statements

	ne of the organization ris Credit Union Inc		Emp	loyer identificat	ion numbe	:r
Pa	rt I Organizations Maintaining Donor Ad			or Accounts.	Complet	e if the
	organization answered "Yes" to Form 99	,	1			
		(a) Donor advised funds	(b) Funds and ot	her accou	nts ———
•	Total number at end of year					
2	Aggregate contributions to (during year)					
}	Aggregate grants from (during year)					
ŀ	Aggregate value at end of year					
	Did the organization inform all donors and donor advi- funds are the organization's property, subject to the o	-	nor advı	sed	☐ Yes	┌ No
•	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit				┌ Yes	┌ No
Pa i	t III Conservation Easements. Complete	ıf the organızatıon answered "Yes"	to Forn	า 990, Part IV	, lıne 7.	
· !	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualication on the last day of the tax year	on or pleasure) Preservation of a Preservation of a	certifie	d historic struct	•	ā
	easement on the last day of the tax year			Held at the	End of the	Vear
а	Total number of conservation easements		2a	rield at the	Liid Oi tile	ıcaı
b	Total acreage restricted by conservation easements		2b			
	Number of conservation easements on a certified his		2c			
c d	Number of conservation easements included in (c) ac	` ,	2d			
u						
	Number of conservation easements modified, transfe the taxable year -	rrea, released, extinguisnea, or terminat	ed by th	e organization (iuring	
	Number of states where property subject to conserva	ition easement is located 🟲				
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		ndling of	violations, and	☐ Yes	┌ No
	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easer	ments d	uring the year 🕨	·	
	A mount of expenses incurred in monitoring, inspecting	ng, and enforcing conservation easement	ts during	; the year 🟲 \$ _		
	Does each conservation easement reported on line 2 $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	(d) above satisfy the requirements of se	ction		☐ Yes	┌ No
)	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easem	he footnote to the organization's financia				
ar	Organizations Maintaining Collectio Complete if the organization answered "		or Otl	ner Similar A	Assets.	
.a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or resear	rch ın fu			·,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research			•	
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$		
	If the organization received or held works of art, histofollowing amounts required to be reported under SFAS		for finan			
а	Revenues included in Form 990, Part VIII, line 1	-		► \$		
				· · · · · · · · · · · · · · · · · · ·		

b Assets included in Form 990, Part X

3	Using the organization's accession and othe			ne fol							
	ıtems (check all that apply) —			_							
а	Public exhibition		d	ı	Loan	orexch	nange prog	rams			
b	Scholarly research		e	Γ	O the	-					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	w the	y furthe	er the o	rganızatıor	ı's ex	empt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								nılar	┌ Yes	┌ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar						n answere	d "Y	es" to Form	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	edıary	for c	ontribu	itions c	or other ass	etsı	not	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ing t	able		Г		Aı	nount	
с	Beginning balance							1c			
d	Additions during the year						ļ	1d			
e	Distributions during the year						ŀ	1e			
f	Ending balance						ļ	1f			
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	e 21?				L			┌ Yes	
	If "Yes," explain the arrangement in Part XIV									,	,
	rt V Endowment Funds. Complete		n ans	were	ed "Ye	s" to I	Form 990	Par	t IV, line 10.		
	<u>'</u>	(a)Current Year		Prior `			o Years Back		Three Years Back	(e) Fou	Years Back
1a	Beginning of year balance										
ь	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as								
а	Board designated or quasi-endowment 🕨	%									
ь	Permanent endowment 🕨 %										
c	Term endowment ► %										
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are held	d and a	dmınıstere	d for	the		
	organization by									Ye	s No
	-									1.6	
	(i) unrelated organizations								3a	(i)	
•	(i) unrelated organizations(ii) related organizations			· •					За	(i) (ii)	
	(i) unrelated organizations	ns listed as require			 ule R?				За	(i)	
4	(i) unrelated organizations (ii) related organizations	ns listed as require e organization's en	dowm	ent fu	 ule R? nds		ert Y line		За	(i) (ii)	
4	(i) unrelated organizations	ns listed as require e organization's en	dowm	ent fu ee F	ule R? Inds	90, Pa			3a	(i) (ii) b	
4 Par	(i) unrelated organizations (ii) related organizations	ns listed as require e organization's en	dowm	ent fu ee F	 ule R? nds	90, Pa	art X, line (b)Cost or or basis (oth	other	За	(i) (ii) b	Book value
4 Par	(i) unrelated organizations (ii) related organizations	ns listed as require e organization's en	dowm	ent fu ee F	ule R? Inds orm 9	90, Pa	(b)Cost or obasis (oth	other	(c) Accumulate	(i) (ii) b	
4 Par	(i) unrelated organizations (ii) related organizations	ns listed as require e organization's en	dowm	ent fu ee F	ule R? Inds orm 9	90, Pa	(b)Cost or obasis (oth	other er)	(c) Accumulate	(i) (ii) b	Book value
Par	(i) unrelated organizations	ns listed as require e organization's en	dowm	ent fu ee F	ule R? Inds orm 9	90, Pa	(b)Cost or obasis (oth	other er) 2,111	(c) Accumulate depreciation	(i) (ii) b	Book value 1,142,111
Par 1a b	(i) unrelated organizations	ns listed as require e organization's en	dowm	ent fu ee F	ule R? Inds orm 9	90, Pa	(b)Cost or obasis (oth	other er) 2,111	(c) Accumulate depreciation	(i)	Book value 1,142,111
1a b c d	(i) unrelated organizations	ns listed as require e organization's en s, and Equipme	ent. S	ent fu ee F (a bas	ule R? Inds Orm 9 Ocst of	90, Parother tment)	(b)Cost or or basis (oth 1,14, 3,10)	other er) 2,111 2,538	(c) Accumulate depreciation	(i) (ii) b (d) (d) (43 (44 (44) (43 (44 (4) (44) (44 (44) (44 (44) (4)	Book value 1,142,111 2,200,364

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	d of valuation f-year market value
Financial derivatives		
Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		d of valuation
(a) Description of investment type	(b) Book value	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	- 45	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25. (b) A mount	
Federal Income Taxes	() A mount	
member deposits	62,374,178	
deferred compensation liability - 457 (B)(T)	90,572	
Post Retirement Medical Liability	525,014	
Post REtirement HRA Liability	173,318	
Pension Liability - Defined Benefit Plan	431,578	

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,890,201
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,016,893
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,126,692
4	Net unrealized gains (losses) on investments	4	401,818
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	467,292
9	Total adjustments (net) Add lines 4 - 8	9	869,110
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-257,582
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	4,890,201
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	4,890,201
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
C	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	4,890,201
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial	1	6,016,893
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	6,016,893
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 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	6,016,893
Par	t XIV Supplemental Information		
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete t tional information		
auul	LIONAL INIONINALION		

Ident if ier	Return Reference	Explanation
		Part XI, Line 8 other - The amount is composed of change in FAS 158 unrealized losses on defined benefit plan obligations of \$352,222, AND change in FAS 158 unrealized gains in postretirement benefit plan obligation of \$115,070 Part X, Line 2 - There is no FIN 48 footnote in the 2009 financials because Taleris did not have a significant uncertain tax liability to report

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DLN: 93493270005080

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

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

> ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

Open to Public Inspection

Internal Revenue Service	► Attach to Form 990. ► See separate instructions.		Inspection
Name of the organiz Taleris Credit Union Inc	zation	Employer identif	ication number
		34-0153040	
Part I Question	ons Regarding Compensation		

					Yes	Νο
1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to p					
	First-class or charter travel	\sqcap	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u> </u>	Health or social club dues or initiation fees			
	Discretionary spending account	ı	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement orprovision of all the expenses describe			1b		Νο
2	Did the organization require substantiation prior to reim officers, directors, trustees, and the CEO/Executive Dir			2	Yes	
3	Indicate which, if any, of the following the organization u organization's CEO/Executive Director Check all that a		,			
	Compensation committee		Written employment contract			
	Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	V	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part or a related organization	: VII	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pay	men	t?	4a		Νο
b	Participate in, or receive payment from, a supplemental	non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based	d co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provid	le th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must c	:omp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of	1a,	did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	1a,	did the organization pay or accrue any			
а	The organization?			6a		
ь	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 payments not described in lines 5 and 6? If "Yes," desc			7		
8	Were any amounts reported in Form 990, Part VII, paid subject to the initial contract exception described in Re in Part III			8		
9	If "Yes" to line 8, did the organization also follow the resection 53 $4958\text{-}6(c)\text{?}$	butt	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) 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	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	ise (ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Robin D Thomas	(I) (II)	161,534 0	14,055 0		9,721	12,113 0		0

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
Supplemental Information		Part I, Line 1a and 1b - CEO/President's health club dues paid by credit union as part of a written executive benefit program Part I, Line 4b - CEO/President participates in a 457(f) nonqualified retirement plan, however, the plan had no earnings for the 2009 tax year

Schedule J (Form 990) 2009

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE 0

(Form 990)

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.

Supplemental Information to Form 990

Employer identification number Name of the organization Taleris Credit Union Inc 34-0153040

ldentifier	Return Reference	Explanation		
Form 990, Part VI, Section A, Inne 2		CARL DEJOHN - BOARD OF DIRECTOR AND STEVE DEJOHN - SUPERVISORY COMMITTEE MEMBER HAVE A FAMILY RELATIONSHIP		
Form 990, Part VI, Section A, Inne 6		THE CREDIT UNION IS COMPRISED OF A SINGLE CLASS OF APPROXIMATELY 14,155 MEMBER-OWNERS, EACH OF WHICH HAS EQUAL RIGHTS IN OWNERSHIP, GOVERNANCE, AND VOTING RIGHTS AT THE ANNUAL MEETINGS		
Form 990, Part VI, Section A, line 7a		THE MEMBER OWNERS OF THE CREDIT UNION HAVE THE AUTHORITY TO ELECT THE MEMBERS OF THE BOARD OF DIRECTORS FOR THREE-YEAR TERMS EXPIRING ON STAGGER BASIS CANDIDATES ARE ELECTED BY A SIMPLE PLURALITY VOTE THE BOARD OF DIRECTORS APPOINT VOLUNTEERS TO SERVE ON THE SUPERVISORY COMMITTEE, WHICH IS VESTED WITH MONITORING SAFETY AND SOUNDSHIP OF THE ORGANIZATION IF DEEMED APPROPRIATE, THE SUPERVISORY COMMITTEE CAN SUSPEND BOARD MEMBERS AND CAN CALL A SPECIAL MEETING OF THE MEMBERSHIP TO EVALUATE THE ISSUE AND VOTE TO EITHER DISMISS OR REINSTATE BOARD MEMBERS		
Form 990, Part VI, Section A, Inne 7b		Certain changes to the governing documents (bylaws) must be approved by the member-owners after they have been approved by the board of directors and the regulatory agency approval occurs when at least 50% of the member-owners vote to approve		
Form 990, Part VI, Section B, line 11		Prior to being filed with the IRS, a copy of the IRS Form 990 and related schedules are reviewed by the president/ceo, chief financial officer, and the credit union's independent auditor		
Form 990, Part VI, Section B, line 12c		board members and officers annually complete a survey related to loans, business relationships, and family members that could, or do, create a conflict of interest these surveys are held at the main office conflicts of interest are determined by a review of the potential conflicts by the president/ceo and the board of directors if a conflict exists then the conflicted board member is excluded from votes related to any potential or existing relationships involving the conflict of interest		
Form 990, Part VI, Section B, line 15		the process used to set the CEO's annual salary is based on a combination of comparison to comparable sized credit unions through use of recommendations from salary consultants and the attainment in the current year of predefined performance objectives		
Form 990, Part VI, Section C, line 19		the credit union's financial statements are posted at all office entrances as required by state regulations by- law's, conflict of interest policy and other governing documents can be reviewed by appointment at the credit union's E Granger Rd office		
or Danaswask Badus	ston Ast Notes ass	the instructions for Form 990 Cat. No. 51.056K Schedule O (Form 990) 2009		

Additional Data

Software ID:

Software Version:

EIN: 34-0153040

Name: Taleris Credit Union Inc

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

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Provision for Loan Loss	753,277			
Product Support	594,966			
SHARE INSURANCE ASSESSM	95,234			
Loan Servicing	77,445			
ALL OTHER EXPENSES	9,556			