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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

2009

Open to Public

Charle of -			C Name of organization	01-2009 and ending 12-31-200		D Employer id	entification number	
3 Check if applicable Please Address change use IRS SUMMIT Credit Union						39-023058	3.5	
Name cha	la	bel or rint or	Doing Business As		E Telephone n			
	ty	ype. See				(608) 243-	5000	
Initial retui Terminate	Ir	pecific nstruc- ons.	Number and street (or P O bo PO Box 8046	x if mail is not delivered to street addr	ess) Room/suite	G Gross receipts	\$ 91,748,467	
Amended	return n pending		City or town, state or country, Madison, WI 537088046	and ZIP + 4				
чррисаціон	1 pending			•	1			
		F Nam DAVID	ne and address of principal : HALL	officer		ıs a group retur ites?	n for	
		РО Вох) 165 p 160	
		Madiso	n,WI 537088046		1 ' '	II affiliates includ	·	
Tax-exem	npt status	√ 501(c)	(14) ◀ (insert no)	(a)(1) or 527		o," attach a list ip exemption ni	: (see instructions) umber ►	
Website	e: ► www.s	ummitcr	editunion com					
		Corporat	ion Trust Association Ot	her ►	L Year of fo	rmation 1935	M State of legal domicile	
art I								
1	,		e organization's mission or R MEMBERS' FINANCIAL F	-				
	TO IMPRO	J V E O O I	R MEMBERS FINANCIAL P	OSITION				
2	Check this	s box ►	ıf the organızatıon dıscont	inued its operations or dispose	d of more than	25% of its net	assets	
3				ody (Part VI, line 1a)			3	
		_		governing body (Part VI, line 1				
			nployees (Part V, line 2a)				} ;	
			lunteers (estimate if neces				3 255	
	_			Part VIII, column (C), line 12			a 2,255,3	
Ь	Net unrela	ated busi	ness taxable income from F	orm 990-T, line 34			b 1,672,	
					Pric	or Year	Current Year	
8	Contribut	tions and	l grants (Part VIII, line 1h)					
9	Program	servicei	revenue (Part VIII, line 2g)			73,800,480	69,399,99	
10	Investme	ent incon	ne (Part VIII, column (A), l	nes 3, 4, and 7d)		11,578,263	22,348,47	
11	Otherre	venue (P	art VIII, column (A), lines !	5, 6d, 8c, 9c, 10c, and 11e)				
12	Total rev	enue—ad	dd lines 8 through 11 (must	equal Part VIII, column (A), lu	ne			
				 		85,378,743	91,748,46	
13	Grants a	nd sımıla	r amounts paid (Part IX, co	lumn (A), lines 1-3)				
14	Benefits	paid to o	r for members (Part IX, col	ımn (A), line 4)		27,748,419	20,261,29	
15	•	otherco	mpensation, employee ben	efits (Part IX, column (A), lines	5-	22 262 555	25.204.04	
16a b	10)		6 (D LTV L	/A \		23,363,555	25,284,86	
16a				n (A), line 11e)				
b			enses (Part IX, column (D), line 2	,		20.046.111	20.442.24	
17				1a-11d, 11f-24f)		29,946,111	39,442,30	
18				al Part IX, column (A), line 25)		81,058,085	84,988,45	
19	Revenue	less exp	enses Subtract line 18 fro	m line 12		4,320,658	6,760,01	
20 21 22 22					_	g of Current 'ear	End of Year	
20	Total aco	eate (Dar	t X, line 16)			287,769,114	1,418,499,20	
20 2 21						175,109,163	1,418,499,20	
21				I from line 20		· · ·		
art II	_	ure Blo		I nom me 20		112,659,951	114,924,59	
31 (11				ned this return, including accompanyin	a schodulos and s	tataments and to	the hest of my knowledge	
				of preparer (other than officer) is bas				
	l 							
ın 	*****					11-09		
re	Signatui	re of office	:F	Date				
		HALL CFO	1					
	Type or	print nam	e and title					
	Preparer's			Date	Check If	Preparer's ident		
d	signature	Collin F	⁼ Buzzell		self- empolyed •	(see instructions	s)	
parer's	Firm's name	e (or vour	RSM McGladrey Inc		poi, ou r	1		
e Only	ıf self-emple	oyed),				EIN ▶		
. Ciliy	address, an	d ZIP + 4	801 Nicollet Mall Suite 1100					
			Munneapolis MN FF403			Phone no 🕨 (612) 5/3-8/50	
			Minneapolis, MN 55402					

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

A cooperative, nonprofit corporation, incorporated under Wisconsin state law to encourage thrift among its members, create a source of credit at a fair and reasonable cost, and provide an opportunity for its members to improve their economic and social conditions

					Form 990 (2009)
1e	Total program service ex	penses > \$			
	(Expenses \$	ıncludıng g	rants of \$) (Revenue \$)
1d	Other program services	(Describe in Schedule ())		
	citizenship is not our choice but through volunteer efforts and t	t our responsibility which we financial support. Those organ	embrace enthusiastically and witho	make up the places in which we do out reservation In 2009, Summit su nmunity Shares, Second Harvest Fo	pported several organizations
1c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
		East Madison Community Ce		apported community groups such as Access to Independence, Wisconsin	
1b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	credit union continued to offer 12% and members received naccount - 1,273 accounts with	attractive rates on various sa early 30,000 loans. The follow \$3 4M in balances-Stimulus N	ving and lending products to help i ving products and services were in	members improve their financial po troduced in 2009 to help promote t ire Secured loans - 34 loans for \$73	hrıft among our members -Go Save
1a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
ŀ	Section 501(c)(3) and 50	1(c)(4) organızatıons ar	_	e largest program services b are required to report the ar n service reported	•
	If "Yes," describe these ch	nanges on Schedule O			
3	Did the organization cease services?	e conducting, or make si	gnificant changes in how it c	conducts, any program	┌ Yes ┌ No
	If "Yes," describe these ne	ew services on Schedule	0		
2	Did the organization under the prior Form 990 or 990		gram services during the yea	ar which were not listed on	┌ 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 quasiendowments? 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	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 12A No	Į		
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? <i>If</i> "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? <i>If</i> "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

	330 (2003)			Page -
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	

rt V	Statements	Regarding	Other	TRS F	ilinas	and '	Tax	Comi	oliance
	ota to illoiles	itegai aiiig	•					~~	J.:

	consolitoristics in grant and confined		Yes	No
la	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 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
!a	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	
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	
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		No
b	If "Yes," enter the name of the foreign country ►			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
ь	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		
a	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		
)	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			

The Organization PO Box 8046

(608) 243-5000

Madison, WI 537088046

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	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent 1b 15	1		
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	4		No
5	filed? Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	140
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the		103	
, u	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
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
NC	venue code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	- 110
	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	Yes	
11			165	
	Describe on Cabadala O the naverage of any weed by the consequents to account the Fermi 200	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	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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	ection C. Disclosure			I
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.			
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 th	ie orga	nızatıor	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	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

1b Total	1,946,350	0 873,223

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization -25

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
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

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
1775 Duke Street	NCUSIF/TCCUSF Premium and total NCUSIF c	3,217,299
Krupp General Contractors 2020 Eastwood Drive MADISON, WI 53704	Remodel Projects	2,159,338
FISERV (formerly known as USERS Inc) 75 Remittance Dr Ste 6962 CHICAGO, IL 60675	Core processing systems and consulting s	1,084,163
Paragon Development Systems PO BOX 88079 MILWAUKEE, WI 53288	Data Processing Equipment	442,877
NOLL MARKETING & MEDIA LLC 2514 LEOPOLD WAY SUN PRAIRIE, WI 53590	marketing services	380,245
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►27) who received more than	

Page 8

Form 99			f Davis and					Page 9
		Statement o	or Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated cam	paigns 1a					
ᇎᇙ	ь	Membership du	es 1b					
S, €	с	Fundraising eve	ents 1c					
# <u>#</u> #	d	Related organiz	zations 1d					
ું.≣	e	Government grants	s (contributions) 1e					
돌	f	All other contribution	ons, gifts, grants, and 1f					i
₽ E	_	similar amounts no	ot included above ibutions included in					
Ţ Ţ	g							
9 0 1	h		s 1a-1f	▶				
				Business Code				
E	2a	LOANS TO MEMBER	RS	522,100	56,169,080	56,169,080		
9.Ae	ь	SERVICE CHARGES		522,100	9,772,867	9,772,867		
or GE		OTHER NON-INTER		522,100	3,458,046	1,202,274	2,255,772	
Š	d	OTTER NON-INTER	CEST INC	522,100	3,438,046	1,202,274	2,233,772	
33								
E	e							
Program Service Revenue	f	All other progra	am service revenue					
<u>~</u>	g	Total. Add lines	s 2a-2f		69,399,993			
	3	Investment inc	ome (including dividen	ds, interest				
			aramounts)	-	10,918,224			10,918,224
	4	Income from inves	stment of tax-exempt bond	proceeds				
	5	Royalties						
	_		(ı) Real	(II) Personal				
	6а b	Gross Rents Less rental						
	"	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)	•				
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of		11,430,250				
		assets other than inventory						
	ь	Less cost or other basis and						
		sales expenses						
	C	Gain or (loss)		11,430,250				
	d		ss)		11,430,250	11,430,250		
Other Revenue	8a	Gross income f events (not inc \$ of contributions						
r Re		See Part IV, lin	ne 18 a					
the	ь		penses b					
0	С	Net income or ((loss) from fundraising	events 🛌				
	9a	Gross income f See Part IV, lin	rom gaming activities ne 19 a					
	ь	Less direct ex	penses b					
	c	Net income or ((loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo						
	b c		oods sold b (loss) from sales of inve	antory -				
	<u> </u>	Miscellaneous		Business Code				
	11a							
	ь							
	c							
	d	All other revenue	ue					
	e		s 11a-11d					
			• •	· · · · • [
	12	Total revenue.	See Instructions .	▶	91,748,467	78,574,471	2,255,772	10,918,224
								Form 990 (2009)

Part	Part IX Statement of Functional Expenses								
_	Section 501(c)(3) and 501(c)(4) organizations must			(D)					
	l other organizations must complete column (A) but are not required to o		(B), (C), and	(D).	(D)				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$								
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22								
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16								
4	Benefits paid to or for members	20,261,292							
5	Compensation of current officers, directors, trustees, and key employees	1,939,729							
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	17,748,509							
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,195,102							
9	Other employee benefits	1,969,875							
10	Payroll taxes	1,431,648							
11	Fees for services (non-employees)								
а	Management								
b	Legal	832,754							
c	Accounting								
d	Lobbying								
e	Professional fundraising See Part IV, line 17								
f	Investment management fees								
g	Other	266,640							
12	Advertising and promotion	1,050,685							
13	Office expenses	2,513,403							
14	Information technology	1,709,448							
15	Royalties								
16	Occupancy	1,902,644							
17	Travel								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	245,928							
20	Interest	3,728,256							
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	3,041,227							
23	Insurance	227,019							
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	15,500,000							
b	Loan Servicing Expense	3,037,289							
c	Processing	2,273,803							
d	Share Insurance Expense	1,646,438							
е	Other	1,360,200							
f	All other expenses	106,567							
25	Total functional expenses. Add lines 1 through 24f	84,988,456							
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation								

Pa	rt X	Balance Sheet								
				(A) Beginning of year		(B) End of year				
	1	Cash—non-interest-bearing		26,246,833	1	41,246,197				
	2	Savings and temporary cash investments	•		2					
	3	Pledges and grants receivable, net			3					
	4	Accounts receivable, net		4,553,971	4	4,797,385				
	5	Receivables from current and former officers, directors, trustees, highest compensated employees Complete Part II of	key employees, and							
		Schedule L			5					
	6	Receivables from other disqualified persons (as defined under sec persons described in section $4958(c)(3)(B)$ Complete Part II of	tion 4958(f)(1)) and							
		Schedule L								
stess	7	Notes and loans receivable, net		1,014,029,470	7	1,003,589,815				
SS	8	Inventories for sale or use			8					
⋖	9	Prepaid expenses and deferred charges			9	_				
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	63,568,833							
	ь	Less accumulated depreciation	20 ,707,598	42,478,254	10c	42,861,235				
	11	Investments—publicly traded securities			11					
	12	Investments—other securities See Part IV, line 11	195,717,781	12	311,065,405					
	13	Investments—program-related See Part IV, line 11		13	_					
	14	Intangible assets		14						
	15	Other assets See Part IV, line 11		4,742,805	15	14,939,171				
	16	Total assets. Add lines 1 through 15 (must equal line 34)		1,287,769,114	16	1,418,499,208				
	17	Accounts payable and accrued expenses .		17,408,889	17	17,636,788				
	18	Grants payable			18					
	19	Deferred revenue			19					
	20	Tax-exempt bond liabilities			20					
<u>ie</u> s	21	Escrow or custodial account liability Complete Part IV of Schedule I	o	851,103	21	1,319,993				
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 $oldsymbol{\cdot}$			24					
	25	Other liabilities Complete Part X of Schedule D $$. $$. $$. $$.		1,156,849,171	25	1,284,617,830				
	26	Total liabilities. Add lines 17 through 25		1,175,109,163	26	1,303,574,611				
ņ		Organizations that follow SFAS 117, check here ▶ ┌ and comple	te lines 27							
Fund Balance		through 29, and lines 33 and 34.								
la.	27	Unrestricted net assets			27					
8	28	Temporarily restricted net assets			28					
pui	29	Permanently restricted net assets			29					
교		Organizations that do not follow SFAS 117, check here ▶	complet e							
٥	20	lines 30 through 34.		0	20	0				
Assets	30	Capital stock or trust principal, or current funds		0	30	0				
Š	31	Paid-in or capital surplus, or land, building or equipment fund		112,659,951	31					
	32	Retained earnings, endowment, accumulated income, or other fund	15		32	114,924,597				
Net	33	Total net assets or fund balances		112,659,951	33	114,924,597				
l	34	Total liabilities and net assets/fund balances		1,287,769,114	34	1,418,499,208				

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			
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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As Filed Data

DLN: 93493313020090

OMB No 1545-0047

Supplemental Financial Statements

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE D (Form 990)

> ► 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** SUMMIT Credit Union 39-0230585 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) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No 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 Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat 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 Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 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 🕨

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.

A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 🕨 🛊 🔛

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and

Does each conservation easement reported on line 2(d) above satisfy the requirements of section

- 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

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

(ii) Assets included in Form 990, Part X

170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

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

Cat No 52283D

Schedule D (Form 990) 2009

Part	•••• Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tı</u>	reası	ures, or O	the	r Similar	Ass	ets (c	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne fol	lowing	that a	re a significa	ant u	ise of its col	lectio	n	
а	Public exhibition		d	Γ	Loan	orexo	:hange progr	ams				
b	Scholarly research		e	Γ	Other	r						
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ıın hov	w the	y furthe	er the	organızatıor	ı's ex	kempt purpo	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								nılar	Г	Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answere	d "Y	es" to For	m 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	for c	ontribu	itions	or other ass	ets	not	Г	Yes	▽ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ing t	able		Г			A mo	unt	
с	Beginning balance						-	1c				
d	Additions during the year						-	1d				
e	Distributions during the year							1e				
f	Ending balance						-	1f				
2a	Did the organization include an amount on Fo	orm 000 Part V lin	a 212				L	<u></u>			Yes	□ No
			e 21,							ļ	165	, 140
	rt V Endowment Funds. Complete		n and	wor	ad "Vo	c" to	Form 990	Dar	t IV line	10		
ΡŒ	Endowment Funds. Complete	(a)Current Year		Prior			vo Years Back		Three Years B		≘) Four Y	ears Back
1a	Beginning of year balance							 		1		
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held a	as									
а	Board designated or quasi-endowment 🕨	%										
ь	Permanent endowment - %											
с	Term endowment ► %											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are held	dand	admınıstere	d for	the			
	organization by								г		Yes	No
	(i) unrelated organizations			•		•		•	-	3a(i)		
	(ii) related organizations							•		3a(ii)	+	<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the second secon	•				•		•	[3b		
	t VI Investments—Land, Buildings					an n	art V line	10				
ГСП	t vi investments—Land, buildings	s, and Equipme	iit. 5		Cost or		(b)Cost or of		(c) Accumul	atad		
	Description of investment				s (invest		basis (othe		depreciati		(d) Bo	ok value
1a	Land		•				7,837	,719				7,837,719
b	Buildings		•				37,603	-	-	7,828	2	8,845,794
c	Leasehold improvements		•				1,333	,925	68	1,362		652,563
d l	Equipment						16,565	,095	11,26	8,408		5,296,687
	Other						228	,472				228,472
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colui	mn (B)), line	10(c).)				▶		4	2,861,235
									Schedu	ıle D (Form 9	90) 2009

Part VII Investments—Other Securities. See (a) Description of security or category		(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests Other		
ncusif capitalization deposit	10,860,420	F
AVAILABLE-FOR-SALE INVESTMENTS	234,563,674	F
OTHER INVESTMENTS	56,784,354	
LOANS HELD FOR SALE	8,856,957	F_
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	311,065,405	
Part VIII Investments—Program Related. See		
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
		_
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Iir	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	ne 15.	
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	5.)	(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	5.)	
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	5.)	
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 Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes members' share and savings accounts	5.) , line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes members' share and savings accounts	5.) , line 25. (b) A mount	
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 Federal Income Taxes members' share and savings accounts	5.) , line 25. (b) A mount	
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 Federal Income Taxes members' share and savings accounts	5.) , line 25. (b) A mount	
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 Federal Income Taxes members' share and savings accounts	5.) , line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes members' share and savings accounts	5.) , line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes members' share and savings accounts	5.) , line 25. (b) A mount	
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 Federal Income Taxes members' share and savings accounts	5.) , line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes members' share and savings accounts	5.) , line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes members' share and savings accounts	5.) , line 25. (b) A mount	

Par	Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	91,748,467
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	84,988,456
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	6,760,011
4	Net unrealized gains (losses) on investments	4	-4,983,003
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	487,638
9	Total adjustments (net) Add lines 4 - 8	9	-4,495,365
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	2,264,646
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	90,992,725
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 -755,742		
e	Add lines 2a through 2d	2e	-755,742
3	Subtract line 2e from line 1	3	91,748,467
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)		
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	91,748,467
	Reconciliation of Expenses per Audited Financial Statements With Expense	s per	
1	Total expenses and losses per audited financial statements	1	84,988,456
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	84,988,456
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	84,988,456
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	Return Reference	Explanation
Part IV, Line 2b		THE CREDIT UNION ACTS AS A CUSTODIAN FOR AMOUNTS IN ESCROW FOR LOANS TO MEMBERS
Part X	Positions Under FIN 48	MANAGEMENT EVALUATED THE CREDIT UNION'S TAX POSITIONS AND CONCLUDED THAT THE CREDIT UNION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE
Part XI, Line 8 - Other Adjustments		NET CHANGE IN DEFINED BENEFIT OBLIGATIONS 487638
Part XII, Line 2d - Other Adjustments		AMOUNTS BACKED OUT DUE TO INCLUSION IN AUDIT NET ASSET RECONCILIATION -755742

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DLN: 93493313020090

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

SUN	MMIT Cleak Union		39-0230585			
Pa	rt I Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	ᅜ	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc	-		1b	Yes	
2	Did the organization require substantiation prior to r officers, directors, trustees, and the CEO/Executive			2		Νo
3	Indicate which, if any, of the following the organization organization organization.					
	✓ Compensation committee		Written employment contract			
	Independent compensation consultant	<u> </u>	·			
	Form 990 of other organizations	✓	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, for a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymer	nt?	4a		Νo
b	Participate in, or receive payment from, a supplemen	ntal non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	ıst comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		
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, payments not described in lines 5 and 6? If "Yes," d			7		
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III			8		
9	If "Yes" to line 8, did the organization also follow the	rebutt	able presumption procedure described in Regulations			

section 53 4958-6(c)?

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-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Andrew Faust	(I) (II)	317,521 0	35,000 0	254 0	219,672 0	16,860 0	589,307 0	100,000
David Hall	(I) (II)	169,795 0	0	25 0	110,075 0	13,428 0	293,323 0	47,959 (
Kım Sponem	(I) (II)	271,932 0	0 0	7,71 4 0	212,250 0	3,077 0	494,973 0	100,000
Diane Halvorson	(I) (II)	201,285 0	0 0	254 0	164,025 0	14,536 0	380,100 0	69,593
Nancy Kalsow	(I) (II)	157,770 0	0 0	254 0	7,802 0	16,195 0	182,021 0	(
Brian O'Handley	(I) (II)	29,814 0	0 0	168,854 0	9,999	13,509 0	222,176 0	(
Michael Bunge	(I) (II)	149,265 0	0 0	429 0	7,611 0	14,263 0	171,568 0	(
Rhonda Clayton	(I) (II)	31,201 0	0 0	117,134 0	4,066 0	767 0	153,168 0	(
Debra Olson	(I) (II)	41,557 0	0 0	103,054 0	7,077 0	16,469 0	168,157 0	(
Keith Peterson	(1)	142,774 0	0	464 0	7,287 0	14,255 0	164,780 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
	· ·	KIM SPONEM - \$100,000 CONTRIBUTIONS ANDY FAUST - \$100,000 CONTRIBUTIONS, \$7,422 DIVIDENDS DIANE HALVORSON - \$78,760 CONTRIBUTIONS, \$5,506 DIVIDENDS DAVID HALL - \$49,877 CONTRIBUTIONS, \$3,631 DIVIDENDS

Schedule J (Form 990) 2009

Employer identification number

39-0230585

SCHEDULE 0

Name of the organization SUMMIT Credit Union

Department of the Treasury Internal Revenue Service

Section B. line 15

Form 990, Part VI,

Section C, line 19

(Form 990)

Supplemental Information to Form 990

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

Attach to Form 990.

2009

Open to Public Inspection

Identifier **Explanation** Return Reference Form 990, Part VI, The credit union's members have rights to elect the members of the governing body. The credit union's Section A, line 6 members also receive a share of the organization's profits in the form of cash dividends Form 990, Part VI, Members of the credit union have the right to elect one or more members of the organization's governing Section A, line 7a body, whether periodically, or as vacancies arise, or otherwise Form 990. Part VI. Members of the credit union have the right to approve the governing body's election and removal of Section A, line 7b members of the governing body, as well as other matters that are subject to the approval of members of the credit union as they occur Form 990, Part VI, Form 990 is reviewed by the VP-Risk Management and CFO prior to filing. If there is uncertainty about a Section B. line 11 response, they will consult with the appropriate subject matter expert Form 990, Part VI, All staff receive annual training on conflict of interest and are required to re-read the document annually Section B, line The core system also prohibits employees from completing transactions on accounts that contain their social security number or address. Various monthly fraud monitoring reports are reviewed by Risk 12c Management Form 990. Part VI. All positions are classified within salary bands. Each year, all salary bands are reviewed and may be

outside compensation analyst

NCUA

adjusted to reflect job market changes to ensure that positions are classified appropriately. Multiple,

external resources are used in this process. The CEO's compensation is reviewed by the Board and an

Governing documents are provided to members upon request. Conflict of interest policies are not provided to the public. Financial statements are presented in the annual report and available for download from

Software ID: Software Version:

EIN: 39-0230585

Name: SUMMIT Credit Union

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

compensated Employees, and	T							(5)	<i>(</i> -)	<i>(</i> -)
(A) Name and Title	(B) A verage hours		tion (hat a	che		II		(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
Jım Hoelzel chaır	4 00	Х		Х		·		0	0	0
Dennis Sauey VICE CHAIR	4 00	X		X				0	0	0
Fritz Schunke TREA SURER	4 00	X		X				0	0	0
Mark Meyer SECRETARY	4 00	X		X				0	0	0
Dave Reszel DIRECTOR	2 00	X						0	0	0
Doug Benzine DIRECTOR	2 00	X						0	0	0
Jennifer Taylor DIRECTOR	2 00	X						0	0	0
John Litscher DIRECTOR	2 00	X						0	0	0
Judith Page DIRECTOR	2 00	Χ						0	0	0
Mike O'Brien DIRECTOR	2 00	X						0	0	0
Mike Schenk DIRECTOR	2 00	X						0	0	0
SUE RACINE DIRECTOR	2 00	X						0	0	0
Susan Sweitzer DIRECTOR	2 00	X						0	0	0
Theran Colwell DIRECTOR	2 00	X						0	0	0
Peter Crear DIRECTOR	2 00	X						0	0	0
Andrew Faust CEO	40 00			X				352,775	0	236,532
David Hall CFO	40 00			X				169,820	0	123,503
Kım Sponem President	40 00				Х			279,646	0	215,327
Diane Halvorson Executive Vice President	40 00				Χ			201,539	0	178,561
Nancy Kalsow Chief Operations Officer	40 00				Х			158,024	0	23,997
Brian O'Handley Real Estate Loan Officer	40 00					X		198,668	0	23,508
Michael Bunge CHIEF RETAIL OFFICER	40 00					X		149,694	0	21,874
Rhonda Clayton Mortgage Loan Officer	40 00					X		148,335	0	4,833
Debra Olson mortgage Loan Officer	40 00					X		144,611	0	23,546
Keith Peterson SVP - FINANCE	40 00					Х		143,238	0	21,542

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	15,500,000			
Loan Servicing Expense	3,037,289			
Processing	2,273,803			
Share Insurance Expense	1,646,438			
Other	1,360,200			