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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 Fo	r the	2009 ca	lendar yea	r, or tax year beginning 0	1-01-2009 and ending 12	2-31-2009			
B Ch	eck ıf a	pplicable	Please	C Name of organization CREDIT UNIONS CHARTERE	D IN THE STATE OF			D Employer i	dentification number
☐ Ad	dress ch	nange	use IRS label or	222 LAKE TRUST CREDIT UI Doing Business As	1ION			38-12505 E Telephone	
∏ Na	me cha	nge	print or type. See	DETROIT EDISON CREDIT U	NION				
Ind	tial retu	rn	Specific	Number and street (or P O	box if mail is not delivered to st	reet address)) Room/s	(800) 842	
Те	mınate	d	Instruc- tions.	15800 NORTH HAGGERTY R	OAD			G Gross receipt	ts \$ 372,645,793
┌ Am	ended	return		City or town, state or count	ry, and ZIP + 4				
┌ Ap	olication	n pending		PLYMOUTH, MI 48170					
			F Nan	ne and address of principa	al officer		H(a) I	s this a group retu	rn for
			WILLIA	AM J THIESS				ffiliates?	⊤Yes ▼No
				NORTH HAGGERTY ROA OUTH,MI 48170	<i>†</i> D				– –
			1 21110	0111,M1 40170				re all affiliates inclu	·
Ta	x-exen	npt status	▽ 501(c)) (14) ◄ (ınsert no)	47(a)(1) or			r "No," attach a lis Group exemption r	t (see instructions)
	ebsite	=: ► WW	W LAKETR				11(C)		
				tion Trust Association	Other -	ı	I Vear	of formation 1943	M State of legal domicile MI
		Sumi		ion i must Association	other P		L rear	or formation 1945	14 State of legal dofficile 141
				e organization's mission (or most significant activitie	es			
Governance		RECOR WHO W	D OF THE ORK, LIVE	FORMER HURON RIVER	RGY COMPANY AND SUB AREA CREDIT UNION A: IGHT COUNTIES COMPR THRIFT	SOFTHE	ACQUI	SITION DATE, A	ND ALL INDIVIDUALS
<u> </u>									
臺									
ŝ	2	Check t	hıs box ►F		ontinued its operations or d	lisposed o	f more t	han 25% of its ne	tassets
Activities &	3		,		body (Part VI, line 1a)				3
ĕ	4		_		he governing body (Part V				4
¥	5			nployees (Part V , line 2a)					5220
ă	6			olunteers (estimate if nece					616
	7a	Total gr	oss unrela	ted business revenue fror	m Part VIII, column (C), lıı	ne 12 .			7a 146,469
	ь	Net unr	elated busi	iness taxable income from	n Form 990-T, line 34 .				7b 19,540
								Prior Year	Current Year
	8	Contri	butions and	d grants (Part VIII, line 1	h)				0
Rayenue	9	Progra	m service	revenue (Part VIII, line 2			31,653,844	30,694,696	
e Ac	10	Invest	ment incor	me (Part VIII, column (A)		2,874,825	11,047,035		
Δ.	11				s 5, 6d, 8c, 9c, 10c, and 1			432,218	4,740,222
	12				ist equal Part VIII, columr			34,960,887	46,481,953
	13				column (A), lines 1-3) .			2 1,2 2 2 ,2 2 1	0
	14				olumn (A), line 4)				0
	15				enefits (Part IX, column (A				
Expenses		10)	,	, , ,	, , ,	• •		11,114,544	14,111,909
क	16a	Profes	sıonal fund	raising fees (Part IX, colu	ımn (A), line 11e)				0
ਡੋ	ь	Total fu	ndraising exp	enses (Part IX, column (D), line	≥ 25) ► 0				
	17	Other	expenses ((Part IX, column (A), lines	s 11a-11d, 11f-24f) .			34,943,043	32,207,795
	18	Totale	expenses /	Add lines 13–17 (must ed	qual Part IX, column (A), lı	ne 25)		46,057,587	46,319,704
	19	Reven	ue less exp	penses Subtract line 18 f	rom line 12			-11,096,700	162,249
\$ & € &							Begir	nning of Current Year	End of Year
Set Series	20	Totala	ssets (Par	rt X, line 16)		_		665,197,149	681,977,656
Net Assets or Fund Balances	21							617,740,379	624,829,682
<u> </u>	22				21 from line 20			47,456,770	57,147,974
Pa	rt II		ature Blo					, ,	<u> </u>
					mined this return, including acco				
			er, it is true, i	torrect, and complete Declarat	ion of preparer (other than office	er) is baseu (on all lillo	ппацоп от wnich ртер	
Sigr		****					2	2010-11-01	
Her	е	Signa	ature of office	er			[Date	
			am J Thiess P						
		Туре	or print nam	e and title		1			
		Preparer'			Date	Ch sel	eck ıf f-	Preparer's ider (see instruction	itifying number
Paid		signature	· /				polyed 🕨		1.5)
•	arer's		me (or your	s PLANTE & MORAN PLLC		<u> </u>		EIN Þ	
Use	Only		nployed), and ZIP + 4	2601 CAMBRIDGE COURT	STE 500			— ETIN F	
				AUBURN HILLS, MI 48326				Phone no 🕨	(248) 375-7100
Mav	the IR	S discus	s this retu	· · · · · · · · · · · · · · · · · · ·	n above? (see instructions)			✓ Yes No

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

MEMBERS FIRST, BUILDING FINANCIAL SUCCESS TO GETHER TO PROVIDE A FULL RANGE OF FINANCIAL SERVICES TO OUR MEMBERS

4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	•	, , , ,	LOANS, DEPOSITS, AND OTHER RELATED FIN	, ,	,
	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4	Section 501(c)(3	3) and 501(c)(4) organizations	each of the organization's three larg and section 4947(a)(1) trusts are r evenue, if any, for each program serv	equired to report the amoun	•
		e these changes on Schedule (·	·
3			significant changes in how it condu		Yes ✓ No
	If "Yes," describe	e these new services on Sched	ule O		
2			program services during the year whi		Yes 🔽 No

Part TV	Checklist	of Requir	red Sch	edules
4: I L T L T	CHECKHSU	. vi Keuuli	eu Stii	cuules

			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		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any 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? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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	Yes	
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		Νο
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		Νο
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			
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		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
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		Νο
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		Νο
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

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		N o
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		N o
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		N o
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? <i>If</i> "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			
	IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		N o
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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		Νο
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	Yes	
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		N o
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		N o
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	
		F	orm 990	(2009)

Part V	Statements	Regarding	Other II	RS Filings a	and Tax	Compliance
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	otatements Regarding ether and a mingo and rax 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			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1a 19,658 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		
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
1 a	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		Νo
Ь	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			
ā	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
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?	5c		
а	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		Νo
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		
0	Section 501(c)(7) organizations. Enter			
	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			
1	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)			
.2a	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			

PLYMOUTH, MI 48170 (800) 842-8568

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.

Section A. Governing Body and Management

Эе	ection 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	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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	. 3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Yes	
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	ne 9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
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?	10ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form	17 11	Yes	
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 ris to conflicts?	e 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		No
14	Does the organization have a written document retention and destruction policy?	. 14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,		
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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 taxable entity during the year?	a 16a		No
ь	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		
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of DIANA L SCOTT 15800 NORTH HAGGERTY ROAD	the orga	inizatior	n 🕨

Part VIII 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 i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	Posi t	(C tion (hat a	ched	ckal)	I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	individual trustee or director		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
See add'l data										

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ₱9

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3		No
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	ĺ
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services			

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
CERTIGY CARD SERVICES FOR CREDIT UNIONS 15950 BAY VISTA DR STE 170 CLEARWATER, FL 33760	LOAN SERVICER	803,850
I 9697 HAVEN AVENUE	USE OF SERVICE CENTER BRANCHES & DEBIT C	703,097
METAVANTE PO BOX 2269 ORLANDO, FL 32802	DEBIT AND ATM CARD PROCESSOR	679,912
ONLINE RESOURCES CORP 4795 MEADOW WOOD LANE CHANTILLY, VA 20151	SYSTEM PROVIDER	636,564
DOVENMUEHLE MORTGAGE INC 1 CORPORATE DRIVE SUITE 360 LAKE ZURICH, IL 60047	LOAN SERVICER	284,520
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►12	who received more than	

Form 99								Page 9
Part V	<u> </u>	Statement o	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
nts nts	1a	Federated camp	paigns 1a					
gra You	Ь		es 1b					
E H	С	Fundraising eve						
<u> </u>	d	Related organiz Government grants	ations 1d					
ons sin	e f	_	ons, gifts, grants, and 1f					-
Contributions, gifts, grants and other similar amounts	g	sımılar amounts no Noncash contrı						
anc.	h		s 1a-1f	▶				
				Business Code				
entié	2a	INTEREST ON LOAM	NS	522,100	24,995,108	24,995,108		
Program Serwce Revenue	b	FEES AND CHARGE	S	525,990	5,699,588	5,564,485	135,103	
	С							
ž.	d							
E E	e							
ž D	f	All other progra	im service revenue					
Δ	g	Total. Add lines	s 2a-2f		30,694,696			
	3	Investment inc	ome (including dividen	ds, interest				
			ar amounts)	⊢	9,431,574	9,431,574		
	4		tment of tax-exempt bond	· · · · · · · · · · · · · · · · · · ·				
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross Rents	(i) iteal	(II) I ersonar				
	ь	Less rental						
	c	expenses Rental income						
	d	or (loss) Net rental incor	me or (loss)	<u></u> ►				
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	243,627,524	84,151,777				
	Ь	Less cost or other basis and	242,082,563	84,081,277				
	С	sales expenses Gain or (loss)	1,544,961	70,500				
	d	Net gaın or (los	s)	►	1,615,461			1,615,461
nne	8a	Gross income fi events (not incl \$						
Other Revenue		of contributions See Part IV, lin	reported on line 1c) e 18					
the	ь		penses b					
0	c		loss) from fundraising	events 📴				
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19 a					
	Ь		penses b					
	10a	Gross sales of or returns and allo	• •	vities				
	ь	=	a pods sold b					
	С		loss) from sales of inve					
	11a	Miscellaneous		Business Code 900,099	4,740,222	4,728,856	11,366	
	ь	OTHER INCOM	I L		.,	,		
	c			+				
	d	All other revenu	ue					
	e	Total. Add lines			4 740 000			
	12	Total revenue.	See Instructions .		4,740,222 46,481,953	44,720,023	146,469	1,615,461

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 expenses	(C)	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		скрепосо	денени ехреноез	скрепосо
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22			-	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,202,890			
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	8,094,393			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,007,418			
•	Other employee benefits	2,036,356			
0	Payroll taxes	770,852			
1	Fees for services (non-employees)				
а	Management				
b	Legal	-11,083			
С	Accounting	154,200			
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	418,539			
2	Advertising and promotion	213,338			
3	Office expenses	1,432,779			
1	Information technology	1,171,566			
5	Royalties				
5	Occupancy	1,256,491			
7	Travel	84,444			
8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
•	Conferences, conventions, and meetings	55,945			
)	Interest	11,649,354			
L	Payments to affiliates				
2	Depreciation, depletion, and amortization	1,837,403			
3	Insurance				
4	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	UBI TAXES	37,601			
b	PROVISION FOR LOAN LOSS	6,692,447			
c	LOAN EXPENSE	2,247,101			
d	ATM & DEBIT CARD EXPENS	1,732,687			
е	NCUSIF PREMIUM	930,000			
f	All other expenses	2,304,983			
5	Total functional expenses. Add lines 1 through 24f	46,319,704			
6	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					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			5,587,330	1	6,472,468
	2	Savings and temporary cash investments	5,384,876	2	36,394,322		
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of					
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under s persons described in section 4958(c)(3)(B) Complete Part II of		n 4958(f)(1)) and			
		Schedule L				6	
ssets	7	Notes and loans receivable, net			404,733,571	7	353,502,967
8	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			1,726,345	9	2,552,474
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	25,271,11	8		
	b	Less accumulated depreciation	10b	10,097,26	15,784,085	10c	15,173,853
	11	Investments—publicly traded securities			143,786,936	11	155,890,972
	12	Investments—other securities See Part IV, line 11			34,325,592	12	55,101,876
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets			42,334,672	14	41,715,992
	15	Other assets See Part IV, line 11			11,533,742	15	15,172,732
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			665,197,149	16	681,977,656
	17	Accounts payable and accrued expenses .			9,764,780	17	5,146,054
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
Şəļ	21	Escrow or custodial account liability Complete Part IV of Schedul	le D		501,592	21	636,047
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ä		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			607,474,007	25	619,047,581
	26	Total liabilities. Add lines 17 through 25			617,740,379	26	624,829,682
Ş		Organizations that follow SFAS 117, check here ▶ ┌ and comp	olet e l	ines 27			
Fund Balance		through 29, and lines 33 and 34.					
ılar	27	Unrestricted net assets				27	
ă	28	Temporarily restricted net assets				28	
Ē	29	Permanently restricted net assets				29	
Fu		Organizations that do not follow SFAS 117, check here ▶	nd con	nplete			
ē	20	lines 30 through 34.			17,846,674	30	17,846,674
Assets	30 31	Capital stock or trust principal, or current funds			17,848,674		0
35	31	Retained earnings, endowment, accumulated income, or other fu			29,610,096		39,301,300
	33	Total net assets or fund balances	411US		47,456,770		57,147,974
Net		Total liabilities and net assets/fund balances				-	
l	34	i otal navinties and net assets/fund balances			665,197,149	34	681,977,656

Part XI Financial Statements and Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
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			
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		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)

efile GRAPHIC print - DO NOT PROCESS

Aggregate value at end of year

As Filed Data

DLN: 93493308001140

OMB No 1545-0047

Open to Public Inspection

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.

Name of the organization Employer identification number CREDIT UNIONS CHARTERED IN THE STATE OF 222 LAKE TRUST CREDIT UNION 38-1250516 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year)

funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be

used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised

Part		Conservation Easements.	Complete if the	organization	answered	"Yes"	to Form !	990, Part IV,	, line /
. F	urpo	se(s) of conservation easements h	neld by the organiz	atıon (check all	that apply)				

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

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

Total number of conservation easements

Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a)

Number of conservation easements included in (c) acquired after 8/17/06

Held at the End of the Year 2a 2b 2c

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

Number of states where property subject to conservation easement is located -__

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨

A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

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

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

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

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

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

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D Schedule D (Form 990) 2009

ar	Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tre</u>	<u>asures,</u>	or Oth	<u>ner Simila</u>	<u>r Asse</u>	ets (cc	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ie foll	owing the	at are a si	gnıfıcani	t use of its c	ollection	n	
а	Public exhibition		d	Г	Loan or	exchange	progran	ms			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
	Provide a description of the organization's content XIV	ollections and expla	aın hov	v the	y further	the organi	zatıon's	exempt purp	ose in		
i	During the year, did the organization solicit assets to be sold to raise funds rather than							ımılar	Г	Yes	┌ No
a	rt IV Escrow and Custodial Arrang						wered	"Yes" to Fo	rm 990	٥,	
	Part IV, line 9, or reported an ar		•		•						
3	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interm	ediary	for c	ontributio	ons or oth	erasset	s not	Г	Yes	√ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng ta	able						
									A mou	ınt	
с	Beginning balance						10				
d	Additions during the year						10				
e -	Distributions during the year						10	_			
F	Ending balance						11	f			
а	Did the organization include an amount on F	orm 990, Part X, lin	e 21?						<u> </u>	Yes	☐ No
	If "Yes," explain the arrangement in Part XI\										
a	rt V Endowment Funds. Complete	If the organizatio		were Prior \		to Form (c)Two Years		art IV, line d)Three Years		NEOUR V	ears Back
1	Beginning of year balance	(a)current rear	(6)	FIIOI	rear ((C) TWO TEATS	back (d)Tillee Teals	Dack (e	:)1 Out 10	cars back
•	Contributions								+		
-	Investment earnings or losses										
t	Grants or scholarships										
e	Other expenditures for facilities										
	and programs								-		
f	Administrative expenses								\rightarrow		
g	End of year balance										
	Provide the estimated percentage of the year	r end balance held	as								
а	Board designated or quasi-endowment 🕨	%									
b	Permanent endowment 🕨 %	•									
c	Term endowment ► %										
а	Are there endowment funds not in the posse organization by	ssion of the organiz	ation t	that a	are held a	and admini	stered f	or the		Yes	No
	(i) unrelated organizations			_	_				3a(i)	res	NO
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(II), are the related organizatio								3b	1	
	Describe in Part XIV the intended uses of th	e organızatıon's en	dowme	ent fu	nds						
a	rt VI Investments—Land, Building	s, and Equipme	nt. S	ee F	orm 990), Part X,	line 10	0			
	Description of investment				Cost or ot s (investm		st or othe s (other)	er (c) Accum deprecia		(d) Bo	ok value
a	Land			L			4,086,29	91			4,086,291
b	Buildings						9,782,14	1,6	524,095		8,158,047
c	Leasehold improvements						1,426,15	52	96,701		1,329,451
d	Equipment						8,072,20	03 6,6	544,042		1,428,161
e	Other						1,904,33	1,7	732,427		171,903

15,173,853

Part VII Investments—Other Securities. See (a) Description of security or category			d of valuation
(including name of security)	(b)Book value		f-year market value
Financial derivatives Closely-held equity interests			
Other			
MUTUAL FUNDS	247,634		<u>F</u>
FEDERAL HOME LOAN BANK STOCK	2,150,000		F
MORTGAGE BACKED SECURITIES	52,704,242		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	55,101,876		
Part VIII Investments—Program Related. See	, ,		
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
		Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin			
(a) Descrip	tion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	(B) Amount		
MEMBER CHARECAND CAVINGS			
MEMBER SHARES AND SAVINGS	619,047,581		
MEMBER SHARES AND SAVINGS			
MEMBER SHARES AND SAVINGS			
MEMBER SHARES AND SAVINGS			
MEMBER SHARES AND SAVINGS			
MEMBER SHARES AND SAVINGS			
MEMBER SHARES AND SAVINGS			
MEMBER SHARES AND SAVINGS			
MEMBER SHARES AND SAVINGS			
MEMBER SHARES AND SAVINGS			
MEMBER SHARES AND SAVINGS			
MEMBER SHARES AND SAVINGS Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶			

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	46,481,953
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	46,319,704
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	162,249
4	Net unrealized gains (losses) on investments	4	6,453,225
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	3,075,730
9	Total adjustments (net) Add lines 4 - 8	9	9,528,955
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	9,691,204
	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	
1	Total revenue, gains, and other support per audited financial statements	1	46,481,953
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	46,481,953
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 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	46,481,953
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial	1	46,319,704
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	46,319,704
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		, ,
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	46,319,704
Par	t 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, 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

Ident if ier	Ret urn Reference	Explanation
Part IV, Line 2b		ESCROWACCOUNTS ARE MAINTAINED FOR MORTGAGES, TAXES AND INSURANCE FOR MEMBERS MORTGAGES ARE ALSO INCLUDED CUSTODIAL ACCOUNTS ARE MAINTAINED FOR MORTGAGES PREVIOUSLY SOLD TO FREDDIE MAC THESE ACCOUNTS ALSO INCLUDE TAXES AND INSURANCE
Part XI, Line 8 - Other Adjustments		CHANGE IN MINIMUM PENSION AND POST RETIREMENT LIABILITY

DLN: 93493308001140

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

CREDIT UNIONS CHARTERED IN THE STATE OF

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

222	Z LAKE TRUST CREDIT UNION		38-1250516			
Pa	rt I Questions Regarding Compensation		•			
					Yes	Νo
1a	Check the appropriate box(es) if the organization provided a 990, Part VII, Section A, line 1a Complete Part III to pro					
	First-class or charter travel	lousing allowance or i	residence for personal use			
	Travel for companions	ayments for business	s use of personal residence			
	Tax idemnification and gross-up payments	lealth or social club d	ues or initiation fees			
	Discretionary spending account	'ersonal services (e g	, maıd, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organiza reimbursement orprovision of all the expenses described a			1b	Yes	
2	Did the organization require substantiation prior to reimbur officers, directors, trustees, and the CEO/Executive Direc		•	2	Yes	
3	Indicate which, if any, of the following the organization use organization's CEO/Executive Director Check all that app	establish the compe	nsation of the			
	▼ Compensation committee ▼	Vritten employment co	ontract			
	Independent compensation consultant	Compensation survey	orstudy			
	Form 990 of other organizations	approval by the board	or compensation committee			
4	During the year, did any person listed in Form 990, Part V or a related organization	Section A , line 1a with	h respect to the filing organization			
а	Receive a severance payment or change-of-control payme			4a		Νo
b	Participate in, or receive payment from, a supplemental no	ialified retirement pla	n?	4b	Yes	
c	Participate in, or receive payment from, an equity-based c	pensation arrangemer	nt?	4с		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide t	applicable amounts fo	or each item in Part III			
	Only $501(c)(3)$ and $501(c)(4)$ organizations only must con	ete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, line 1a compensation contingent on the revenues of	ıd the organızatıon pa	y 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 1a compensation contingent on the net earnings of	ıd the organızatıon pa	y or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1 payments not described in lines 5 and 6? If "Yes," described in lines 5 and 6.		rovide any non-fixed	7		
8	Were any amounts reported in Form 990, Part VII, paid or subject to the initial contract exception described in Regs	•				
	ın Part III			8		
9	If "Yes" to line 8, did the organization also follow the rebut	le presumption proce	dure described in Regulations	۵		

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

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

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

(A) Name	,	(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(i) Base (ii) Bonus &		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
WILLIAM J THIESS	(I) (II)	340,530 0	13,374 0	46,230 0	89,570 0	10,741 0	500,445 0	
CAROLA GALIZIA	(I) (II)	254,918 0	9,955 0	20,312 0	51,292 0	18,122 0	354,599 0	
DIANA L SCOTT	(I) (II)	167,913 0	4,400 0	29,122 0	35,489 0	4,494 0	241,418 0	
SHEILA COLLINS	(I) (II)	148,256 0	4,400 0	22,571 0	36,372 0	10,596 0	222,195 0	
MOHAMMED EL- BATHY	(ı) (ıı)	171,111		17,749 0	42,762 0	11,733 0	247,755 0	
DENISE GATELY	(ı) (ıı)	173,599 0	4,400	20,429	40,665 0	5,361 0	244,454	
BESSIE FLEMING	(ı) (ıı)	222,660	4,400 0	24,555 0	119,966 0	5,167 0	376,748 0	
SUSAN POSTEMSKI	(ı) (ıı)	115,439 0	4,400 0	16,331 0	21,476 0	15,129 0	172,775 0	
	'							
	'	!						
	'		1					

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 Reference	Explanation
	Part I, Line 1a	THE PRESIDENT AND CEO WAS PROVIDED SOCIAL CLUB DUES THE AMOUNTS WERE NOT INCLUDED IN HIS TAXABLE COMPENSATION
		WILLIAM J THIESS PARTICIPATES IN TWO SECTION 457(F) PLANS, AND CAROL A GALIZIA PARTICIPATES IN A SECTION 457(F) PLAN UPON RETIREMENT, THE PARTICIPANTS WILL RECEIVE CASH PAYMENTS THAT ARE FUNDED BY THE CREDIT UNION NO PAYMENTS WERE MADE TO PARTICIPANTS IN THE CURRENT YEAR

Schedule J (Form 990) 2009

As Filed Data -

DLN: 93493308001140

OMB No 1545-0047

2000

2009

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE 0

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

Attach to Form 990.

Open to Public Inspection

Name of the organization CREDIT UNIONS CHARTERED IN THE STATE OF 222 LAKE TRUST CREDIT UNION Employer identification number

38-1250516

ldentifier	Return Reference	Explanation
Form 990, Part I, Item C	Doing Business As	HURON RIVER FINANCIAL
Form 990, Part VI, Section A, line 4		NUUNION CREDIT UNION MERGED INTO DETROIT EDISON CREDIT UNION AND WE RENAMED THE CREDIT UNION LAKE TRUST CREDIT UNION, BOTH OCCURRING ON APRIL 1, 2010
Form 990, Part VI, Section A, line 6		THIS ORGANIZATION HAS CREDIT UNION MEMBERS
Form 990, Part VI, Section A, line 7a		THE MEMBERS OF THIS CREDIT UNION ELECT THE BOARD OF DIRECTORS
Form 990, Part VI, Section A, line 7b		ONLY DECISIONS SPECIFIED IN THE BY LAWS ARE REQUIRED TO BE APPROVED BY MEMBERS
Form 990, Part VI, Section B, line 11		THE FORM 990 IS REVIEWED BY THE VICE PRESIDENT OF FINANCE, PRESIDENT AND TREASURER OF THE BOARD
Form 990, Part VI, Section B, line 12c		OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES ARE REQUIRED ANNUALLY TO DISCLOSE INTERESTS THAT MAY RESULT IN A CONFLICT ON A DISCLOSURE FORM THESE FORMS ARE MAINTAINED BY THE COMPLIANCE OFFICER
Form 990, Part VI, Section B, line 15		PRESIDENT ANNUAL REVIEW IS COMPLETED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS TO DETERMINE COMPENSATION THE PROCESS FOR DETERMINING ANNUAL COMPENSATION INCREASES FOR OTHER KEY EMPLOYEES IS DEVELOPED BY THE VP OF HUMAN RESOURCES AND THE INCREASES FOR ALL KEY EMPLOYEES ARE APPROVED BY A SENIOR MANAGEMENT TEAM MEMBER

ldentifier	Return Reference	Explanation					
Form 990, Part VI, Section C, line 19		AN ANNUAL REPORT WITH CONDENSED FINANCIAL STATEMENTS IS AVAILABLE ON OUR WEBSITE THE OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST					

FORM 990, PART XI, LINE 2C THE PROCESS FOR THE AUDIT SUPERVISORY COMMITTEE DID NOT CHANGE SINCE LAST YEAR FORM 990, PART VI, SECTION B, LINE 13 ALTHOUGH THERE IS NOT A STAND ALONE FORMAL WHISTLEBLOWER POLICY, THE REQUIRED FEDERAL WHISTLEBOWER PROTECTION NOTICE IS POSTED IN EACH WORK LOCATION THERE IS ALSO A HARASSMENT POLICY THAT COVERS WHAT TO DO IF AN EMPLOYEE FEELS HARASSED AND AN EMPLOYEE HANDBOOK THAT COVERS MOST EMPLOYEE CONCERNS AND ISSUES

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

Cat No 51056K

Schedule O (Form 990) 2009

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493308001140

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I

Name of the organization CREDIT UNIONS CHARTERED IN THE STATE OF 222 LAKE TRUST CREDIT UNION Employer identification number

38-1250516

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a)
Name, address, and EIN of disregarded entity

(b) Primary activity (c)
Legal domicile (state or foreign country)

(d) Total income (e) End-of-year assets

Direct controlling entity

MEMBERS FINANCIAL SERVICES LLC 15800 NORTH HAGGERTY PLYMOUTH, MI 48170 38-1250516

INSURANCE AND FINANCIAL SERVICES

ΜI

11,366

1,248 LAKE TRUST CREDIT UNION

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity

Legal domicile (state or foreign country)

(d) Exempt Code section (e)
Public charity status
(if section 501(c)(3))

(f) Direct controlling entity

(j)

General or

managing

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990,	Part IV, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

al (d)
cile Direct controlling
or entity
gn

(e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income (g) Share of end-of-year assets (h)
Disproprtionate
allocations? ai

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

hedule K-1 partner? form 1065)

Yes No

Yes

No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

(f) Share of total income

(g) Share of end-of-year assets **(h)** Percentage ownership

(6)

Pa	Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36	5.)						
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No				
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?								
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity							
b	b Gift, grant, or capital contribution to other organization(s)	1b						
c	Gift, grant, or capital contribution from other organization(s)							
d	d Loans or loan guarantees to or for other organization(s)	1d						
e	e Loans or loan guarantees by other organization(s)	1 e						
f	f Sale of assets to other organization(s)	1 f						
g	g Purchase of assets from other organization(s)	1 g						
h	h Exchange of assets	1h						
i	i Lease of facilities, equipment, or other assets to other organization(s)	1 i						
j	j Lease of facilities, equipment, or other assets from other organization(s)	1 j						
k	k Performance of services or membership or fundraising solicitations for other organization(s)	1k						
ı	l Performance of services or membership or fundraising solicitations by other organization(s)	11						
m	m Sharing of facilities, equipment, mailing lists, or other assets	1m	ì					
n	n Sharing of paid employees	1n						
0	• Reimbursement paid to other organization for expenses	10						
р	p Reimbursement paid by other organization for expenses	1р						
q	q Other transfer of cash or property to other organization(s)	1 q						
r	r Other transfer of cash or property from other organization(s)	1r						
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction t	thresholds						
	(b) Transaction		(c)					
	Transaction Name of other organization type(a-r)	Amou	nt involv	ed				
1)								
2)								
- \								
3)								
4.								
-)								
5)								
-,								

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

Software ID: Software Version:

EIN: 38-1250516

Name: CREDIT UNIONS CHARTERED IN THE STATE OF

222 LAKE TRUST CREDIT UNION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours		(C) Position (check all that apply)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other			
	per week	Individual trustee or director	Institutional Trustee	Office	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
DENNIS TO CHMAN DIRECTOR	5 00	Χ						615	0	0
PHILIP CZECH VICE-CHAIRMAN	5 00	Х		Х				0	0	0
MICHELE CHAKMAKIAN SECRETARY	5 00	Х		Х				0	0	0
RAY SEIDL TREASURER	10 00	Х		Х				14,010	0	0
VICKI CAMPBELL DIRECTOR	5 00	Х						0	0	0
DARRELL FERRELL DIRECTOR	5 00	Х						651	0	0
LA WRENCE LEHMAN CHAIRMAN	10 00	Х		х				0	0	0
ROBERT PEPLOWSKI DIRECTOR	5 00	Х						0	0	0
JEROME SOBCZAK DIRECTOR	5 00	Х						0	0	0
WILLIAM J THIESS PRESIDENT/CEO	70 00			Х				400,134	0	100,311
CAROLA GALIZIA SENIOR VICE PRESIDENT	60 00			Х				285,185	0	69,414
DIANA L SCOTT VICE PRESIDENT FINANCE	60 00				X			201,435	0	39,983
SHEILA COLLINS VICE PRESIDENT RETAIL DE	60 00				X			175,227	0	46,968
MOHAMMED EL-BATHY VICE PRESIDENT INFO SYST	60 00				X			193,260	0	54,495
DENISE GATELY VICE PRESIDENT CORP SERV	60 00				X			198,428	0	46,026
BESSIE FLEMING VICE PRESIDENT LENDING	60 00				X			251,615	0	125,133
SUSAN POSTEMSKI VICE PRESIDENT ENTERPRIS	60 00					Х		136,170	0	36,605
GLORIA LAWSON AVP SERVICE DELIVERY	60 00					Х		114,229	0	6,727

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
UBI TAXES	37,601			
PROVISION FOR LOAN LOSS	6,692,447			
LOAN EXPENSE	2,247,101			
ATM & DEBIT CARD EXPENS	1,732,687			
NCUSIFPREMIUM	930,000			