

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2009

OMB No 1545-0047

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

Open to Public Inspection

B Charle if	E 2009 Ca	ilendar yea	r, or tax year beginning 01-01-2009		9			
b Check ii	applicable	Please	C Name of organization WORLD COUNCIL OF CREDIT UNIONS inc				D Employer id	entification number
Address	change	use IRS label or	Doing Business As				39-114333 E Telephone n	
Name ch	hange	print or type. See	Doing Business As				•	
Initial re	turn	Specific Instruc-	Number and street (or P O box if mail is no	ot delivered to street addre	ss) Room	/suite	(608) 395-	
Termina	ited	tions.	PO BOX 2982			L	G Gross receipts	\$ 29,223,802
- Amende	d return		City or town, state or country, and ZIP + 4					
— Applicati	on pending		MADISON, WI 537012982					
		F Nan	ne and address of principal officer		H(a)	Is this	a group retur	n for
		Pete C	ear		''(")	affiliat		⊤Yes ▽ No
			IINERAL POINT RD n, WI 53705					
		11144155	,		1 '		affiliates includ	·
Tax-ex€	empt status	▼ 501(c)	(6) ◀ (insert no)	527			, attach a list exemption nu	(see instructions) umber ►
l Websi	ite: 🕨 www	w woccu ord			(0)		, , , , , , , , , , , , , , , , , , ,	
			<u></u>		<u> </u>		T.	
K Form of a	_		ion Trust Association Other		L Yea	r of forr	nation 1970	Y State of legal domicile W
1			e organization's mission or most signi	ficant activities				
-			ERS AND POTENTIAL MEMBERS TO		D, IMPR	OVEA	AND INTEGRA	TE CREDIT UNIONS
ب ا	<u>AS EFF</u>	ECTIVEIN	STRUMENTS FOR ECONOMIC DEV	ELOPMENT				
eovemance 20vemance								
∄ │								
2	Check t	this box 🛏	if the organization discontinued its o	perations or disposed	of more	than 2	5% of its net	assets
.5 6 3		,	nembers of the governing body (Part \					
		_	dent voting members of the governing					1
Sellimes 5 6			nployees (Part V, line 2a)		,,	•		-
			lunteers (estimate if necessary)				6	
							_	
	_		ed business revenue from Part VIII, ness taxable income from Form 990-		•		7	a
	net um	erated busi	mess taxable income from Form 990-	1, IIIIe 34		Drior	Year	Current Year
	Contri	hutians and	Laranta (Part VIII line 1h)					
9 8			I grants (Part VIII, line 1h)			24,637,815	25,570,090	
e e e e e e e e e e e e e e e e e e e			revenue (Part VIII, line 2g)				1,879,862	3,502,650
Haveni			ne (Part VIII, column (A), lines 3, 4, a			230,264	151,062	
			art VIII, column (A), lines 5, 6d, 8c, 9		_			(
12			dd lines 8 through 11 (must equal Par		e		26,747,941	29,223,802
13			r amounts paid (Part IX, column (A),					4,412,639
14	Benefi	ts paid to o	r for members (Part IX, column (A), lı				(
. 15	Saları	es, other co	mpensation, employee benefits (Part	IX, column (A), lines 5	5 -			
8	10)						6,259,919	7,067,50
EXP = 168	a Profes	sional fund	raising fees (Part IX, column (A), line	11e)	20,000 20,			
五 4			enses (Part IX, column (D), line 25) 🗠					
17	Other	expenses (Part IX, column (A), lines 11a-11d, 1	1f-24f)			20,014,034	17,253,49
18			add lines 13–17 (must equal Part IX,				26,293,953	28,753,63!
19	Reven	ue less exp	enses Subtract line 18 from line 12				453,988	470,167
දි දිරිලි විසින්					Beg	_	of Current	End of Year
20 gg 20	T-4-1-	accata (De-	t V line 16)				ear	10.705.001
g ii 20			t X, line 16)				19,091,263	10,785,82
_ mai 3-4	TOTALL	•	art X, line 26)				16,642,757	7,932,724
	N a+ = =	sets of tun	d balances Subtract line 21 from line	۷			2,448,506	2,853,10
		atura Bla	nck					
Part II	I Sign	ature Blo		rn including accompanying	schedules	and sta	tements and to	the hest of my knowledge
	Sign Under p	enalties of pe	OCK rjury, I declare that I have examined this retu porrect, and complete Declaration of preparer					
Part II	Under p and beli	enalties of pe ef, it is true, o	rjury, I declare that I have examined this retu					
Part II	Under p and beli	enalties of peef, it is true, o	rjury, I declare that I have examined this retur correct, and complete Declaration of preparer			formatio 2010-0	n of which prepa	
Part II	Under p and beli	enalties of pe ef, it is true, o	rjury, I declare that I have examined this retur correct, and complete Declaration of preparer			formatio	n of which prepa	
Part II	Under pand belief Signal pete	enalties of pe ef, it is true, o *** ature of office crear CEO	rjury, I declare that I have examined this retu correct, and complete Declaration of preparer			formatio 2010-0	n of which prepa	
Part II	Under pand belief Signal pete	enalties of pe ief, it is true, o *** ature of office	rjury, I declare that I have examined this return to rect. And complete Declaration of preparer	(other than officer) is based	d on all in	formatio 2010-0	n of which prepa	rer has any knowledge
Part II Sign Here	Under pand believed Signal Preparer	enalties of pe ef, it is true, o *** ature of office crear CEO e or print nam 's	rjury, I declare that I have examined this return to rect, and complete Declaration of preparer r	(other than officer) is based		formatio 2010-0	n of which prepa	rer has any knowledge
Part II Sign Here	Under pand believed with the second s	enalties of pe ef, it is true, o *** ature of office crear CEO e or print nam 's	rjury, I declare that I have examined this return to rect, and complete Declaration of preparer r	other than officer) is based	d on all in	2010-0 Date	9-17 Preparer's identi	rer has any knowledge
Part II Sign Here Paid Preparer	Under pand believed by the second by	enalties of peeef, it is true, of the effect of the enalties of office enalties of the enaltie	rjury, I declare that I have examined this returbing the correct, and complete Declaration of preparer r e and title CHRISTENSEN	other than officer) is based	d on all in	2010-0 Date	9-17 Preparer's identities (see instructions	rer has any knowledge
Part II Sign Here	Under pand beling the self-er signature.	enalties of peeef, it is true, of the strue, of the strue of office or print name of the strue o	rjury, I declare that I have examined this returbing the correct, and complete Declaration of preparer r e and title CHRISTENSEN	other than officer) is based	d on all in	2010-0 Date	9-17 Preparer's identi	rer has any knowledge
Part II Sign Here Paid Preparer	Under pand beling the self-er signature.	enalties of peeef, it is true, of the enalties of office enalties of office enalties and enalties of peeds are considered by the enalties of t	rjury, I declare that I have examined this return correct, and complete Declaration of preparer r e and title cHRISTENSEN wipfli llp	other than officer) is based	d on all in	2010-0 Date	9-17 Preparer's identities (see instructions	rer has any knowledge fying number s)

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

To be the world's leading advocate, platform, development and good governance agency for credit unions

4e	Total program serv	vice expenses►\$			
	(Expenses \$		g grants of \$) (Revenue \$)
4d		rvices (Describe in Schedule	•		
	members and employe	ees The purpose of the conference	n its trade association activities, WOCCU e is to bring together credit union leaders ided by more than 1,100 participants rep	s for networking and provide education	
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	types of activities to si ideas - Advocating to national credit union le	upport its members - Raising awar improve legislation and regulation i	organization for credit unions and other reness of credit unions and financial coop internationallyIn 2009, WOCCU had 40 r ted 51 countries Trade association activit	peratives - Facilitating the global exch nembers and associate members from	ange of information and around the world, primarily
4b	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
	DevelopmentWOCCU access to the underser and regulatory system and US \$3 5 billion in 6	international development program ved, developing integrated busines development During 2009, WOCO	ns assist credit unions and national/regio ss networks, supporting communities at CU's development projects reached 5 9 g credit unions Development activities ai	nal associations with rebuilding during risk, reconstructing after disaster and o people in 13 countries, with US \$3 9 bi	encouraging legislative reform Ilion in consolidated savings
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4	Section 501(c)(3)	and 501(c)(4) organizations	each of the organization's three and section 4947(a)(1) trusts a evenue, if any, for each program s	re required to report the amoun	•
	If "Yes," describe th	nese changes on Schedule O			
3		= :	significant changes in how it cor		Yes ✓ No
	•	nese new services on Schedi			
2	the prior Form 990	or 990-EZ?	rogram services during the year	which were not listed on	Yes 🔽 No

Part IV	Chec	klist of	Required	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		No
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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		No
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		No
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		N o
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
Ь	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	Yes	
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	Yes	
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	Yes	
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

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		Νο
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? <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		Νο
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		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		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		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		Νο
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	Yes	
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		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "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	
		F	orm 990	(2009)

	,/
Part V	Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
.a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a 46			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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	2b	Yes	
а	Instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
	return?	3a		Νo
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
а	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country <u>BL,AF,CO,KE,MX,PE,RP,RW,CE,UZ,HA</u> See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
,	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
1	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		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
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			

5710 mineral point rd Madison, WI 53705 (608) 395-2000

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 14			
b	Enter the number of voting members that are independent 14			
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		Νο
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		N o
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	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	110
	•	-	162	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νο
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11				
		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 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?			
	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	Yes	
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	Yes	
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ₩WI			
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			
4.0	Own website Another's website Vpon 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 the	ne orga	ınızatıor	ı F
	julie allen			

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	(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
See add'l data										

For	n 990 (2009)			Page 8
1b	Total	0		315,848
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶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 individual	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		No
S	ection 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 Comper	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization \(\mathbb{E} \)0			
		F	orm 99 0	(2009)

Form 99							Page 9
Part V	<u> </u>	Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
nts nts	1a	Federated campaigns 1a					
gra	Ь	Membership dues 1b					
ts, aπ	C	Fundraising events 1c					
<u> </u>	d	Related organizations 1d Government grants (contributions)	21,488,951				
Sign Sign	e		4,081,139		ļ		
ž F	f	similar amounts not included above	4,001,139				
###	g	Noncash contributions included in lines 1a-1f \$					
0 E	h	Total. Add lines 1a-1f	▶	25,570,090			
		E	Business Code				
enu	2a	Membership dues	900,099	2,166,251	2,166,251		
æ	ь	MEETINGS & PROGRAM REV	541,610	1,145,423	1,145,423		
Other Revenue Contributions, gifts, grants Program Service Revenue and other similar amounts	C	Project INCOME	900,099	181,883	181,883		
38	d	REGISTRATION FEE REV	523,000	9,093	9,093		
ian E	e f	All other program service revenue					
Jo	'						
	g 3	Total. Add lines 2a-2f		3,502,650			
	3	Investment income (including dividends, and other similar amounts)	. ⊢	151,062			151,062
	4	Income from investment of tax-exempt bond prod	_				
	5	Royalties	▶				
		(ı) Real	(II) Personal				
	6а ь	Gross Rents Less rental					
	-	expenses Rental income					
	C	or (loss)					
	d	Net rental income or (loss)	(II) O ther				
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis and					
	 c	sales expenses Gain or (loss)					
	d	Net gain or (loss)	▶				
	8a	Gross income from fundraising					
r Revenue		s of contributions reported on line 1c) See Part IV, line 18					
the	ь	Less direct expenses b					
0	C Oo	Net income or (loss) from fundraising eve	ents 🛌				
	9a	Gross income from gaming activities See Part IV, line 19					
	b c	Less direct expenses b Net income or (loss) from gaming activiti	es				
	10a	Gross sales of inventory, less returns and allowances .					
	ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of invent					
	11a	Miscellaneous Revenue E	Business Code				
	ь						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
	12	Total revenue. See Instructions		29,223,802	3,502,650	0	151,062

Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
			(B)	(D).	(D)			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service 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	4,412,639						
4	Benefits paid to or for members							
5	Compensation of current officers, directors, trustees, and key employees	1,218,390						
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$							
7	Other salaries and wages	4,041,513						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	188,792						
9	Other employee benefits	1,235,419						
10	Payroll taxes	383,387						
11	Fees for services (non-employees)							
а	Management							
ь	Legal	50,125						
с	Accounting	36,425						
d	Lobbying							
e	Professional fundraising See Part IV, line 17	20,000						
f	Investment management fees							
g	Other							
12	Advertising and promotion	22,275						
13	Office expenses	201,224						
14	Information technology							
15	Royalties							
16	Occupancy	320,407						
17	Travel	416,546						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	181,139						
20	Interest							
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	103,721						
23	Insurance	33,784						
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	development projects -	14,458,990						
b	international forum	858,101						
С	dc services	97,500						
d	CONSULTANTS	81,998						
e	Member relations	79,372						
f	All other expenses	311,888						
25	Total functional expenses. Add lines 1 through 24f	28,753,635						
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				orm 990 (2009)			

Part X Balance Sheet (A) (B) Beginning of year End of year 1 Cash—non-interest-bearing 1 17,794,428 2 8.870.536 2 373,470 8,090 3 3 4 472.963 635.752 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Notes and loans receivable, net Inventories for sale or use 8 81,392 9 53,890 Land, buildings, and equipment cost or other basis Complete 1.350.275 10a 10a Part VI of Schedule D 10b 1.148.468 201.807 b Less accumulated depreciation 266,729 **10c** 11 11 450.859 12 635,181 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 16.802 15 15.189 15 16 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 19,091,263 10,785,825 2.756.849 17 2.489.416 17 Accounts payable and accrued expenses . 18 18 13,885,908 19 5,443,308 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities Complete Part X of Schedule D 26 **Total liabilities.** Add lines 17 through 25 16,642,757 26 7,932,724 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 2.448.506 2.853.101 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ Total net assets or fund balances 2,448,506 33 33 2,853,101 34 Total liabilities and net assets/fund balances 19.091.263 34 10.785.825

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		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 Consolidated basis Both consolidated and separated 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	Yes	
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	Yes	

Form **990** (2009)

Software ID: Software Version:

EIN: 39-1143339

Name: WORLD COUNCIL OF CREDIT UNIONS INC

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

Compensated Employees, and	Independ	dent C	ont	ract	tors	5				
(A) Name and Title	(B) Average hours per		tion (that a	che		_	ı	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Barry jolette Chairman	1 00	X		Х				0	0	0
Grzegorz Bierecki seconD VICE CHAIR	1 00	X		Х				0	0	0
MANUEL RABINES RIPALDA first vice chair	1 00	X		X				0	0	0
Mark Bailey Treasurer	1 00	X		Х				0	0	0
ANNE COCHRAN Member	1 00	X						0	0	0
Ronald hance Member	1 00	X						0	0	0
Sylvester kadzola Member	1 00	Х						0	0	0
PENNY REEVES secrETARY	1 00	X						0	0	0
Catherine Roberts member	1 00	X						0	0	0
DANIEL BURNS MEmber	1 00	X						0	0	0
yvonne ridguard member	1 00	Χ						0	0	0
louise petschler member	1 00	X						0	0	0
marlene shiels member	1 00	X						0	0	0
manfred dasenbrock member	1 00	X						0	0	0
Pete Crear Chief Executive Officer	40 00			X				346,593	0	59,685
Julie Allen VP/FINANCE	40 00			Х				113,231	0	16,798
brian branch coo/vice president	40 00				Х			188,190	0	42,234
BARRY LENNON SENIOR VP	40 00				Х			219,651	0	42,507
JESUS CHAVEZ PROJECT DIRECTOR	40 00				X			116,888	0	36,920
MARK CIFUENTES SENIOR VP	40 00				Χ			167,337	0	36,698
SAM DUNLAP PROJECT DIRECTOR	40 00					X		173,787	0	29,416
RANDY SPEARS PROJECT DIRECTOR	40 00					X		243,403	0	40,264
DAVE RICHARDSON SENIOR MANAGER	40 00					Х		165,322	0	48,246

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
development projects -	14,458,990			
ınternatıonal forum	858,101			
dc services	97,500			
CONSULTANTS	81,998			
Member relations	79,372			

DLN: 93493277012050

OMB No 1545-0047

Political Campaign and Lobbying Activities

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

◆ Se ◆ Se	ction 501(c)(3) organizations that ction 501(c)(3) organizations that	s," to Form 990, Part IV, Line 4, o have filed Form 5768 (election unde have NOT filed Form 5768 (election	r section 501(h)) under section 501	Complete Part II-A Do (h)) Complete Part II-I	not co B Do	omplete Part II-B not complete Part II-A
	e organization answered "Yes ction 501(c)(4), (5), or (6) organiz	s," to Form 990, Part IV, Line 5 (P	roxy Tax) or For	m 990-EZ, line 35a (regai	rding proxy tax), then
Na	me of the organization RLD COUNCIL OF CREDIT UNIONS inc	adiono complete rare iii				ntıfıcatıon number
Par	t I-A Complete if the or	ganization is exempt under	section 501(c) or is a section		
1		anization's direct and indirect polit				
2	Political expenditures	gamzation 5 ander and mander point	icai campaign ac	civicies in rail iv	•	¢
3	Volunteer hours				•	Ψ
	-	ganization is exempt under				
1	·	tax incurred by the organization ur			•	\$
2	Enter the amount of any excise	tax incurred by organization manag	gers under sectio	n 4955	•	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 47.	20 for this year?			│ Yes │ No
4a	Was a correction made?					☐ Yes ☐ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the or	ganization is exempt under	section 501(c) except sectio	n 50	1(c)(3).
1	Enter the amount directly expe	nded by the filing organization for s	ection 527 exem	pt function activities	•	\$
2	Enter the amount of the filing o exempt funtion activities	rganızatıon's funds contributed to o	ther organization	s for section 527	۰	\$
3	Total exempt function expendit	ures Add lines 1 and 2 Enter here	and on Form 112	20-POL, line 17b	-	\$
4	Did the filing organization file F	orm 1120-POL for this year?				Yes No
5	were made For each organizati contributions received that wei	nd employer identification number (E on listed, enter the amount paid fro Te promptly and directly delivered to littee (PAC) If additional space is n	m the filing organ o a separate polit	ızatıon's funds Also ıcal organızatıon, suc	enter	the amount of political
	(a) Name	(b) Address	(c) EIN	(d) A mount paid filing organization funds If none, ent	on's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

		(a	1)	(b)
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1:			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
L	Were substantially all (90% or more) dues received nondeductible by members?	1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		Νo
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		Νo

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes". 1

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
Part I-A, Line 1	Political Campaign Activities	Due to globalization, more financial sector standards-from capital to money laundering to supervisory procedures-are being set at an international level and adapted to local conditions. To ensure that credit unions are represented from the outset of discussions, World Council works continuously with the following organizations to influence global standards and regulation. United Nations (UN), European Union (EU), Bank for International Settlements (BIS), World Bank and International Monetary Fund, Consultative Group to Assist the Poor (CGAP), and International Accounting Standards Board

DLN: 93493277012050

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** WORLD COUNCIL OF CREDIT UNIONS INC 39-1143339

Pai	organizations Maintaining Donor A		unds	or Accounts.	. Complete	ıf the
	organización answered Tes to Form 9	(a) Donor advised funds	1	b) Funds and ot	her account	
1	Total number at end of year	(a) Domer dames a	`			
	Aggregate contributions to (during year)					
	Aggregate grants from (during year)					
	Aggregate value at end of year					
5	Did the organization inform all donors and donor adv	Isors in writing that the assets held in don	or advi	s a d		
•	funds are the organization's property, subject to the		101 4411	364	☐ Yes	∏ No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the beiconferring impermissible private benefit	nefit of the donor or donor advisor, or for ar	ny othe	r purpose		Г No
Par	t III Conservation Easements. Complete	if the organization answered "Yes" t	<u>o Form</u>	<u>1 990, Part IV</u>	<u>, lıne 7.</u>	
2	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qua	on or pleasure) Preservation of an Preservation of a c	certified	d historic struct		
	easement on the last day of the tax year					
				Held at the	End of the Y	'ear
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements	5	2b			
c	Number of conservation easements on a certified his	storic structure included in (a)	2c			
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d			
3	Number of conservation easements modified, transfithe taxable year -	erred, released, extinguished, or terminate	d by th	e organization d	during	
4	Number of states where property subject to conserv	ation easement is located 🗠				
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds	g the periodic monitoring, inspection, hand	—— dling of	violations, and	☐ Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation easem	nents du	uring the year 🕨		
7	A mount of expenses incurred in monitoring, inspect	ing, and enforcing conservation easements	s during	, the year ► \$ _		
8	Does each conservation easement reported on line $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	2(d) above satisfy the requirements of sec	tion		☐ Yes	┌ No
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financial	•	•		
Part	Organizations Maintaining Collection Complete if the organization answered		or Oth	ner Similar A	Assets.	
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi	l for public exhibition, education or researc	ch in fui			
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or research i			•	
	(i) Revenues included in Form 990, Part VIII, line	L				
	(ii) Assets included in Form 990, Part X			► \$		
2	If the organization received or held works of art, hist following amounts required to be reported under SFA		or finan	cial gain, provid	e the	
а	Revenues included in Form 990, Part VIII, line 1			► \$		
Ь	Assets included in Form 990, Part X			► \$		

Part	•••• Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tı</u>	<u>easu</u>	res, or C	the	<u>r Similar</u>	· Asse	ts (co	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 are	e a significa	ant us	se of its co	llection	1	
а	Public exhibition		d	Γ	Loan	orexch	nange progi	rams				
b	Scholarly research		e	Γ	Other	-						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ain ho	w the	y furthe	er the o	rganızatıor	ı's ex	empt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					ılar	Г	Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answere	d "Ye	es" to For	m 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	edıary	for c	ontribu	itions c	or other ass	ets n	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving t	able		Г			A mou	nt	
С	Beginning balance							1c				
d	Additions during the year						F	1d				
e	Distributions during the year							1e				
f	Ending balance						ļ	1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?				L	I.		Г	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV									*		•
	rt V Endowment Funds. Complete		n ans	were	ed "Ye	s" to f	Form 990,	Part	t IV, line	10.		
	•	(a)Current Year	(b) Prior `	Year	(c) Tw	o Years Back	(d)⊺	Three Years E	Back (e	Four Y	ears Back
1a	Beginning of year balance											
b	Contributions							1				
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	as									
а	Board designated or quasi-endowment 🕨	%										
b	Permanent endowment 🕨 %											
С	Term endowment ► %											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are held	d and a	dministere	d for t	the			
	organization by								ſ		Yes	No
	(i) unrelated organizations		•					•		3a(i)		<u> </u>
L	(ii) related organizations				 					3a(ii)	<u> </u>	<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		<u> </u>
	t VI Investments—Land, Buildings					90 Pa	art X line	10				
	<u> </u>	o, una Equipme			Cost or		(b)Cost or		(c) Accum	ulated		
	Description of investment				is (inves		basis (oth		deprecia		(d) Bo	ook value
1a	Land											
Ь	Buildings		•									
c I	Leasehold improvements						13	8,091		115,141		22,950
d I	Equipment						1,21	2,184	1,	033,327		178,857
e (Other											
	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colu	mn (B,), line	10(c).)				▶			201,807
		orm 990, Part X, colu	mn (B), line	10(c).)			•		ule D (F	orm 9	

(a) Description of security or category	-orm 990, Part X, line 12 I		d of valuation
(including name of security)	(b) Book value		f-year market value
Financial derivatives			
Closely-held equity interests			
Other	625.404		-
investment in subsidiary	635,181		<u>F</u> _
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	635,181		
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
	(2) 20011 14140	Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin	e 15.		
			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:	5.)		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value

Par	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ITS
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 - 8	9
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	
1	Total revenue, gains, and other support per audited financial statements	1
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains on investments	
ь	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIV) 2d	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIV) 4b	
c	Add lines 4a and 4b	4c
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
а	Donated services and use of facilities	
ь	Prior year adjustments	1
c	Other losses	1
d	Other (Describe in Part XIV) 2d	1
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIV) 4b]
c	Add lines 4a and 4b	4c
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5
Par	t XIV Supplemental Information	
	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete t	

Identifier Return Reference Explanation

additional information

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493277012050

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990,
 Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► See separate instructions.

Name of the organization
WORLD COUNCIL OF CREDIT UNIONS inc

Employer identification number

39-1143339

Part I	General Information on	Activities Outside the United States.	. Complete if the organization answe	ered
	"Yes" to Form 990, Part IV	line 14b.		

2 For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

Activites per Region (o	ise Schedule F-1	(I OIIII 990) II aut	illional space is needed)		
(a) Region	(b) Number of offices in the	(c) Number of employees or	(d) Activities conducted in region (by type) (i.e., fundraising, program services,	(e) If activity listed in (d) is a program service, describe specific type of	(f) Total expenditures for region
	region	agents in region	grants to recipients located in the region)	service(s) in region	
NORTH AMERICA	3	46	PROGRAM SERVICE	CREDIT UNION ASSISTANCE	2,211,686
SOUTH AMERICA	4	22	PROGRAM SERVICE	CREDIT UNION ASSISTANCE	3,189,102
CENTRAL AMERICA			PROGRAM SERVICE	CREDIT UNION ASSISTANCE	29,275
CARIBBEAN	1	15	PROGRAM SERVICE	CREDIT UNION ASSISTANCE	1,015,182
EUROPE	1	2	PROGRAM SERVICE	CREDIT UNION ASSISTANCE	129,556
MIDDLE EAST	7	13	PROGRAM SERVICE	CREDIT UNION ASSISTANCE	12,064,278
SUB-SAHARAN AFRICA	5		PROGRAM SERVICE	CREDIT UNION ASSISTANCE	5,249,650
SOUTH ASIA	1		PROGRAM SERVICE	CREDIT UNION ASSISTANCE	475,635
EAST ASIA	2	8	PROGRAM SERVICE	CREDIT UNION ASSISTANCE	394,371
nORTH AMERICA			member relations and development	CU Support and Member Development	1,518
SOUTH AMERICA			member relations and development	CU Support	485
euROPE			member relations and development, EU Summit	CU Support, coop bank Membership, Member development, member support	50,899
	2.4	140			24.044.627
Totals	24				24,811,637
For Privacy Act and Paperwork R	Reduction Act Notion	ce, see the Instruc	tions for Form 990.	Cat No 50082W Sch e	edule F (Form 990) 2009

(a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	Grant paid to ServiRed, S A to support credit union development in Bolivia Grants paid to Bolivian credit unions for rural finance development	717,287				
		Central America and the Caribbean	Grants given to Haitian groups to support credit union development in Haiti	282,971	Check			
		Middle East and North Africa	Grants given to Afghanistan IFC's for investor accounts and community development Grants given to Afghanistan IFC's for liquidity funds Grants given to Afghanistan IIFC's for investor accounts and infrastructure enhancements	2,684,476	check			
		Sub-Saharan Africa	Credit union loans disbursed to 1,583 individuals in savings groups in the Kisumu area of Kenya to assist with agricultural crops 453 grants given to individuals, 24 to community groups, and 6 given to educational facilities in the Kisumu area of Kenya to assist with education related to HIV/AIDS Equipment purchases to suuport Kenyan SACCO's (credit unions)	658,819	check			
		South Asia	Grant paid to DFF to support credit union development in Sri Lanka	69,086	check			

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	in Part I, line 2, and any additional information. Explanation
Procedure for Monitoring Grants Outside the U S	Returnkelerence	Schedule F, Part I, Line 2 Grants vary considerably, based on the donor contract Grant monitoring is specified within the contract and is done by both the Project Director and Project Manager

DLN: 93493277012050

OMB No. 1545-0047

2009

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Supplemental Information Regarding

Open to Public Inspection

Internal Revenue Service	Attach to Form 990 or Form 990-EZ. F See separate instructions.	
Name of the organization		Emple
WORLD COUNCIL OF C	REDIT UNIONS Inc	

over identification number 39-1143339

Pa	Fundraising Activities. Complete if the organization Form 990-EZ filers are not required to complete to complete in the organization of the complete in the organization of the complete in the organization of the organization				line 17	7.		
1	Indicate whether the organization raised funds through any	of the	follo	owing activities Check all that apply				
а	Mail solicitations	e	~	Solicitation of non-government grants				
b	Internet and e-mail solicitations	f	~	Solicitation of government grants				
c	Phone solicitations	g	Г	Special fundraising events				
d	In-person solicitations							
2a	Did the organization have a written or oral agreement with a or key employees listed in Form 990, Part VII) or entity in	,		, ,	▽	Yes	Г	No
b	If "Yes," list the ten highest paid individuals or entities (fun to be compensated at least \$5,000 by the organization For					ıs		

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No							
NOSSAMAN O'CONNOR & HANNAN LLP	FOOD FOR PROGRESS PROGRAM		No	0	20,000	-20,000				
Total			.►		20,000	-20,000				

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form					report	ted
			(a) Event #1	(b) Event #2	(c) O ther Events (total number)	(d) To	otal Eve ol (a) th ol (c))	
Revenue	1 2 3	Gross receipts Less Charitable contributions Gross income (line 1 minus line 2)	(event type)		(total number)			
	4	Cash prizes						
Ses	5 6	Non-cash prizes				+		
Expenses	7	Food and beverages						
Direct B	8	Entertainment						
ឨ	9	Other direct expenses .				<u> </u>		
	10 11	Direct expense summary Add line Net income summary Combine lii			. 			
Par	t III		ganızatıon answered		irt IV, line 19, or repo	rted mo	re thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(Add co	otal gam I (a) th ol (c))	
	1 (Gross revenue						
Ses	2 (Cash prizes				<u> </u>		
Expenses	s 1	Non-cash prizes				<u> </u>		
Direct E	4 F	Rent/facility costs						
<u></u>	5 (Other direct expenses						
	6 \	Volunteer labor	∀es	│	Г Yes			
		Direct expense summary Add lines			.			
	8	Net gaming income summary Com	bine lines 1, column d, a	ind line 7	<u> . .</u>		Yes	No
9 a	Is th	er the state(s) in which the organiza ne organization licensed to operate				· 9a		
Ь		lo," Explain				_		
10a b		e any of the organization's gaming l es," Explain	ıcenses revoked, suspe	nded or terminated during	the tax year?	10a	3	
11		s the organization operate gaming a					.	
12		ne organization a grantor, beneficia ied to administer charitable gaming				. .,		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493277012050

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

WORLD COUNCIL OF CREDIT UNIONS Inc.

b Any related organization?

The organization?

ın Part III

Any related organization?

section 53 4958-6(c)?

If "Yes," to line 5a or 5b, describe in Part III

If "Yes," to line 6a or 6b, describe in Part III

compensation contingent on the net earnings 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

			39-1143339			
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	\vdash	Housing allowance or residence for personal use			
	▼ Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Γ	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 rofficers, directors, trustees, and the CEO/Executive		,	2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the Compensation committee Independent compensation consultant Form 990 of other organizations		y Written employment contract			
4	During the year, did any person listed in Form 990, I or 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	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-ba	ased co	ompensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	he applicable amounts for each item in Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only mu For persons listed in form 990, Part VII, Section A,	_	-			
_	compensation contingent on the revenues of		, a.e the organization pay or decide any			
а	The organization?			5a		

payments not described in lines 5 and 6? If "Yes," describe in Part III

For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any

For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe 5b

6Ь

7

8

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	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form 990 or Form 990-EZ	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)		
Pete Crear	(ı) (ıı)	335,708 0	0 0	10,885 0	48,436 0	11,249 0	406,278 0		
brian branch	(ı) (ıı)	186,830 0	0 0	1,360 0	26,833 0	15,401 0	230,424 0		
BARRY LENNON	(ı) (ıı)	215,307 0	50 0	4,294 0	30,770 0	11,737 0	262,158 0		
MARK CIFUENTES	(ı) (ıı)	166,527 0	0 0	810	23,467 0	13,231 0	204,035 0		
SAM DUNLAP	(ı) (ıı)	151,874 0	2,000	19,913 0	22,836 0	6,580 0	203,203		
RANDY SPEARS	(ı) (ıı)	143,509 0	0 0	99,894 0	22,273 0	17,991 0	283,667 0		
DAVE RICHARDSON	(ı) (ıı)	163,021 0	0 0	2,301 0	23,102 0	25,144 0	213,568 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	Return Reference	Explanation
		As part of his contract, WOCCU pays the expenses for the CEO's spouse for two trips per year to travel with him while he is on company business For 2009, the total value of the travel was \$6,312 This amount is included in compensation and reported on his 2009 W-2

Schedule J (Form 990) 2009

OMB No 1545-0047

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Open to Public Inspection

Name of the organization WORLD COUNCIL OF CREDIT UNIONS INC **Employer identification number**

39-1143339

ldentifier	Return	Explanation
	Reference	·
Form 990, Part VI, Section A, Iine 6		CREDIT UNION MEMBERS
Form 990, Part VI, Section A, line 7a		The members determine the board of directors. The four largest members appoint their board representatives. The remaining seats are chosen by elections of the member's delegates.
Form 990, Part VI, Section A, line 7b		The bylaws are determined by the members and carried out by the board of directors. Decisions are made directly by the board members.
Form 990, Part VI, Section B, line 11		The return is posted on the board wiebsite and required to be reviewed and accepted by the board of directors prior to submission to the IRS
Form 990, Part VI, Section B, line 12c		Employees - We have a written conflict of interest policy as part of our Employee Policies, which are posted on the employee intranet. All employees are informed of the policies and are required to state in writing that they have read and understand the policies. Senior managers are required to report any conflicts that they become aware of, either their own conflicts or of their staff. Board At all committee and full board meetings, the chair of the meeting is required to state the conflict of interest policy and ask if any board members have a conflict of interest for any items on the agenda. Annually, board members are required to sign a statement that they have disclosed all conflicts of interest.
Form 990, Part VI, Section B, line 15		The CEO's performance, salary and benefits are reviewed annually by the Board of Director's Executive Committee As part of the process, market surveys are performed by an outside consultant to verify that salary and benefits are within market ranges. All other employees, including the officers/key employees mentioned above, are reviewed annually via an employee performance evaluation process. Salaries are based on periodic market surveys prepared internally every two to three years. Annual adjustments are based on the market surveys, individual performance and the prevailing inflation (CPI) rate. Employees' annual salary adjustments are set by their respective supervisors, in consulation with the COO and Human Resources.
Form 990, Part VI, Section C, line 19		The qualifications & duties of board members and the conflict of interest policy are posted on the board wiebsite. The annual report, which includes a summary of the financials, is also posted. In addition, contact information is provided in the annual report for anyone who wants to request a copy of the full audited financials. The full bylaws of the organization are also posted on the website, and will be sent if requested.
Form 990, PArt XI, Line 2c		The board of directors has control for oversight of the audit and selects the independent auditors. There has been no change since prior year.

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

DLN: 93493277012050

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

39-6093210

Name of the organization		Employer identification numbe
WORLD COUNCIL OF CREDIT UNIONS	inc	
		30-11/3330

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

(a)
(b)
(c)
(d)
(e)
(f)
Name, address, and EIN of disregarded entity

Direct controlling entity

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

(c)

Legal domicile (state or foreign country)

Exempt Code section

Public charity status (if section 501(c)(3))

Direct controlling entity

WORLDWIDE FOUNDATION FOR CREDIT UNIONS INC

PO BOX 2982

MADISON, WI 53701

TO ASSIST CREDIT UNION
SYSTEMS & MEMBERS IN WI 501(C)(3) Line 7 N/A
DEVELOPMENT ACTIVITIES

Yes

No

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.)

(h) (i) (j) (c) Code V—UBI (a) Name, address, and EIN of (b) **(f)** Share of total income Disproprtionate General or Legal (d) (g) Predominant income Primary activity Direct controlling Share of end-of-year allocations? amount in box 20 of managing domicile (related, unrelated, Schedule K-1 related organization (state or entity assets partner? excluded from tax foreign (Form 1065) under sections 512country) 514)

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
WOCCU SERVICES GROUP INC 5710 MINERAL POINT ROAD MADISON, WI53705 39-1984681	CREDIT UNION SERVICES	WI	WORLD COUNCIL OF CREDIT UNIONS INC	С	-115,678	1,175,187	100 000 %
IRNET COOPERATIVE KENYA LTD 3RD NGONG ROAD NAIROBI KE	CREDIT UNION SERVICES	KE	WOCCU SERVICES GROUP INC	С	-1,970	47,792	54 000 %
SERVIRED SA AV G VILLARROEEL NRO 1132 COCHABAMBA BI	CREDIT UNION SERVICES	BL	WOCCU SERVICES GROUP INC	С	237,121	383,769	97 000 %

Part V	Transactions With Related Organizations	(Complete if the organization answered	"Yes" on Form 990.	Part IV, line 34, 35, or 36.)
	rransactions with Related organizations	(Complete il tile organization anomerea	165 011 101111 330,	Tale 14, inte 31, 33, or 30.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV		١	res	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts	s II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	12	a		No
b Gift, grant, or capital contribution to other organization(s)	11:	ЬΝ	⁄es	
c Gift, grant, or capital contribution from other organization(s)	10	c \	⁄es	
d Loans or loan guarantees to or for other organization(s)	10	d		No
e Loans or loan guarantees by other organization(s)	16	e	\Box	No
f Sale of assets to other organization(s)	1f	f	\dashv	No
g Purchase of assets from other organization(s)	10	g		No
h Exchange of assets	11:	h		No
i Lease of facilities, equipment, or other assets to other organization(s)	11	i	\Box	No
j Lease of facilities, equipment, or other assets from other organization(s)	1j	j	\dashv	No
k Performance of services or membership or fundraising solicitations for other organization(s)	11	k		No
I Performance of services or membership or fundraising solicitations by other organization(s)	11	ī		No
m Sharing of facilities, equipment, mailing lists, or other assets	1r	m۱	fes	
n Sharing of paid employees	1r	n \	⁄es	
• Reimbursement paid to other organization for expenses	10	•	\dashv	No
p Reimbursement paid by other organization for expenses	1,	p \	/es	
q Other transfer of cash or property to other organization(s)	10	<u> </u>	_	No
r Other transfer of cash or property from other organization(s)	11	_	\dashv	No

• Reimbursement paid to other organization for expenses		10		110
p Reimbursement paid by other organization for expenses		1р	Yes	
q Other transfer of cash or property to other organization(s)		1 q		No
r Other transfer of cash or property from other organization(s)		1r		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relations	hips and transaction thr	esholds		
(a) Name of other organization	(b) Transaction type(a-r)	(Amount	c) ınvolve	d
(1) WOCCU SERVICES GROUP INC	В		300	0,000
(2) WORLDWIDE FOUNDATION FOR CREDIT UNIONS INC	С		100	0,000
(3) WORLDWIDE FOUNDATION FOR CREDIT UNIONS INC	N		41	5,014
(4) WORLDWIDE FOUNDATION FOR CREDIT UNIONS INC	Р		1,019	9,501
(5) WOCCU SERVICES GROUP INC	N		354	4,165
(6) woCCU SERVICES GROUP INC	Р		183	3,392
	Sche	dule R (Form	990) 2	2009

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: 39-1143339

Name: WORLD COUNCIL OF CREDIT UNIONS inc

Form 990, Schedule R, Part V	- Transactions	With Related	Organizations
------------------------------	----------------	--------------	---------------

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)
(1)	WOCCU SERVICES GROUP INC	В	300,000
(2)	WORLDWIDE FOUNDATION FOR CREDIT UNIONS INC	С	100,000
(3)	WORLDWIDE FOUNDATION FOR CREDIT UNIONS INC	N	415,014
(4)	WORLDWIDE FOUNDATION FOR CREDIT UNIONS INC	P	1,019,501
(5)	WO CCU SERVICES GROUP INC	N	354,165
(6)	woCCU SERVICES GROUP INC	Р	183,392