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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 **2009** Open to Public Inspection

 A	For the 2009	calendar y	ear, or tax year beginning , and ending			
В	Check if applicable		C Name of organization	D	Employ	yer identification number
\equiv	Address change	label or print or	Assemblies of God Credit Union Doing Business As	-	44-	0599527
	Name change Initial return	type.	Number and street (or P O box if mail is not delivered to street address) Room/suite	E		one number
\equiv		See Specific	1535 N. Campbell Ave.		800	<u>-508-2428</u>
	Termination	Instruc-	City or town, state or country, and ZIP + 4	G	Gross recei	pts\$ 5,582,491
	Amended return	tions.	Springfield MO 65803			
	Application pendin	iu i	e and address of principal officer	H(a		group return for
			ul Ebisch, CFO	H(t	affiliates Are all a	affiliates 🖂 🖂
			35 N. Campbell	'	included	j? Yes No
_		[ringfield MO 65803 501(c) (14) ◀ (insert no) 4947(a)(1) or 527	\dashv	It "No,"	attach a list (see instructions)
	Tax-exempt sta			ا ا	s). Casus a	
	Website:		agcu.org poration Trust Association Other ► L Year of formation	195	-	exemption number M State of legal domicile MO
*******	Type of organizati	Summa		190	<u> </u>	Wi State of legal domicile 1-10
<u>F</u>			he organization's mission or most significant activities			
			de quality, efficient and professional services to med	at or	12	
ဥ		_	financial needs.	= 00	11	
Activities & Governance	mer	mers	Illiancial needs.			
Ver	0.051		If the organization discontinued its operations or disposed of more than 25% of its net			
တိ				asseis	1 1	7
ಿ ರ	1		g members of the governing body (Part VI, line 1a)		3 4	7
itie		•	endent voting members of the governing body (Part VI, line 1b)		5	47
.₹			employees (Part V, line 2a)		6	10
Ă			volunteers (estimate if necessary)		7a	163,258
	1	-	lated business revenue from Part VIII, column (C), line 12		7b	-36,978
	b Net un	related bu	siness taxable income from Form 990-T, line 34	Year	1 /8	Current Year
-	8 Contril	hutions an	d grants (Part VIII, line 1h)			
				.55,	943	5,191,064
Orevehud				53,		133,627
8	1		Part VIII, column (A), lines 5, 4, and 707		217	
	1	•		513,		5,324,691
M.42	·		ar amounts paid (Part IX, column (A), lines 1–3)			<u> </u>
			or for members (Part IX, column (A), line 4)			
penses.	15 Salarie	ee other o	ompensation, employee benefits (Part IX, column (A), lines (5-10)	304,	778	1,516,820
Seri	16 Drofos	es, ouiei c	draising fees (Part IX, column (A), line 11e)	<u> </u>	• • •	2,020,020
75	h T-4-14		expenses (Part IX, column (D), line 25)			
SRA	17 Other		(Part IX, column (A), lines 11a–11d, 131–241) FEB 1 4 2011	20,	095	3,777,949
$\widetilde{\mathbf{w}}$	18 Total	-	Add loss 42, 47 (must sound Boot IV, solven (A), loss 25)	324,		5,294,769
	10 Payor	•		788,		29,922
58	S TREVEN	140 1033 67	Beginning o			End of Year
sets	20 Total	assets (Pa	rt X, line 16) 77, (05,	384	93,272,905
t As	21 Total I	liabilities (l	Part X, line 26)	L84,	904	6,388,729
Net Assets or	22 Net as	ssets or fu	nd balances Subtract line 21 from line 20 76,8	32 <u>0</u> ,	480	86,884,176
		Signatu	re Block			
		Under pena	lties of perjury, ideciate that have examined this return, including accompanying schedules and statements true, correst, and complete. Declaration of preparer (other than officer) is based on all information of wh	its, and t	to the bes	st of my knowledge
		and belief, i	of strue, correct, and complete Declaration of preparer (other than officer) is based on all information of wh	uch prep	arer has	any knowledge
Si	gn		8 PCSS		1//	1-/8-10
He	еге	Signati	ure of officer		Date	
	:	Pa	ul Ebisch CFO CFO			
_		Type o	r print name and title		_	
		Preparer's		eck if	_	Preparer's identifying number (see instructions)
Pa		signature	11/18/10 se	lf- nployed	▶ □	P00141679
	eparer's	Eurola ====	Hlavacek Morris McIntyre Yates Daniel		EIN ▶	43-1276553
Us	se Only	Firm's nam if self-emple	1200 F Woodhand Dr. Cto C100		Phone	
	1	address, ar				417-882-2650
Ma	v the IRS dis	cuss this	return with the preparer shown above? (see instructions)	<u>(</u> .		X Yes No
			private Peduction Act Natice see the senarate instructions		- 1	- Form 990 (2000)

Page 2	599527		Assemblies of God atement of Program Service	
our	ervices to meet	ient and professional	be the organization's mission	1 Briefly descri
Yes X No			n 990 or 990-EZ? ribe these new services on Schedi	the prior Form
Yes X No	ram	ignificant changes in how it conducts, any pro	ization cease conducting, or make iribe these changes on Schedule C	services?
		ach of the organization's three largest program section 4947(a)(1) trusts are required to repo nue, if any, for each program service reported	exempt purpose achievements for c)(3) and 501(c)(4) organizations at	4 Describe the Section 501(
	rs by f interest	including grants of \$ conprofit savings insti- mong their 13,500 member and reasonable rate of ity to improve their ea	courages thrift a g credit at a fai riding an opportur	which er providir
) (Revenue \$	including grants of \$) (Expenses \$	4b (Code
) (Revenue \$	including grants of \$) (Expenses \$	4c (Code
			m services (Describe in Schedule	44.6"

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

4e Total program service expenses ▶

Pa	art IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	İ		
	complete Schedule A	1		_X_
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		1	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	_		**
	complete Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			•
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	40		x
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	11	x	
_	VII, VIII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	'-	-41	
•	Schedule D, Part VI			
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12		Х
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		X
14a		14a		X
b		446		x
4.5	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	-13		
16	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	- <u>-</u> -	<u> </u>	<u> </u>
• • • • • • • • • • • • • • • • • • • •	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	1	x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	ٺ :		T
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19	<u></u>	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		_	000	

Part IV	Checklist o	f Required	Schedules	(continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
•	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a		1	
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		_X_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С				
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			37
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			v
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	٠,		x
	Part I	31	<u> </u>	Α_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	22		x
22	Schedule N, Part II	32		
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		
J4	III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	- 57		
J J	Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
J J	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	<u> </u>		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			}
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
_		For	n 990	(2009

Pa	rt V. Statements Regarding Other IRS Filings and Tax Compliance					
4	Fate-the combination of Day 2 of Face 4000. Accord Common and Transmitted of				Yes	No
та	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1a	4100			
b	U.S. Information Returns. Enter -0- if not applicable. 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 i		1			
Ŭ	gaming (gambling) winnings to prize winners?			1c	X	ĺ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	47			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax ret	urns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	е				
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year cove	red by				
	this return?			3a	X	
_	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	X	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•			
	over, a financial account in a foreign country (such as a bank account, securities account, or other f	inanciai		4a		x
h	account)? If "Yes," enter the name of the foreign country ▶			4a		-
b	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	n Bank				
	and Financial Accounts	Daim				
5a				5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	action?		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Re	garding				
	Prohibited Tax Shelter Transaction?			5c	ļ	ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the				l
	organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions or		۵۲		
-	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	r annde				
а	and services provided to the payor?	i goods		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was				
	required to file Form 8282?	_		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	person	al			
	benefit contract?			7e	ļ	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cor			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 required?	-∪ as		7h		1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				-	
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	g				
	organization, have excess business holdings at any time during the year?	•		8	1	[
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
þ	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		ļ
10	Section 501(c)(7) organizations. Enter	1.	1			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter Gross uncome from members or shareholders	11a	1			
a b	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	IIa	-			
D	amounts due or received from them)	11b		•		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of For		·	12a	1	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Form 990 (2009)' Assemblies of God Credit Union Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

Sec	tion 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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	X	ĺ
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal			
	renue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	X	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a				
	with a taxable entity during the year?	16a		X
b				
	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		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
-	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Paul Ebisch, CFO 1535 N. Campbell			
S	- · · · · · · · · · · · · · · · · · · ·	417-83	1-4	1398

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization	Check this box if the organization did not compensate any current officer, director, or trustee											
(A) Name and Title	(B) Average	Posi	tion (chec	C) k all t	hat ap			(E) Reportable	(F) Estimated		
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
Ken Tripp Brd Chairman	1.00	x						0	0	0		
	1.00	1	\vdash	_	-	┼┈┤		<u> </u>		0		
Mark Perry Brd V Chmn	1.00	x						0	0	0		
Tom Bates		T										
Treasurer	1.00	X						0	0	0		
Karlene Gannon												
Secretary	1.00	x						0	0	0		
Shirley Shedd												
Brd member	1.00	x						0	0	0		
Mike Cooper										•		
Brd member	1.00	X				<u> </u>		0	0	0		
Mark Wootton												
Brd member	1.00	X						0	0	0		
Ed Hirsch]			ļ	ļ	ΙI						
President	50.00		<u> </u>	X	<u> </u>			60,855	0	3,878		
Paul Ebisch												
CFO	50.00	┼	├	X	├	\vdash		42,408	0	9,643		
	1	<u> </u>							1			
		-		<u> </u>	<u> </u> -							
				-	-							
									1			

Par	t VII Section A. Officers	, Directors, Trus	tees	s, Ke	y Er	nplo	yees	, an	d Highest Compensated	Employees (continued)			
	Name and Title	(B) Average hours per			chec	_	hat a		(D) Reportable compensation	(E) Reportable compensation	(F Estim amou	nated unt of	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	oth comper from organi and re organiz	nsation i the ization elated	
							ed						
										,			
	-												
	Total		1-		46		A	>	103,263			13,	521
2	Total number of individuals (in reportable compensation from				tnos	e iis	ted a	IDOV	e) who received more than	\$100,000 III			
3	Did the organization list any fo	rmer officer du	ector	ort	rueta	aa k	AV AI	mnlo	ovee or highest compensa	ted		Yes	No
4	employee on line 1a? If "Yes," For any individual listed on lin	complete Sched	dule	J for	suc	h inc	lividu	ıal			3		X
	the organization and related o										4		х
5	Did any person listed on line of services rendered to the organic									or 	5		x
Sec 1	tion B. Independent Contract Complete this table for your fi	ve highest comp	ensa	ted i	nde	penc	lent o	conti	ractors that received more	than \$100,000 of			
	compensation from the organ Name and	(A) business address							Descrip	(B) otion of services	((C) Compensat	tion
				-									
												-	
2	Total number of independent more than \$100,000 in comp						ed to	tho	se listed above) who recei	ved		0	
DAA										_		m 990	(2009)

Pa	rt V	II Statem	ent of Reve	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
សិស	1a	Federated cam	naigns	1a				TOVORGO		5,2,5,5,5,5,
Program Service Revenue Contributions, gifts, grants and other similar amounts		Membership du	. •	1b						
B,E		Fundraising ev		1c						
# E		Related organi		1d						
S,E		Government grants (1e						
rioi S	_	All other contributions								
		and similar amounts		1f						
FB	g	Noncash contribution	is included in lines 1a-	-1f	**************************************					
ပြုံ	h	Total. Add line	s 1a–1f							
ne			<u></u>			Busn. Code				
e	2a	Interest	income				3,763,985	3,763,985		
器	b	Credit o	ard income				680,172	680,172		
<u>Ş</u>	С	Fees, ch	narges and o	ther	lucom		512,328	512,328		
Ser	d	Service	center inco	me		522100	101,910		101,910	
E E	е	ATM fees	3				71,321	71,321		
ğ	f	All other progra	am service reve	nue			61,348		61,348	
	g	Total. Add line	s 2a–2f			•	5,191,064			
	3	Investment inc	ome (including	dıvıder	ids, intere	est, and				
		other similar amounts)				▶	391,427	391,427		
	4		vestment of tax	-exem	pt bond p	roceeds -				
	5	Royalties				•	,			
		}	(ı) Real		(II) P	Personal				
	6a	Gross Rents								
	b	Less rental exps								
	C	Rental inc or (foss)								
Ì	d 7a	Net rental inco Gross amount from	me or (loss) (i) Securities		I (1)	Other				
		sales of assets	(i) Securities	<u> </u>	(")	Other				
		other than inventory Less cost or other								
	D	basis & sales exps	257	, 800						
	_	Gain or (loss)	-257							
	ď	Net gain or (los		,			-257,800	-257,800	İ	
	8a	= :	om fundraising eve	ents						
nue	-	(not including \$,u.,u.a.ag							
».			eported on line 1c)						
A.		See Part IV, line		a		Ì				
Other Revenu	b	Less direct ex		b						
0	С		(loss) from fund	draising	events					
	9a		om gaming activitie	1						
		See Part IV, line		а						
	b	Less direct ex	penses	b						
	С	Net income or	(loss) from gan	ning ac	tivities	•				
	10a		f inventory, less							
		returns and all	owances	а						
		Less cost of g		b						
	<u> </u>		(loss) from sale		ventory	<u> </u>				
			ellaneous Revenu	e		Busn. Code				
	11a					<u> </u>		·		
	b									
	C	A.O41								
		All other reven								
	12	Total Revenue	es 11a–11d e. See inst <u>r</u> uction	one			5,324,691	5,161,433	163,258	0
	12_	TOWN REVENUE	e. See manuch	JII3			0,024,031	1 0,101,200	100,200	

Form 990 (2009) Assemblies of God Credit Union

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).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and		ОХРОПОСО	gonoral expenses	САРОПОСО
1	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in	_			
2					
•	the U.S. See Part IV, line 22			<u></u>	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16	·			
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	103,263			
	trustees, and key employees	103,203			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	1,069,497			
7		1,003,431			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	344,060			
10	Payroll taxes	311/000			
11	Fees for services (non-employees)				
a	Management				
	Legal	8,317			
	Accounting	15,030			
d	Lobbying	_			
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	99,115			
12	Advertising and promotion	224,455			
13	Office expenses	1,210,460			<u> </u>
14	Information technology				
15	Royalties	045 565			
16	Occupancy	217,565			
17	Travel	51,739			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1 120 162			
20	Interest	1,129,163			
21			<u> </u>		
22 23	Depreciation, depletion, and amortization Insurance	150,108			
23	insurance	200,200			
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together	Į			
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	Provision for loan loss	189,188			
b	Interchange charges	139,848			
С	Loan servicing fees	131,782			
d	Miscellaneous expense	50,881		<u> </u>	<u> </u>
е	Image center costs	39,795			
f	•	120,503			
25	Total functional expenses. Add lines 1 through 24f	5,294,769		 	
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			1	
	remarkioning obligitation	L			

art	X Balance Sheet		(A)		(B)
			Beginning of year		End of year
1	Cash—non-interest bearing		1,903,792	1	733,741
2	Savings and temporary cash investments		4,464,620	2	4,827,314
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Receivables from current and former officers, directors,	trustees, key			
	employees, and highest compensated employees Com	· · · · · · · · · · · · · · · · · · ·			
	Schedule L		Ì	5	
6	Receivables from other disqualified persons (as defined	under section			
	4958(f)(1)) and persons described in section 4958(c)(3)(.			
	Part II of Schedule L			6	
7 8	Notes and loans receivable, net		61,593,563	7	70,113,731
8	Inventories for sale or use	F		8	•
9	Prepaid expenses and deferred charges		143,611	9	229,830
	Land, buildings, and equipment cost or				
	other basis Complete Part VI of Schedule D	10a 5,988,427	İ		
k	Less accumulated depreciation	10b 1,875,212	1,455,865	10c	4,113,215
11	Investments—publicly traded securities		_,,	11	7,825,846
12	Investments—other securities See Part IV, line 11	F	6,552,600	12	4,451,536
13	Investments—program-related See Part IV, line 11		615,786	13	682,398
14	Intangible assets		5_5/.55	14	332/33
15	Other assets See Part IV, line 11		275,547	15	295,294
16	Total assets. Add lines 1 through 15 (must equal line 34	,,	77,005,384	16	93,272,905
17	Accounts payable and accrued expenses	184,904	17	6,388,729	
18	Grants payable			18	0,000,.20
19	Deferred revenue	_	· · · · · · · · · · · · · · · · · · ·	19	
20	Tax-exempt bond liabilities			20	
	Escrow or custodial account liability Complete Part IV o	f Schedule D		21	
	Payables to current and former officers, directors, truste				
	employees, highest compensated employees, and disqu	- I			
	persons Complete Part II of Schedule L		j	22	
	Secured mortgages and notes payable to unrelated third	Inarties		23	
24		· ·		24	
25	Other liabilities Complete Part X of Schedule D	_		25	
26	Total liabilities. Add lines 17 through 25		184,904	26	6,388,729
+	Organizations that follow SFAS 117, check here ▶	and			5,555,555
	complete lines 27 through 29, and lines 33 and 34.				
27	Unrestricted net assets			27	
28		F		28	
29	•	<u> </u>		29	
	Organizations that do not follow SFAS 117, check he	re ▶ 🕱			
	and complete lines 30 through 34.				
27 28 29 30 31 32 33	· · · · · · · · · · · · · · · · · · ·	ĺ	66,251,231	30	76,164,788
31	• • •	t fund	,,	31	
32			10,569,249		10,719,388
33	— · · · · · · · · · · · · · · · · · · ·		76,820,480		86,884,176
34		<u> </u>	77,005,384		93,272,905

Form **990** (2009)

Form 990 (2009) Assemblies of God Credit Union 44-0599527		Pa	ge 12
Part X Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked "Other," explain in			
Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b Were the organization's financial statements audited by an independent accountant?	2b		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c_	L	
If the organization changed either its oversight process or selection process during the tax year, explain in			
Schedule O			
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
issued on a consolidated basis, separate basis, or both			
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
the Single Audit Act and OMB Circular A-133?	3a		X
b. If "Voc." did the erganization undergo the required guidt or guidte? If the erganization did not undergo the			

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2009)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes." to Form 990. Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Inspection **Employer identification number** Name of the organization Assemblies of God Credit Union 44-0599527 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part F 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 1 Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV. 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 important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements 2b **b** Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d 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 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 Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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

904,993

2,000,716

Schedule D (Form 990) 2009

825,906

914,935

4,113,215

79,087

1,085,781

b Buildings

d Equipment e Other

c Leasehold improvements

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Schedule D (Form 990) 2009 Assemblies of God Cred		44-0599527	Page 3
Part VII Investments—Other Securities. See Form 990			
(a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market	value
Financial derivatives			
Closely-held equity interests		-	
Other			
		-	
			
		···	
		-	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 99	0, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method of valuation	า
		Cost or end-of-year market	value
Q = = ···			
			· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15.		1 0	o) Book value
(a) Description			J) BOOK Value
			
	•		
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		>	
Part X Other Liabilities. See Form 990, Part X, line 2	T .	,	
1 (a) Description of liability	(b) Amount		
Federal income taxes		4	
	==	_	
		4	
		4	
		-{	
		[
	 	4	
		1	
		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	 	┪	
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the orga	I	ents that reports the	
organization's liability for uncertain tax positions under FIN 48			

Sche	dule D (Form 990) 2009 Assemblies of God Credit Union	n.	44-059952	27	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audi	ted Financial Staten	nents	
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 through 8			9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	
<u> Pa</u>	rt XII Reconciliation of Revenue per Audited Financial Statemer	nts W	<i>l</i> ith Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		•		
а	Net unrealized gains on investments	2a	_	1 1	
b	Donated services and use of facilities	2b	·	. 1	
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	,	•	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]	
b	Other (Describe in Part XIV)	4b		1	
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents \	With Expenses per l	Retur	<u>'n</u>
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		1		
а	Donated services and use of facilities	2a		1	
b	Prior year adjustments	2b			
C	Other losses	2c			
d	Other (Describe in Part XIV)	2d	<u></u>	1	
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	r	ı	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		4	
b	Other (Describe in Part XIV)	4b		4	
С	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
	art XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lin				
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lin	ies 2d	and 4b Also complete		
this p	part to provide any additional information				

Schedule D (F	orm 990) 2	009	Ass	seml	bli	es	of	G	od	Cre	dit	L Մ	nic	n			44	-05	599!	<u>527</u>	<u>' </u>				F	age 5
Part XIV	Supple	ment	tal In	form	natio	n (c	ontir	nue	<u>d)</u>																	
														_						_			_			
		_					_	_			_			_	_	_		_			_	_				_
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SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No 1545-0047

Assemblies of God Credit Union

Employer identification number 44-0599527

Form 990, Part I, Line 6

Volunteers are considered to be the members of the board and supervisory committee. They direct and oversee the operation of the organization.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

The members of the credit union are considered to be the owners of the organization.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

The members of the credit union elect all board and committee

representatives to serve three year terms on an annually rotating basis.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members Members must by majority vote, elect to change the by-laws and approve mergers with other credit unions.

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 The Form 990 is reviewed by the CFO before signing the authorization for electonic filing. After filing, a copy of the return is provided to the Board of Directors at their next monthly meeting.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
The Board of Directors determines the compensation based on the reviews of
external salary reports and the performance of the organization under the
control of the President and Chief Financial Officer.

Form 990, Part VI, Line 15b - Compensation Process for Officers

The Board of Directors determine the compensation based on the reviews of internal and external salary reports and the performance of the departments within the organization under the officers or key employees control.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Financial statements are presented at the annual meeting and are available upon request. In addition, the NCUA website posts financial information as part of the quarterly call reports. Other documents and policies are available upon request.

Forms		•
990	1	990-PF

Other Notes and Loans Receivable

2009

Name

For calendar year 2009, or tax year beginning and ending

44-0599527

Employer Identification Number

Assemblies of God Credit Union

Form 990, Part X, Line 7 - Additional Information

Relationship to disqualified person

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

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

	Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
1)		61,593,563	70,113,731	
2)				
)				<u>.</u>
)				
)				
)				, <u>-</u>
')				<u>,</u>
)				
)				
10)				
Totals		61,593,563	70,113,731	