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DLN: 93493326001292

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Department of the Treasury

# **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

Open to Public

B Che	r the 2	2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011	D F	mnlover ide	entification number
_	eck ıf ap	CREDIT ONION OF AMERICA			
_	ress cha	Doing Business As		8-047729 elephone nu	
Nai	me chan	ige		•	
Init	ıal returi	Number and street (of P or box it mail is not delivered to street address) Room/suite		16) 265-	\$ 30,457,141
Ter	mınated	711 W DOUGLAS AVE	<b>G</b> (6)	oss receipts	\$ 30,437,141
– Am	ended re		-		
– App	lication	WICHITA, KS 672134703 pending			
		F Name and address of principal officer	<b>H(a)</b> Is this a gi	roup retur	n for
		ROBERT THURMAN	affiliates?	roup recur	⊤Yes ▼No
		650 S WESTDALE DR WICHITA,KS 67209	U/b) A!! -#:!:		led?
		, and the second	H(b) Are all affili		(see instructions)
Та	x-exem <sub>l</sub>	pt status	H(c) Group exe		
w	ebsite	: WWW CUOFAMERICA COM	(5)	·	
			1		•
		anization	L Year of formation	n 1935 <b>N</b>	State of legal domicile KS
Pa	rt I	Summary  Briefly describe the organization's mission or most significant activities			
Governance	-	TETHODS FOR MEMBER ACCESS TO THEIR FINANCIAL SERVICES AND RES		of its net a	ssets
		lumber of voting members of the governing body (Part VI, line 1a)		з	<u> </u>
ACUVIUES &	l	lumber of independent voting members of the governing body (Part VI, line 1b)		4	9
	l	otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	215
Į.	l	otal number of volunteers (estimate if necessary)		6	16
	l	otal unrelated business revenue from Part VIII, column (C), line 12		7a	193,008
	ьN	let unrelated business taxable income from Form 990-T, line 34		7b	-216,750
			Prior Yea	r	Current Year
	8	Contributions and grants (Part VIII, line 1h)		0	0
Revenue	9	Program service revenue (Part VIII, line 2g)	24,1	94,328	25,680,798
ie Ae	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,3	19,232	1,569,454
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1	74,063	36,335
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	25.6	87,623	27,286,587
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		13,889	19,034
	14	Benefits paid to or for members (Part IX, column (A), line 4)		44,644	54,125
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines		77,077	54,125
\$	13	5-10)	6,8	58,496	7,939,948
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	0
ੜ	ь	Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright$			
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	13,6	78,236	14,251,242
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	20,5	95,265	22,264,349
	19	Revenue less expenses Subtract line 18 from line 12	-	92,358	5,022,238
රීකි දිරිකි			Beginning of C Year	urrent	End of Year
ea co	20	Total accets (Part Y June 16)		94,038	394,264,262
₩.		Total assets (Part X, line 16)		96,865	394,264,262
Asser d Bafal	21	Net assets or fund balances Subtract line 21 from line 20		97,173	48,016,320
Net Asset Fund Balai	21	Net assets of full paralles Subtract file 21 from file 20	72,3	37,173	+0,010,320
	22	Cianatura Black			
Par Inder (now	22 T III	Signature Block ties of perjury, I declare that I have examined this return, including accompanying sch nd belief, it is true, correct, and complete. Declaration of preparer (other than officer)			
Par Jnder know	22 t III penalt ledge a	ies of perjury, I declare that I have examined this return, including accompanying sch		ormation o	
Pal Jnder know know	22 rt III r penalt ledge a ledge.	ties of perjury, I declare that I have examined this return, including accompanying sch nd belief, it is true, correct, and complete. Declaration of preparer (other than officer)	is based on all info	ormation o	
Pal Under Know Know	22 rt III r penalt ledge a ledge.	ties of perjury, I declare that I have examined this return, including accompanying sch nd belief, it is true, correct, and complete. Declaration of preparer (other than officer)  ******  Signature of officer  PAUL MEISSNER SVP/CFO	is based on all info	ormation o	
Unde know	22 rt III r penalt ledge a ledge.	ties of perjury, I declare that I have examined this return, including accompanying sch nd belief, it is true, correct, and complete. Declaration of preparer (other than officer)  ******  Signature of officer	is based on all info	ormation o	
Pal Under Know Know	22 rt III r penalt ledge a ledge.	******  Signature of officer  Preparer's L  Date  Declare that I have examined this return, including accompanying school belief, it is true, correct, and complete. Declaration of preparer (other than officer)  ******  Signature of officer  PAUL MEISSNER SVP/CFO Type or print name and title  Checker  Date  Checker  C	2012-11. Date  eck if Prep	-21 parer's taxpa	f which preparer has any
Pal Under Know Know	22 rt III r penalt ledge a ledge.	******  Signature of officer  PAUL MEISSNER SVP/CFO Type or print name and title  Preparer's signature  Date  Chesels  Date  Chesels  Ches	2012-11 Date  eck if Pref	-21	f which preparer has any
Inder Gnow Gnow Here	22 rt III r penalt ledge a ledge.	******  Signature of officer  PAUL MEISSNER SVP/CFO Type or print name and title  Preparer's signature  Date  Chesels  Date  Chesels  Ches	2012-11. Date  Preplayed Preplayed Proposed Prop	-21 -21 parer's taxpa	f which preparer has any

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . . . . .

OLATHE, KS 66061

Phone no 🕨 (913) 894-6214

Forn	n 990 (2011)				Pag
Pai		t of Program Service A edule O contains a response	ccomplishments to any question in this Part III		୮
1	Briefly describe the	e organization's mission			
<u>PRO</u>	VIDE LENDING, SA	VINGS, AND FINANCIAL SE	RVICES TO 38,650 MEMBERS	S FOR MUTUAL PURPOSE	
2	Did the organization the prior Form 990		ogram services during the year	which were not listed on	┌ Yes ┌ No
	If "Yes," describe th	nese new services on Schedul	e O		
3	Did the organization services?	n cease conducting, or make s	ignificant changes in how it coi	nducts, any program	┌ Yes ┌ No
	If "Yes," describe th	nese changes on Schedule O			
4	expenses Section	501(c)(3) and 501(c)(4) orga	omplishments for each of its thr nizations and section 4947(a)( es, and revenue, if any, for eac	(1) trusts are required to repo	•
	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	PROVIDE DEPOSIT SEF	RVICES TO 38,650 MEMBERS			,
4b	(Code	) (Expenses \$	ıncludıng grants of \$	) (Revenue \$	)
	PROVIDE LOAN SERVIO	CES TO 24,318 MEMBERS			
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	PROVIDE CHECKING A	ACCOUNT TRANSACTION AND PAYME	NT SERVICES AND ACCOUNT ACCESS	TO 19,667 MEMBERS	
4d	Other program ser	rvices (Describe in Schedule	0)		
	(Expenses \$	ıncludıng	grants of \$	) (Revenue \$	)

Total program service expenses►\$

Form 990 (	<u> </u>
Part 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," complete Schedule A	1	103	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		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 temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> " <i>Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	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.	11b		No
C	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.	11c		No
d	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.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
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 and IV.	15		No
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 and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

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		No
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	Yes	
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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) 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		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		_ 
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

	· · · ·
Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		-1	
			Yes	No
а	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 13,109			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	<b>1b</b> 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
_		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year <sup>7</sup>	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account or securities account)?	4a		Νo
L	·			INU
Ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
_	Was the organization a party to a prohibited tay shelter transaction at any time down the tay was 1	E-		NI a
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
D	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_		
		5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
ט	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	7a		
_	services provided to the payor?			
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			
е	Did the organization 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		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<del></del>		
y	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	_		
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
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			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
22	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	u		
ט	year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	13a		
	allocated to each state			
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C.	Enter the aggregate amount of reserves on hand			
-	13c			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
_	If "Vec " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schodule O	146		

**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 at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who 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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	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
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)		Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a	Yes	NO
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100	103	
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, 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		N o
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	04		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
	List the States with which a copy of this Form 990 is required to be filed▶			

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 made these available. Check all that apply

Own website Another's website V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made 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 organization PAUL MEISSNER
  650 S WESTDALE DR

WICHITA, KS 67209 (316) 265-3272

# 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

- ◆ 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, if any 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

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

◆ 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

(A) Name and Title	(B) Average hours per week (describe hours	Positi more unles an	<b>(</b> on (d e tha	C) o no n on son er a	t ch e bo ıs b nd a stee	eck x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	for related organizations in Schedule O)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	organizations
(1) PAUL SPACIL DIRECTOR/CHAIRMAN	2 00	х						0	0	0
(2) KAREN LOWERY DIRECTOR/VICE-CHAIRMAN	2 00	х						0	0	0
(3) STANLEY WINE DIRECTOR/TREASURER	1 00	х						0	0	0
(4) KENDALL JOHNSON DIRECTOR/SECRETARY	1 00	х						0	0	0
(5) DEAN LANG DIRECTOR	2 00	Х						0	0	0
(6) DAN KELLY DIRECTOR	6 00	х						0	0	0
(7) MARY KAY GLASNER DIRECTOR	2 00	х						0	0	0
(8) DAVID BLAKEMORE DIRECTOR	2 00	х						0	0	0
(9) CUSHMAN MILLER DIRECTOR	1 00	х						0	0	0
(10) ROBERT THURMAN CEO	50 00			Х				280,062	0	116,543
(11) PAUL MEISSNER SVP/CFO	50 00			Х				142,311	0	61,217
(12) FRANK SHOFFNER SVP-OPERATIONS	50 00			Х				154,752	0	58,712
(13) JANE HAMILL SVP-ADMINISTRATION	50 00			Х				136,025	0	34,652
(14) RICHARD LOGAN SVP/CIO	50 00			х				100,926	0	11,501

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (describe hours	unles an	on (d e thai	n one son er ai	e bo ıs bo nd a	x, oth		(C Repor comper from organiza 2/1099	table isation the tion (W-	(E) Reportable compensation from related organizations (W- 2/1099-	amou comp fro organi	ensa m th zatio	other ation ne on and
		for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)	orga	elate nizat	
1b	Sub-Total				•			<b>P</b>						
	Total from continuation sheets	•			•	•		<b>F</b>		814,076		0		282,625
d 2	Total (add lines 1b and 1c) .  Total number of individuals (inclusion),000 of reportable compens		nited to			• ted	<b>a</b> bove	<b>-</b>   ) who	received			<u>"</u>		202,023
3	Did the organization list any <b>forr</b> on line 1a? <i>If "Yes," complete Sch</i>				e, k	ey e	mploy •	ee, o	or highest (	compens	ated employee	<b>Y</b> €	s	No No
4	For any individual listed on line 1 organization and related organization individual											<b>4</b> Ye	s	
5	Did any person listed on line 1a services rendered to the organiz									nization d	r individual for •	5		No
1	Complete this table for your five \$100,000 of compensation from	highest comper the organizatio												
	or within the organization's tax y	(A) ne and business add	dress							Descr	(B) ription of services	Con	(C) npens	ation
	Total number of independent conti \$100,000 of compensation from t			ot lın	nited	to	those	liste	d above) w	ho receiv	ed more than			

rent v		Statement o	i kevenue					
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
<b>\$</b> \$	1a	Federated camp	paigns 1a					
호두	ь	Membership due	es					
ಕ್ಕ	c	Fundraising eve	ents 1c					
છે. ≝ે								
<u> </u>	d	Related organiz						
<u>∞</u> '≣	e	Government grants	(contributions) <b>1e</b>					
<u>5 ″</u>	f		ns, gifts, grants, and <b>1f</b>	j	į			
<u>¥</u> 2		similar amounts no						
<b>≣</b> ₹	g		butions included in					
Contributions, gifts, grants and other similar amounts	١.	lines 1a-1f \$		▶				
ပြဲက	h	iotai. Add lines	1a-1f	• • •				
œ.				Business Code				
Ę	2a	INTEREST ON LOAN	IS	522100	18,069,885	18,069,885		
e Ke	ь	FEES & OTHER CHA	ARGES	522100	3,182,718	3,182,718		
oυ Œ		VISA INTERCHANGE	_					
Š	c			522100	2,182,570	2,182,570		
Program Service Revenue	d	INSURANCE SALES		522100	1,214,464	1,150,798	63,666	
	e	RE ORIGINATION		522100	535,359	535,359		
	f	All other progra	m service revenue		495,802	366,460	129,342	
<del>ို</del>		T-1. 1 A 111	2- 26					
	g		2a-2f		25,680,798			
	3		ome (including dividen	. F		, <del></del>		
			ramounts)	F-	1,538,919	1,538,919		
	4	Income from invest	tment of tax-exempt bond	proceeds 🕨				
	5	Royalties		•	27,349	27,349		
			(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental						
	c	expenses Rental income						
		or (loss)						
	d	Net rental incom	ne or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	3,069,872	131,217				
		assets other						
	Ь	than inventory Less cost or	3,037,087	133,467				
	"	other basis and	3,031,007	133,107				
	_	sales expenses Gain or (loss)	32,785	-2,250				
	c	` ` L	,	·	20 525	20 525		
	d		s)		30,535	30,535		
۸.	8a	Gross income fr events (not incl						
≝		\$	duning					
<u>a</u>			reported on line 1c)					
é		See Part IV, line	e 18					
Other Revenue			a					
Ŧ	Ь	Less direct exp	oenses <b>b</b>					
ō	c	Net income or (	loss) from fundraising	events 🟲				
	9a		om gaming activities	Ī				
		See Part IV, line						
			а					
	b		penses b					
	С	Net income or (	loss) from gaming activ	vities				
	10a	Gross sales of i						
		returns and allo						
	_		<b>a</b>					
	b		ods sold b					
	С		loss) from sales of inve					
		Miscellaneous	Revenue	Business Code				
	11a	SERP INVESTM	1ENT GAINS	522100	8,786	8,786		
	b	OTHER NON-O	PER INCOME	522100	200	200		
	c							
	d	All other revenu	ie					
	e e	Total. Add lines						
		Total Add lines		▶	8,986			
	12	Total revenue	See Instructions					
		. Otal ICACIINCI			27,286,587	27,093,579	193,008	0

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Form 990 (2011) Page **10** 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) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 19,034 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members 54,125 Compensation of current officers, directors, trustees, and 1,096,701 key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 5,411,117 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . 315,360 Other employee benefits . . . . . . 658,459 458,311 10 Fees for services (non-employees) 11 Management . . . . . 17,816 Legal . . . . . . . . . . Accounting . . . . . . . . . . . . 331,931 Lobbying . . . . . . . . . . . . Professional fundraising See Part IV, line 17 . . Investment management fees . . . . . . g 152,467 674,157 Advertising and promotion . . . 12 Office expenses . . . . 650,733 13 1,833,390 14 Information technology . . . . . 15 Royalties . . 16 664,768 48,685 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials . . . . . . 19 Conferences, conventions, and meetings . . . . 168,036 431.275 20 21 Payments to affiliates . . . . 22 Depreciation, depletion, and amortization . . . . . 731,291 126,098 23 Other expenses Itemize expenses not covered above (List 24 miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) MEMBER DIVIDENDS 3,965,624 PROVISION FOR LOAN LOSS 1,842,007 LOAN SERVICING 1,574,331 NCUA SHARE INSURANCE 752,141 d

Part X **Balance Sheet** (A) (B) Beginning of year End of year 3,204,102 3,649,553 1 1 40.528.888 2 33.094.531 2 3 3 785.797 4 4 629.293 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 6 268,512,638 7 301,254,526 8 712,162 9 9 845.921 Prepaid expenses and deferred charges . . . . . . 14,074,170 Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10a 10b 5,455,370 b Less accumulated depreciation . . . . . 7,567,541 10c 8,618,800 28,999,293 11 33,040,545 11 1,208,083 2,101,272 12 12 Investments—other securities See Part IV, line 11 . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 13,175,534 15 11,029,821 15 364,694,038 16 394,264,262 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 4,882,117 17 6,216,782 17 Accounts payable and accrued expenses . 18 18 19 107,740 19 181,840 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 16,110,713 23 14,496,426 24 Unsecured notes and loans payable to unrelated third parties . . . . 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 300,996,295 25 325,352,894 D . . . . 26 322,096,865 26 346,247,942 **Total liabilities.** Add lines 17 through 25 . . . . . Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 Balances through 29, and lines 33 and 34. 27 27 Unrestricted net assets . . . . 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 0 0 30 Capital stock or trust principal, or current funds . . . . . . . . . 30 Assets 0 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 42,597,173 48,016,320 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 42.597.173 33 48.016.320 Total net assets or fund balances . . . . . 34 Total liabilities and net assets/fund balances . . . . . 364.694.038 34 394, 264, 262

Par	Check if Schedule O contains a response to any question in this Part XI			. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		27.2	286,587
2	Total expenses (must equal Part IX, column (A), line 25)	2			264,349
3	Revenue less expenses Subtract line 2 from line 1	3			022,238
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		42,5	597,173
5	Other changes in net assets or fund balances (explain in Schedule O)	5		3	396,909
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		48,0	016,320
Par	T XII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990			Yes	No
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	
С	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of 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 in a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

# **Additional Data**

Software ID: Software Version:

**EIN:** 48-0477295

Name: CREDIT UNION OF AMERICA

# Form 990, Special Condition Description:

**Special Condition Description** 

DLN: 93493326001292

OMB No 1545-0047

# 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.

**Political Campaign and Lobbying Activities** 

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

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, 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

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
CREDIT UNION OF AMERICA	
	48-0477295

Part I-A	Complete if the org	ganization is exem	pt under section 5	01(c	) or is a section	า 527 organization
----------	---------------------	--------------------	--------------------	------	-------------------	--------------------

- Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV 2 Political expenditures
- 3 Volunteer hours

### Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? Yes

b If "Yes," describe in Part IV

### Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3)

- Enter the amount directly expended by the filing organization for section 527 exempt function activities 100 1
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 100
- Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing
- organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) KANSAS CREDIT UNION PAC	2872 N RIDGE ROAD SUITE 122 WICHITA,KS 67205	48-0288307	100	

**f** Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.)  Lia Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures to influence a legislative body (direct lobbying)  c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000  g Grassroots nontaxable amount (enter 25% of line 1f)  Subtract line 1g from line 1a If zero or less, enter -0-  i Subtract line 1f from line 1c If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ ) 2 0 1 1					Page <b>∠</b>
A Check   If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures)    Check   If the filing organization checked box A and "limited control" provisions apply    Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)   Organization Total Incurred (The term "expenditures" means amounts paid or incurred.)   Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(	c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures)  Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying)  Lobbying expenditures to influence a legislative body (direct lobbying)  Total lobbying expenditures (add lines 1a and 1b)  Other exempt purpose expenditures  Total obtaining purpose expenditures (add lines 1c and 1d)  Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  If the amount on line 1e, column (a) or (b) is:  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  S1,000,000 but not over \$1,500,000  S1,000 but not over \$1,500,	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  Total lobbying expenditures to influence public opinion (grass roots lobbying)  Total lobbying expenditures (add lines 1 aand 1b)  Other exempt purpose expenditures (add lines 1 aand 1b)  Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line Le, column (a) or (b) is:  If the amount on line Le, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S10,000,000  Over \$1,000,000 but not over \$1,000,000  S10,000,000  Fig. Soon over \$1,000,000  Fig. Soon ov			expenses, and share of excess lob	bying expenditures)		_	•	
Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures to influence a legislative body (direct lobbying)  c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$	3	Check	ıf the filing organization checked bo	ox A and "limited contro	ol" provisions app	ly	1	1
(The term "expenditures" means amounts paid or incurred.)  Ital Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1225,000 plus 10% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S1225,000 plus 10% of the excess over \$1,500,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,500,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,500,000  Over \$1,000,000 but not over \$1,000,000  S1200,000 plus 10% of the excess over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1200,000 plus 10% of the excess over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1200,000 plus 10% of the excess over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1200,000 plus 10% of the excess over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1200,000 plus 10% of the excess over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  S1200,000 plus 10% of the excess over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1200,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S1200,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,0			Limits on Lobbying	Expenditures			(a) Filing	(b) Affiliated
Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is: Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S175,000 plus 15% of the excess over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S100,000 plus 15% of the excess over \$1,000,000  Over \$1,000,000  Over \$1,000,000  Over \$1,000,000  The lobbying nontaxable amount is:  Not over \$500,000  Over \$1,000,000  Over \$1,000,00					l.)		Organization's Totals	Group Totals
b Total lobbying expenditures to influence a legislative body (direct lobbying)  c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is: Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,7000,000  Over \$1,000,000 but not over \$1,7000,000  S225,000 plus 15% of the excess over \$1,000,000  Over \$1,7000,000  Over \$1,7000,000  F17,000,000  S225,000 plus 5% of the excess over \$1,500,000  Over \$1,7000,000  F17,000,000  F17,000		<b>-</b>			1 \		100013	1 ocars
c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  In the excess over \$1,000,000  F1,000,000  F1,000,0				· -				
d O ther exempt purpose expenditures  Total exempt purpose expenditures (add lines 1c and 1d)  Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000					ying)			
Total exempt purpose expenditures (add lines 1c and 1d)    Lobbying nontaxable amount Enter the amount from the following table in both columns   If the amount on line 1e, column (a) or (b) is:			,					
f Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$17,000,000 but not over \$1,7000,000  Over \$17,000,000 but not over \$17,000,000  S225,000 plus 10% of the excess over \$1,000,000  Over \$17,000,000  Over \$17,000,000  Over \$17,000,000  S225,000 plus 5% of the excess over \$1,000,000  Over \$17,000,000  Over \$17,000,000  S1,000,000  S1,000,0	d	Otherexe	empt purpose expenditures					
Columns  If the amount on line 1e, column (a) or (b) is: Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$500,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,7000,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,000,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000  Over \$1,500,000  S1,000,000	e	Total exe	mpt purpose expenditures (add lines 1	.c and 1d)				
Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,7000,000  Over \$1,500,000 but not over \$1,7000,000  Over \$1,500,000 but not over \$1,000,000  Over \$1,500,000 but not over \$1,000,000  S225,000 plus 5% of the excess over \$1,500,000  Over \$17,000,000  S1,000,000  Grassroots nontaxable amount (enter 25% of line 1f)  Subtract line 1g from line 1a If zero or less, enter -0-  Subtract line 1f from line 1c If zero or less, enter -0-  If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008  (b) 2009  (c) 2010  (d) 20  Lobbying celling amount	f		nontaxable amount Enter the amount	from the following table	in both			
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,000,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,00		If the an	ount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  Section \$225,000 plus 5% of the excess over \$1,500,000  Over \$17,000,000  g Grassroots nontaxable amount (enter 25% of line 1f)  h Subtract line 1g from line 1a If zero or less, enter -0-  i Subtract line 1ffrom line 1c If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008  (b) 2009  (c) 2010  (d) 20  2a Lobbying ceiling amount		Not over \$5	500,000	20% of the amount on lii	ne 1e			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,00		Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20  Lobbying celling amount		Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20  Lobbying non-taxable amount		Over \$1,50	0,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000		
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Over \$17,0	00,000	\$1,000,000				
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount								
i Subtract line 1f from line 1c If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008  (b) 2009  (c) 2010  (d) 20  Lobbying non-taxable amount		Grassroo	ts nontaxable amount (enter 25% of li	ne 1f)				
i Subtract line 1f from line 1c If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008  (b) 2009  (c) 2010  (d) 20  Lobbying non-taxable amount	h	Subtract	line 1a from line 1a If zero or less. en	ter -0 -				
Jection 4911 tax for this year?  4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008  (b) 2009  (c) 2010  (d) 20  Lobbying ceiling amount								
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20  Lobbying non-taxable amount					organization file	Form 4720 re	portina	
(Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20  Lobbying non-taxable amount							F - 1 - 1 - 1 - 1	┌ Yes ┌ No
Calendar year (or fiscal year beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 2009  Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in)  (a) 2008 (b) 2009 (c) 2010 (d) 20  2a Lobbying non-taxable amount  b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
<b>b</b> Lobbying ceiling amount				(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

nedule C (F	omi 990 or 990-E2) 2011		Page
Part II-B	Complete if the organization is exempt under section $501(c)(3)$ and has (election under section $501(h)$ ).	NOT filed F	orm 5768
		(a)	(b)

		Yes	No	Amount
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?			
е	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 1i			
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$ ?			

d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

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

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

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".

	Dues, assessments and similar amounts from members	+	
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

**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

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

Identifier	Return Reference	Explanation
ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES	l '	\$100 CONTRIBUTION TO THE KANSAS CREDIT UNION POLITICAL ACTION COMMITTEE (PAC)

DLN: 93493326001292

OMB No 1545-0047

**SCHEDULE D** (Form 990) **Supplemental Financial Statements** 

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	me of the organization EDIT UNION OF AMERICA	·	Employer identification number
CINI			48-0477295
Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99	0, Part IV, line 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advifunds are the organization's property, subject to the	<u> </u>	or advised <b>Yes No</b>
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		·
Pa	rt II Conservation Easements. Complete	if the organization answered "Yes" t	
2	Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreated Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	on or pleasure) Preservation of an Preservation of a G	certified historic structure
	easement on the last day of the tax year		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	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, transfe	erred, released, extinguished, or terminate	ed by the organization during
4	Number of states where property subject to conserve	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	
6	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	nents during the year 🗕
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easement:	s during the year
8	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2 (d) above satisfy the requirements of sec	TYes No
9	In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easer	the footnote to the organization's financial	
Par	**TIII Organizations Maintaining Collection Complete If the organization answered	ons of Art, Historical Treasures,	or Other Similar 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 fir	116, not to report in its revenue stateme for public exhibition, education or researc	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research i	
	(i) Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$
	(ii) Assets included in Form 990, Part X		<b>►</b> \$
2	If the organization received or held works of art, hist following amounts required to be reported under SFA		
а	Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$

**b** Assets included in Form 990, Part X

	<b>III</b> Organizations Maintaining Co	<u>llections of Art</u>	t, His	<u>stori</u>	cal Tre	<u>asu</u>	res, or Oth	<u>er Similar</u>	Asse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	records, check an	y of th	he foll	owing tha	at are	e a significant	use of its co	llection	ı	
а	Public exhibition		d	Γ	Loan or	exch	nange program	S			
b	Scholarly research		е	Γ	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and expla	ain hov	w the	/ further t	the o	rganızatıon's e	exempt purpo	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							mılar	Г	Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answered "	Yes" to For	m 990	),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	edıary	for c	ontributio	ons o	r other assets	not	Г	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving ta	able			T	Amou	ınt	
С	Beginning balance						1c		7,11104		
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f	+			
2a	Did the organization include an amount on Fo	orm 990 Part X lin	e 212	,						Yes	┌ No
	If "Yes," explain the arrangement in Part XIV								'		, 110
	t V Endowment Funds. Complete		n ans	were	ed "Yes"	to F	orm 990 Pa	rt IV line	10		
	Eliaovillolle i aliabi complete i	(a)Current Year		)Prior `				Three Years B		Four Ye	ears Back
1a	Beginning of year balance										
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as								
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
c	Term endowment ▶										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that a	are held a	nd a	dmınıstered fo	r the		Yes	No
	(i) unrelated organizations							[	3a(i)		
_	(ii) related organizations								3a(ii)		
	If "Yes" to 3a(II), are the related organizatio	•						[	3b		<u> </u>
4	Describe in Part XIV the intended uses of th										
Pař	t VI Land, Buildings, and Equipme	nt. See Form 99	9U, Pā					T	<u> </u>		
	Description of property				Cost or ot		( <b>b</b> )Cost or other basis (other)	(c) Accumu depreciat		( <b>d</b> ) Bo	ok value
	and		•				2,079,042	2			2,079,042
b E	Buildings		•				6,642,46	5 1,5	58,137		5,084,328
	easehold improvements						146,902	2   14	16,521		381
c l							,	_			
	Equipment						5,205,76		50,712		1,455,049
d E							5,205,76		50,712		

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		13. (c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	
(a) Descrip	otion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X	, line 25.	
1 (a) Description of Liability	( <b>b)</b> A mount	
Federal Income Taxes		
MEMBER SHARE DEPOSITS	324,570,900	
ACCRUED DIVIDENDS PAYABLE	7,070	
ACCRUED LIABILITY - DEFERRED COMPENSATION	774 024	
PLAN	774,924	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	325,352,894	

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	27,286,587
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	22,264,349
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	5,022,238
4	Net unrealized gains (losses) on investments	4	396,909
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	396,909
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	5,419,147
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial statements	1	27,271,587
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d -15,000		
e	Add lines <b>2a</b> through <b>2d</b>	2e	-15,000
3	Subtract line <b>2e</b> from line <b>1</b>	3	27,286,587
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	C
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	27,286,587
	<b>TXIII</b> Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Re	
1	Total expenses and losses per audited financial statements	1	22,249,349
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines <b>2a</b> through <b>2d</b>	2e	C
3	Subtract line <b>2e</b> from line <b>1</b>	3	22,249,349
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	]	
b	Other (Describe in Part XIV) 4b 15,000		
c	Add lines <b>4a</b> and <b>4b</b>	4c	15,000
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	22,264,349

# Part XIV Supplemental Information

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE CREDIT UNION IS EXEMPT, UNDER IRC 501(C)(14), FROM FEDERAL AND STATE INCOME TAXES CERTAIN PRODUCTS AND SERVICES PROVIDED BY SELECT STATE CHARTERED CREDIT UNIONS HAVE BEEN DEEMED BY THE INTERNAL REVENUE SERVICE (IRS), IN TECHNICAL ADVICE MEMORANDUMS (TAMS) RELEASED IN 2007, TO BE UNRELATED TO THE SPECIFIC ENTITY'S EXEMPT PURPOSE AS PRESENTED IN THE TECHNICAL ADVICE MEMORANDUMS THE NET TAXABLE INCOME FROM THESE PRODUCTS AND SERVICES WOULD BE SUBJECT TO INCOME TAXES CREDIT UNIONS HAVE LITIGATED AGAINST THE IRS POSITIONS NOTED IN THE TAMS AND HAVE BEEN SUCCESSFUL IN HAVING COURTS DECLARE IN 2009 AND 2010 THAT REVENUE FROM INSURANCE PRODUCTS SOLD TO MEMBERS, HELPING THEM PROTECT THEIR FINANCIAL WELLBEING, QUALIFIES AS EXEMPT PURPOSE INCOME, CONTRARY TO THE IRS POSITION IN THE TAMS REVENUE FROM PROVIDING INVESTMENT SERVICES TO MEMBERS WAS ALSO RULED TO QUALIFY AS EXEMPT PURPOSE INCOME THE CREDIT UNION HAS FILLE TAX RETURNS FOR THE TAX YEARS 2007 THROUGH 2009 FOR ACTIVITIES THEY HAVE DEEMED TAXABLE THE CREDIT UNION PAID FEDERAL INCOME TAXES OF \$77,683 AND \$91,846 FOR TAX YEARS 2007 AND 2008, RESPECTIVELY, AND KANSAS INCOME TAXES OF \$77,683 AND \$91,846 FOR TAX YEARS 2007 AND 2008 DURING 2011, AND EXPECTS TO RECEIVE FULL REFUNDS OF FEDERAL AND KANSAS INCOME TAXES OF \$16,122 AND \$19,365, RESPECTIVELY THE CREDIT UNION FILED AMENDED TAX RETURNS FOR THE TRAY YEARS FOR THOSE TWO YEARS THE CREDIT UNION HAS NOT RECORDED ANY TAX BENEFIT THAT MAY RESULT FROM FILLING THE AMENDED FOR STATES, PENALTIES, AND INTEREST FOR ANY YEARS FOR WHICH NO TAX RETURN WAS FILED IN THE OPINION OF MANAGEMENT, ANY LIABILITY RESULTING FROM TAXING AUTHORITIES HAVE THE ABILITY TO ASSESS TAXES, PENALTIES, AND INTEREST FOR ANY YEARS FOR WHICH NO TAX RETURN WAS FILED IN THE OPINION OF MANAGEMENT, ANY LIABILITY RESULTING FROM TAXING AUTHORITIES, MOOT EXPECTED TO HAVE A MATERIAL EFFECT ON THE CREDIT UNION'S FINANCIAL POSITIONS AND DETERMINED NO UNCERTAIN TAX POSITIONS AND DETERMINED NO UNCERTAIN TAX POSITIONS AND DETERMINED NO UNCERTAIN TAX POSITIONS AN
PART XII, LINE 2D - OTHER ADJUSTMENTS		AUTHORITIES  A NON-OPERATING LOSS OF \$15,000 DEDUCTIBLE ON INSURABLE LOSS WAS GROUPED WITH NON-OPERATING GAINS IN THE AUDITED FINANCIAL STATEMENTS, BUT WAS REPORTED IN FORM 990, PART IX, LINE 24E AS ALL
PART XIII, LINE 4B - OTHER ADJUSTMENTS		OTHER EXPENSES -15,000  A NON-OPERATING LOSS OF \$15,000 DEDUCTIBLE ON INSURABLE LOSS WAS GROUPED 15,000 WITH NON-OPERATING GAINS IN THE AUDITED FINANCIAL STATEMENTS, BUT WAS REPORTED IN FORM 990, PART IX,

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(Form 990)

Department of the Treasury

Schedule I

**Grants and Other Assistance to Organizations,** Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

OMB No 1545-0047

DLN: 93493326001292

Inspection Internal Revenue Service Name of the organization Employer identification number CREDIT UNION OF AMERICA 48-0477295 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash ıf applicable (book, FMV, or government assistance appraisal, other) 

Schedule I	(Form 990) 2011
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 23
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS FOR NURSING STUDENTS	11	2,315			
(2) TGIF TEACHER CLASSROOM GRANT PROGRAM	30	11,719			
(3) SCHOLARSHIPS FOR COLLEGE STUDENTS	8	5,000			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 AMOUNTS FOR NURSING SCHOLARSHIPS WERE DISBURSED DIRECTLY TO THE
MONITORING GRANTS		NURSING SCHOOL FOR BENEFIT OF THE RECIPIENT MOST TGIF TEACHER CLASSROOM GRANTS ARE PUBLICLY
IN THE U S		PRESENTED AND ARE AWARDED FOR A SPECIFIC PURPOSE DETAILED IN THEIR APPLICATION, SO TEACHER,
		PARENT, AND STUDENT AWARENESS OF THE GRANT HELPS ENSURE IT IS USED FOR THE INTENDED PURPOSE, BUT
		THERE IS NO EXPLICIT POST-AWARD MONITORING COLLEGE SCHOLARSHIPS ARE DISBURSED DIRECTLY TO THE
		STUDENT, SUPPORTED BY A LETTER OF ADMISSION OR OTHER ENROLLMENT DOCUMENTS FROM THE COLLEGE

Schedule I (Form 990) 2011

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DLN: 93493326001292

OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury Internal Revenue Service

# **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

•								
Name of the organization CREDIT UNION OF AMERICA	Employer identification number							
	48-0477295							
Part I Questions Regarding Compensation								
		Yes	No					

			_		Yes	Νo		
1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to							
	First-class or charter travel	$\Gamma$	Housing allowance or residence for personal use					
	Travel for companions	$\sqcap$	Payments for business use of personal residence					
	Tax idemnification and gross-up payments	$\sqcap$	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 organ reimbursement orprovision of all the expenses describe			1b				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?							
3	Indicate which, if any, of the following the organization to organization's CEO/Executive Director Check all that	appl	y					
	Compensation committee		Written employment contract					
	Independent compensation consultant	<u> </u>	Compensation survey or study					
	Form 990 of other organizations	<b>V</b>	Approval by the board or compensation committee					
4	During the year, did any person listed in Form 990, Partor a related organization	t VII	, Section A, line 1a with respect to the filing organization					
а	Receive a severance payment or change-of-control pay	men	t?	4a		Νo		
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?							
c	c Participate in, or receive payment from, an equity-based compensation arrangement?							
	If "Yes" to any of lines 4a-c, list the persons and provide	de th	e applicable amounts for each item in Part III					
	Only 501(c)(3) and 501(c)(4) organizations only must o	comp	plete lines 5-9.					
5	For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of	1a,	did the organization pay or accrue any					
а	The organization?			5a				
b	Any related organization?			5b				
	If "Yes," to line 5a or 5b, describe in Part III		Ī					
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	≥ 1a,	did the organization pay or accrue any					
а	The organization?			6a				
b	Any related organization?			6b				
	If "Yes," to line 6a or 6b, describe in Part III							
7	For persons listed in Form 990, Part VII, Section A, lin payments not described in lines 5 and 6? If "Yes," desc			7				
8	Were any amounts reported in Form 990, Part VII, paid subject to the initial contract exception described in Rein Part III			8				
9	If "Yes" to line 8, did the organization also follow the resection 53 $4958-6(c)$ ?	butt	able presumption procedure described in Regulations	9				

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

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

Note. The sum of columns (B)(1)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) ROBERT THURMAN (I)	229,008 0	47,880 0	3,174 0	106,340 0	10,203 0	396,605 0	0
(2) PAUL MEISSNER (1)	125,855 0	15,815 0	641 0	51,082 0	10,135 0	203,528 0	0
(3) FRANK SHOFFNER (1)	137,055 0	17,472 0	225 0	48,577 0	10,135 0	213,464 0	0
(4) JANE HAMILL (I)	121,374 0	14,651 0	0 0	24,517 0	10,135 0	170,677 0	0 0

# Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	3	THE BOARD OF DIRECTORS ENGAGES AN INDEPENDENT COMPENSATION CONSULTANT TO PERFORM AN ANNUAL COMPENSATION SURVEY THE BOARD APPROVES CEO COMPENSATION ANNUALLY BASED ON THE COMPENSATION SURVEY BY THE CONSULTANT, WITHIN THE TERMS OF A WRITTEN EMPLOYMENT CONTRACT AND BASED ON PRE-ESTABLISHED PERFORMANCE TARGETS
	4B ,	THE FOLLOWING OFFICERS PARTICIPATED IN A 457(F) DEFERRED COMPENSATION PLAN (PARTICIPANT, AMOUNT OF 2011 ACCRUAL, AMOUNT PAID IN 2011) PAUL MEISSNER - \$24,519 ACCRUAL, \$0 PAYOUT FRANK SHOFFNER - \$18,911 ACCRUAL, \$0 PAYOUT THE FOLLOWING OFFICERS PARTICIPATED IN A LONG-TERM INCENTIVE PLAN (PARTICIPANT, AMOUNT OF 2011 ACCRUAL, AMOUNT PAID IN 2011) ROBERT THURMAN - \$86,079 ACCRUAL, \$0 PAYOUT PAUL MEISSNER - \$16,494 ACCRUAL, \$0 PAYOUT FRANK SHOFFNER - \$18,652 ACCRUAL, \$0 PAYOUT JANE HAMILL - \$14,775 ACCRUAL, \$0 PAYOUT

Schedule J (Form 990) 2011

# SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Name of the organization CREDIT UNION OF AMERICA

**Employer identification number** 

48-0477295

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	AS A STATE-CHARTERED CREDIT UNION, WE HAVE MEMBERS BECAUSE A CREDIT UNION IS A MEMBER-BASED ORGANIZATION
	FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERSHIP ELECTS ALL DIRECTORS TO THE BOARD OF DIRECTORS WITH STAGGERED 3-YEAR TERMS AS PART OF OUR ANNUAL ELECTION PROCESS
	FORM 990, PART VI, SECTION A, LINE 7B	THE MEMBERSHIP HAS RIGHTS, AS SPECIFIED IN BY LAWS AND APPLICABLE STATE LAWS, TO REVIEW AND APPROVE CERTAIN TYPES OF BOARD ACTIONS OR PROPOSALS
	FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE FORM 990 WAS DISTRIBUTED TO THE BOARD VIA AN ONLINE DIRECTORS DOCUMENT SYSTEM PRIOR TO FILING OF THE RETURN, AND IS SCHEDULED FOR FURTHER REVIEW AT THE DECEMBER 2012 BOARD MEETING THE FORM 990 IS PREPARED BY OUR CFO AND AN INTERNAL FINANCIAL ANALYST, AND IS REVIEWED BY THE CEO PRIOR TO THE RETURN BEING SUBMITTED TO A CPA FIRM FOR FINAL PROOFING, REVIEW, AND FILING
	FORM 990, PART VI, SECTION B, LINE 12C	DIRECTORS COMPLETE AND SIGN A DUE DILIGENCE QUESTIONNAIRE ANNUALLY, WHICH INCLUDES DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST ALL EMPLOYEES, INCLUDING THE CEO AND OFFICERS, COMPLETE AN ANNUAL CONFLICT OF INTEREST DISCLOSURE, AS WELL AS DISCLOSURE OF ANY OFFERS OF GIFTS OR OTHER FINANCIAL INTEREST TO SEEK INAPPROPRIATE INFLUENCE. THERE IS A FOLLOW-UP REVIEW BY OUR INTERNAL AUDITOR TO ENSURE ALL EMPLOYEES SUBMIT A COMPLETED DISCLOSURE. FAMILY MEMBER ACCOUNTS ARE ALSO DOCUMENTED IN THIS PROCESS, AND ENTERED INTO THE CORE DATA SYSTEM TO PREVENT ACCESS TO RELATED ACCOUNTS
	FORM 990, PART VI, SECTION B, LINE 15	AN EXTERNAL COMPENSATION CONSULTANT PROVIDES UPDATED COMPARATIVE COMPENSATION INFORMATION ANNUALLY THIS DATA IS USED TO UPDATE MIDPOINT COMPENSATION FOR ALL JOB GRADES THE CONSULTANT'S INFORMATION IS PROVIDED TO THE EXECUTIVE COMMITTEE OF THE BOARD, WHICH SETS CEO COMPENSATION IN FORMAL MEETINGS FOR WHICH MINUTES ARE KEPT THE BOARD APPROVES CHANGES IN THE PERCENT CHANGES FOR MIDPOINT COMPENSATION FOR ALL OTHER POSITIONS THE CEO OPERATES WITHIN THE APPROVED GRADE AND MIDPOINT STRUCTURE AND BOARD-APPROVED BUDGET IN APPROVING COMPENSATION FOR OTHER OFFICERS THIS PROCESS APPLIED TO THE CEO AND ALL OFFICERS FOR 2011
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS AND POLICIES, INCLUDING CONFLICT OF INTEREST POLICY, ARE AVAILABLE FOR INSPECTION AT OUR CORPORATE OFFICE CERTAIN DOCUMENTS WITH PROPRIETARY INFORMATION, OR CONTAINING PERSONAL INFORMATION OF MEMBERS, ARE NOT MADE AVAILABLE FINANCIAL STATEMENTS ARE POSTED IN OUR OFFICE LOBBIES, AND ANNUAL FINANCIAL STATEMENTS ARE DISTRIBUTED AT THE ANNUAL MEMBERSHIP MEETING IN ADDITION, THE NCUA WEBSITE POSTS DETAILED FINANCIAL INFORMATION AS PART OF THE QUARTERLY CALL REPORT PROCESS
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 396,909

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**Depreciation and Amortization** 

(Including Information on Listed Property)

DLN: 93493326001292

OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99)	Attachment Sequence No <b>179</b>						
Name(s) shown on return CREDIT UNION OF AME	DICA	Busine	ss or activity to w	vhich this form	relates	Id	lentifying number
CREDIT UNION OF AME	RICA	FORM	990 PAGE 10			4 8	3-0477295
	•	Certain Property (					
		sted property, comp	olete Part V befo	ore you com	plete Part 1.		F00 000
1 Maximum amount (see	•					1	500,000
2 Total cost of section 1		•	•			2	2 2 2 2 2 2 2
3 Threshold cost of sect			•	uctions) .		3	2,000,000
4 Reduction in limitation			•			4	
<b>5</b> Dollar limitation for tag	•	line 4 from line 1 If ze	ro or less, enter -(	0- If married	filing		
separately, see instru	ctions					5	
6 (a)	Description of pr	operty	(b) Cost (bu	usiness use ly)	(c) Elected c	ost	
<b>7</b> Listed property Enter	the amount from	line 29		. 7			
8 Total elected cost of s	ection 179 prop	erty Add amounts in c	olumn (c), lınes 6	and 7 .		8	
<b>9</b> Tentative deduction E	nter the <b>smaller</b>	of line 5 or line 8 .				. 9	
10 Carryover of disallowe	d deduction from	line 13 of your 2010 I	Form 4562 .			10	
11 Business income limitation	Enter the smaller of	business income (not less t	han zero) or line 5 (se	ee instructions)		11	
12 Section 179 expense	deduction Add li	ines 9 and 10, but do n	ot enter more tha	n line 11 •		12	
13 Carryover of disallowe	d deduction to 2	012 Add lines 9 and 1	0, less line 12	. 13			
Note: Do not use Part	II or Part III b	pelow for listed prop	erty. Instead, u	ise Part V.			
Part II Special D	epreciation A	Allowance and Oth	er Depreciati	on (Do not	ınclude lısted p	roperty	() (See instructions )
<b>14</b> Special depreciation a tax year (see instructi		lified property (other th	an listed property	) placed in se	rvice during the	14	
15 Property subject to se		election				15	
<b>16</b> Other depreciation (in						16	
		Oo not include listed	d property.) (Se	ee instruction	ns.)		
			Section A		,		
17 MACRS deductions for	rassets placed ı	n service in tax years l	beginning before 2	2011		17	731,291
18 If you are electing	to group any a	ssets placed in serv	rice during the t	ax year ınto	one or more		
general asset accou	•				▶□	<u> </u>	
Section B—Ass	ets Placed in	Service During 2	011 Tax Year	Using the	General Dep	recia	tion System
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investmen use only—see instructions	period	(e) Convent	on <b>(f)</b> Metho	bc	(g)Depreciation deduction
<b>19a</b> 3-year property		,	,				
<b>b</b> 5-year property							
<b>c</b> 7-year property							
<b>d</b> 10-year property						$\longrightarrow$	
e 15-year property						$\rightarrow$	
f 20-year property	_		3.E. v.mo		C /I	$\dashv$	
g 25-year property  h Residential rental			25 yrs 27 5 yrs	MM	S/L S/L	$\rightarrow$	
property			27 5 yrs	мм	S/L	$\rightarrow$	
i Nonresidential real			39 yrs	ММ	S/L		
property			,	ММ	S/L		
Section	on C—Assets Plac	ced in Service During 20	011 Tax Year Usin	g the Alternat	ive Depreciatio	n Syste	em
<b>20a</b> Class life					S/L		
<b>b</b> 12-year			12 yrs		S/L	$\longrightarrow$	
c 40-year	<u> </u>	h.a.a.\	40 yrs	MM	S/L		
	r <b>y</b> (see instruc	•					
21 Listed property Enter			0 4 2 2 2			21	
	lines of your ret	urn Partnerships and	S corporations—se	ee instructions		22	731,291
23 For assets shown above portion of the basis at			ent year, enter the	e <b>23</b>			

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other I	nforma	tion (C	aution	: See i	the i	instruc	tions	for li	mits 1	or pa	sseng	er au	tomoŁ	iles.)
<b>24a</b> Do you have evider	nce to support	the business/inv	estment ι	ise claime	d? ┌ Yes	. Г <sub>No</sub>		2	<b>4b</b> If "\	∕es," ıs	the ev	ıdence	written?	Гүе	sГN	)
(a) Type of property (list vehicles first)	ype of property (list Date placed in Investment Cost or		r other / basis for depreciation /			<b>(f)</b> Recover period	y M∈	(g) / Method/ Convention		(h) Depreciation/ deduction		(i) Elected section 179 cost		179		
<b>25</b> Special depreciation allo 50% in a qualified busi	· · · · · · · · · · · · · · · · · · ·		erty placed	in service (	during the	tax year	and u	used moi	e than	25						
<b>26</b> Property used more	e than 50%	ın a qualıfıed	business	use												
		%									+			-		
		%									+			+		
<b>27</b> Property used 50%	orless in a		iness us	e										_		
		%							S/L - S/L -		_			4		
		%							S/L -							
28 Add amounts in co	olumn (h), lır	nes 25 throug	ıh 27 En	ter here a	and on lu	ne 21, <sub>l</sub>	oage	1 .	28	8						
29 Add amounts in co	olumn (ı), lın	e 26 Enterh	ere and c	n line 7,	page 1					•		29				
			ction B													
Complete this section If you provided vehicles to														se vehic	les	
					a)	(1		1	(c)		(c			2)		f)
year (do not inclu-			_	Vehi	cle 1	Vehi	cle 2	. V	ehicle	3	Vehi	cle 4	Vehi	cle 5	Vehi	icle 6
<b>31</b> Total commuting i	mıles drıven	during the ye	ar .													
32 Total other persor	nal(noncomm	nuting) miles	drıven													
33 Total miles driven through 32	during the y		s 30													
34 Was the vehicle a	vaılable for p	ersonal use		Yes	No	Yes	No	Ye	s 1	No.	Yes	No	Yes	No	Yes	No
during off-duty ho	urs? .															
<b>35</b> Was the vehicle us owner or related p		y by a more th	nan 5%													
<b>36</b> Is another vehicle			e? .													
Section	on C—Que	stions for	Emplo	ers W	ho Pro	vide \	/ehi	icles	or U	se by	/ The	ir En	nploy	ees	ı	
Answer these questio 5% owners or related				eption to	comple	ting Se	ction	B for v	ehicle	s use	d by e	mploy	ees wh	o are	not mo	re tha
<b>37</b> Do you maintain a employees? .		cy statement											our •	<u> </u>	es	No
<b>38</b> Do you maintain a	written polic	cy statement	that prof	nibits per	sonal us	e of vel	nicle	s, exce	pt con	nmutır	ng, by					
employees? See t						ers, dire	ector	s, or 1	% or m	nore o	wners		• •	-	-+	
<b>39</b> Do you treat all us						•	٠. ٠	•	• .	•	. •		•	-		
<b>40</b> Do you provide movehicles, and reta				oyees, ol	btain info	ormatio •	n froi	m your •    •	emplo •	yees .	about •	the us	e of the	e		
<b>41</b> Do you meet the r	equirements	concerning	qualified a	automobi	le demor	nstratio	n us	e? (See	ınstrı	uction	s)					
<b>Note:</b> If your answ	ver to 37, 38	, 39, 40, or 4	1 is "Ye	s," do no	t comple	te Sect	ion E	3 for the	cove	red ve	hicles	5				
Part VI Amo	rtization															
(a) Description of c	(b) Date						(d) Code section		period		(e) nortization period or ercentage		A moi		on for ar	
<b>42</b> A mortization of co	sts that her		ur 2011	tax vear	(see ins	truction	ns )		<u> </u>	3.3011	30					
		, ==,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	,	,	1	,									
						-+			$\dashv$							
43 Amortization of co	sts that beg	jan before you	ur 2011 t	ax year		-			•		43					
44 Total. Add amoun	_	•		•	ere to re	port				Ì	44					