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DLN: 93493220012622

Form **990** 

Department of the Treasury Internal Revenue Service

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

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

2011

OMB No 1545-0047

2011

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

Open to Public Inspection

Δ Fo	r the	2011 ca	ılendar year, or tax year beginning 01	-01-2011 and ending 12-31-201	1					
			C Name of organization	VI 2011 and ending 12 31 201		D Employer id	dentification number			
_	еск ітаі dress ch	pplicable iange	RED ROCKS CREDIT UNION			84-08088	89			
_		_	Doing Business As			E Telephone				
_	me chai					(303)471	-7625			
Init —	tial retui	rn	Number and street (or P O box if mail is	not delivered to street address) Room/s	uıte		s \$ 15,770,864			
Ter	mınate	d	9325 DORCHESTER STREET STE 200			- orosa receipt	<del></del>			
– <sub>Am</sub>	ended	return	City or town, state or country, and ZIP +	4						
– <sub>App</sub>	olication	pending	HIGHLANDS RANCH, CO 80129							
			<b>F</b> Name and address of principa	officer	H(a) I - th		<b>6</b>			
			PATRICK T AHERN		affilia	s a group retu tes?	TYes ▼ No			
			9325 DORCHESTER STREET ST				,,			
			HIGHLANDS RANCH,CO 8012	9	1 ' '	l affiliates inclu	·			
· Ta	v-evem	npt status	501(c)(3)	t no )		•	t (see instructions)			
. 10	x-cxciii	ipt status	) 501(c)(3)   501(c) (14) - (iiise	1 10 )   4947(a)(1) 01   527	H(c) Grou	p exemption r	iumber 🟲			
W	ebsite	e:⊨ ww	w redrocks org							
<b>(</b> Forr	n of org	ganization	Corporation Trust Association	Other ►	L Year of for	mation 1979	M State of legal domicile CO			
Pa	rt I	Sum	mary		·		-			
	1 6	Briefly d	escribe the organization's mission or	most significant activities						
		,	mize the economic benefit for the mei	_						
ACUVINES & GOVERNANCE	-									
<u> </u>	-									
<u>.</u>										
Ę			nis box দ if the organization discon			1	assets			
ó			of voting members of the governing b			3	7			
ß	4 1	Number	of independent voting members of the	e governing body (Part VI, line 1b	)	4	7			
	5	Total nu	mber of individuals employed in caler	dar year 2011 (Part V, line 2a)		5	43			
3	6	Total nu	mber of volunteers (estimate if neces	sary)		6	11			
₹	7a ⁻	Total un	related business revenue from Part V	III, column (C), line 12		7a	0			
	ы	Net unre	lated business taxable income from F	form 990-T , line 34		7b				
					Prio	r Year	Current Year			
	8	Contri	butions and grants (Part VIII, line 11	1)			0			
횰	9	Progra	am service revenue (Part VIII, line 2	1)		9,583,900	8,804,210			
Reven	10	Invest	tment income (Part VIII, column (A),		327,444	755,564				
æ	11		revenue (Part VIII, column (A), lines		,	0				
	12		revenue—add lines 8 through 11 (mu:		ne 📗					
			<u> </u>			9,911,344	9,559,774			
	13	Grants	s and sımılar amounts paıd (Part IX, c	olumn (A), lines 1-3)			0			
	14	Benefi	ts paid to or for members (Part IX, co	lumn (A), line 4)			0			
	15	Saları	es, other compensation, employee be	nefits (Part IX, column (A), lines						
86		5-10				2,595,691	2,496,065			
Expenses	16a	Profes	sional fundraising fees (Part IX, colu	mn (A), line 11e)			0			
ਡੋ	ь	Total fu	ındraısıng expenses (Part IX, column (D), line	25) <b>-</b> 0						
_	17	Other	expenses (Part IX, column (A), lines	11a-11d,11f-24e)		6,050,681	6,109,089			
	18	Total	expenses Add lines 13–17 (must eq	ual Part IX, column (A), line 25)		8,646,372	8,605,154			
	19	Reven	ue less expenses Subtract line 18 fr	om line 12		1,264,972	954,620			
8 <del>%</del>					Beginning	of Current	End of Year			
net Assets of Fund Balances						ear				
100 €	20		assets (Part X, line 16)		1	86,914,256	210,450,418			
3 2	21	Total	liabilities (Part X, line 26)			70,774,338	193,096,061			
	22	Netas	ssets or fund balances Subtract line	21 from line 20		16,139,918	17,354,357			
Pai	rt II	Sign	ature Block							
now			erjury, I declare that I have examined th f, it is true, correct, and complete. Decla							
		**** Signa				12-08-07 te				
Sign		'	Signature of officer Date							
Here	e		SELL DALKE VP/CFO or print name and title							
		<b> </b>   ype	. or print name and title			1				
		Preparei		Date	Check if self-	Preparer's taxp	payer identification number			
Paid		sıgnatur	e P Line Exolies		employed • [ (see instructions)					
<sup>o</sup> repa	arer's		ame (or yours Tinucci Jones & Company	PC						
Jse (	Only		mployed), , and ZIP + 4 31207 Keats Way Suite 20		EIN 🕨					
			52207 Nouto May 54115 25	-		Phone no	(303) 480-9090			
		I	Evergreen, CO 80439			1	•			

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

Par		ent of Program Service . Schedule O contains a response	Accomplishments e to any question in this Part III		୮
1	Briefly describe	the organization's mission			
To m	axımıze the econo	omic benefit for the membership	)		
2		tion undertake any significant p 90 or 990-EZ?	rogram services during the year wh		es 🗸 No
	If "Yes," describ	e these new services on Sched	ule O		
3	services?	— ·	significant changes in how it condu		es 🗸 No
4	Describe the org	janization's program service ac on 501(c)(3) and 501(c)(4) org	complishments for each of its three lanizations and section 4947(a)(1) nses, and revenue, if any, for each p	trusts are required to report the	
			ıncludıng grants of \$ mbers The Credit Union provides financial s age lending, commercial lending, home ban		
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
					·
4d	(Expenses \$			) (Revenue \$	)
4e	Total program s	service expenses <b>⊁</b> \$			

Part IV	Checklist	of R	eauired	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (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		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
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 I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	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
С	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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "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		No
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? If "Yes," complete Schedule G, Part 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 "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
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		No
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		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
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		No
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		No
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)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? 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? <i>If</i> "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		No
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?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F.	orm <b>990</b>	(2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V $\cdot$ . $\cdot$ . $\cdot$ . $\cdot$ . $\cdot$ . $\cdot$ . $$		. [	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this			
	return			
D	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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year <sup>7</sup>	3a		No
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		Νo
4a	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
b	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			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			No
		5c		
6a	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			
	were not tax deductible?	6b		Νo
7	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?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
_				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	_		
_	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 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		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		Νo
9	Sponsoring organizations maintaining donor advised funds.	•		NO
	Did the organization make any taxable distributions under section 4966?	9a		No
_		9b		No
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	90		INU
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12			
,	facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
ь	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νo
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	<b>Note.</b> 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			
	allocated to each state	13a		No
b	Enter the aggregate amount of reserves the organization is required to maintain by			
_	the states in which the organization is needed to issue qualified health plans			
C	Enter the aggregate amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		Νο

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction 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	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?						
b	<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?						
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	8b	Yes					
9	9	Yes					
	ection B. Policies (This Section B requests information about policies not required by the Internal						
Re	venue Code.)		Yes	N-			
102	Did the organization have local chapters, branches, or affiliates?	10a	res	No No			
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a		NO			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		No			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No			
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	16a		No				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its						
	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		No			
Se	ection C. Disclosure						
17	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.

Own website Another's website Vpon 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 ►
  RED ROCKS CREDIT UNION
  9325 DORCHESTER STREET STE 200
  HIGHLANDS RANCH, CO 80129
  (303) 471-7625

# 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
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the o	rganization nor any re	lated o	rganı	zatio	ns o	compe	nsat	ed any current or fo	ormer officer, direct	or, or trustee
<b>(A)</b> Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former		MISC)	related organizations
(1) JEFFREY RUDOLPH Director	2 00	х						0	0	0
(2) PATRICK SHANNON Director	2 00	х						0	0	0
(3) CHRISTY PEARSON Director	2 00	х						0	0	0
(4) TOM HURLEY Secretary	2 00	х						0	0	0
(5) TODD KEMP Treasurer	2 00	х						0	0	0
(6) NORM THIELE Vice Chair	2 00	х						0	0	0
(7) ROY PALMER Former Director	2 00	х						0	0	0
(8) ROBERT EPPER Chairperson	4 00	х						0	0	0
(9) DONALD ARKELL VP Sales	40 00			х				117,475	0	14,477
(10) RUSSELL DALKE VP/CFO	40 00			х				136,011	0	15,107
(11) JASON NELSON VP Operations	40 00			х				84,245	0	13,003
(12) PATRICK T AHERN President/CEO	40 00			х				264,087	0	24,843
(13) WILLIAM J SCHIMEL Sales & Mortgage Manager	40 00				х			110,108	0	3,863

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

	(A) Name and Title	(B) Average hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estima amount o compens from organizat	ated f other sation the ion and
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	relat organiza	
1b	Sub-Total	to Dort VII Soo	· ·		•	•		<b>▶</b>				
c d				• •		•		<b>-</b>	711,926			71,293
2	Total number of individuals (incl \$100,000 of reportable compen	_				ted	above	) who	received more tha	n		
											Yes	No
3	Did the organization list any <b>fori</b> on line 1a? <i>If</i> "Yes," complete Sch				e, k	ey e	mploy •	ee, o •	r highest compens		3	No
4	For any individual listed on line corganization and related organization and related organization.									ch	<b>4</b> Yes	
5	Did any person listed on line 1a services rendered to the organiz									r individual for	5	No
6.	ction B. Independent Con	tractors										
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper the organizatio										
		(A) ne and business add	dress						Descr	(B) ription of services	(C Comper	
	Total number of independent cont \$100,000 of compensation from t			ot lın	nıted	d to	those	liste	d above) who receiv	ed more than		

Form 99								Page <b>9</b>
Part \	<u>/1111</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
# £	1a	Federated cam	paigns 1a	1				
필드	ь	Membership du	es <b>1b</b>					
s, g	c	Fundraising eve	ents <b>1c</b>					
<u>₩</u>	d	Related organiz	zations 1d					
E E	e	Government grant	s (contributions) <b>1e</b>					
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no Noncash contri	butions included in					
and and	h		s 1a-1f	▶	ds, Interest 794,223 proceeds 0			
				Business Code				
nue.	2a	VISA Check Card I	ncome	522100	827,434	827,434		
Program Service Revenue	Ь	Other Operating In	come	522100	35,280	35,280		
93	C	Interest Member L	nterest Member Loans 52210			6,736,885		
<u> </u>	d	Income Sale of Mo	ortgages	522100	208,895	208,895		
Ē	e	Fees Member Serv	rice	522100	995,716	995,716		
200	f	All other progra	am service revenue					
Š	g	Total. Add lines	s 2a – 2f		8,804,210			
	3	Investment inc	ome (ıncludıng dıvıden	ds, interest				
			aramounts)	F				794,223
	4		stment of tax-exempt bond					
	5	Royalties	(1) Pool	<del> </del>	o I			
	6a	Gross rents	(ı) Real	(II) Personal				
	Ь	Less rental						
	<sub>c</sub>	expenses Rental income						
		or (loss)	me or (loss)		o			
	d	Net rental inco	(i) Securities	(II) Other	9			
	7a	Gross amount from sales of assets other than inventory	5,672,341	500,090				
	b	Less cost or other basis and sales expenses	5,657,700	553,390				
	c	Gain or (loss)	14,641	-53,300	20.650			20.650
	d 8a		rom fundraising	<b>.</b>   	-38,659			-38,659
Other Revenue			ruding					
ŧ	b		penses <b>b</b>					
•	9a	Gross income f	(loss) from fundraising rom gaming activities ie 19	events F	0			
	b c		a penses b (loss) from gaming acti		o			
		Gross sales of returns and allo	inventory, less owances .					
	b c		a oods sold b (loss) from sales of inv	entory ►	0			
		Miscellaneou		Business Code				
	11a							
	ь							
	С .							
	d	All other reven	ue					
	е	Total. Add lines	s 11a-11d	· · · · •	0			
	12	Total revenue.	See Instructions .	▶	9,559,774	8,804,210		755,564

# 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

	Teck it Schedule O Contains a response to any question in this Part 1x	<u> </u>			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	783,219			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	1,332,366			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	36,980			
9	Other employee benefits	190,608			
10	Payroll taxes	152,892			
11		132,692			
	Fees for services (non-employees)  Management	0			
a					
b	Legal	3,943			
C	Accounting	0			
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	1,533,221			
12	Advertising and promotion	219,764			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	858,013			
17	Travel	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	62,721			
20	Interest	18,375			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	408,663			
23	Insurance	417,740			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	Provision for Loan Losses	534,190			
b	Office Operations Expense	305,636			
c	Loan Servicing Expense	207,084			
d	Investment Impairment	130,966			
e	Dividends & Interest -Members	1,325,824			
f	All other expenses	82,949			
25	Total functional expenses. Add lines 1 through 24f	8,605,154	0	0	0
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				orm <b>990</b> (2011)

Cash—non-interest-bearing   End of year	Pa	rt X	Balance Sheet					
2   Savings and temporary cash investments   12,085.521   2   9,080,080								
3   Pledges and grants receivable, net		1	Cash—non-interest-bearing			1,104,360	1	6,525,997
## Accounts receivable, net		2	Savings and temporary cash investments			12,085,521	2	9,060,262
Securables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.   S   D		3	Pledges and grants receivable, net				3	0
highest compensated employees Complete Part II of Schedule		4	Accounts receivable, net			2,202,746	4	2,050,341
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 Schedule L		5		employees, and				
Persons described in section 4958(c)(3)(B) Complete Part II of Schedule L							5	0
125,150,966 7   123,632,659   123,632,659   123,632,659   100		6	persons described in section 4958(c)(3)(B) Complete Part II o		4958(f)(1)) and			
10a	S							
10a	ē	7	Notes and loans receivable, net	•		125,150,966	7	123,632,659
1.0a	28	8					0	
Part VI of Schedule D   10a   10b   2.846,344   2.585,641   10c   2.956,947   11   10b   2.846,344   2.585,641   10c   2.956,947   12   1.956,010,320   12   12   12   12   12   12   12		9	Prepaid expenses and deferred charges			207,851	9	201,615
11 Investments—publicly traded securities 21,142.872 11 56,010,320 12 Investments—other securities See Part IV, line 11 20,075,022 12 7,337,113 3 Investments—program—related See Part IV, line 11 20,075,022 12 7,337,113 13 Investments—program—related See Part IV, line 11 1 2,359,277 15 2,675,184 16 Total assets See Part IV, line 11 2,359,277 15 2,675,184 16 Total assets, Add lines 1 through 15 (must equal line 34) 166,914,256 16 210,450,418 17 Accounts payable and accrued expenses 944,726 17 1,261,012 18 Grants payable and accrued expenses 944,726 17 1,261,012 18 Grants payable		10a		10a	5,803,291			
12   Investments—other securities See Part IV, line 11   20,075,022   12   7,337,113     13   Investments—program-related See Part IV, line 11   13   0     14   Intangible assets   14   0     15   Other assets See Part IV, line 11   2,359,277   15   2,675,164     16   Total assets, Add lines 1 through 15 (must equal line 34)   186,914,256   16   210,450,418     17   Accounts payable and accrued expenses   944,728   17   1,281,012     18   Grants payable     18     19     19   Deferred revenue     19     20   Tax-exempt bond liabilities     20     21   Escrow or custodial account liability   Complete Part IV of Schedule D     21     22   Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons   Complete Part II of Schedule L     22     23   Secured mortgages and notes payable to unrelated third parties     23   4,000,000     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 (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third partie		ь	Less accumulated depreciation	10b	2,846,344	2,585,641	<b>10</b> c	2,956,947
13   1.   13   0   0   14   15   15   14   16   17   16   17   17   17   18   18   17   18   18		11	Investments—publicly traded securities			21,142,872	11	56,010,320
14		12	Investments—other securities See Part IV, line 11		20,075,022	12	7,337,113	
15		13	Investments—program-related See Part IV, line 11			13	0	
16   Total assets. Add lines 1 through 15 (must equal line 34)		14	Intangible assets			14	0	
17    Accounts payable and accrued expenses   944,728   17    1,261,012     18		15	Other assets See Part IV, line 11			2,359,277	15	2,675,164
18   Grants payable   18   19   19   19   19   19   19   19		16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)			186,914,256	16	210,450,418
19 Deferred revenue		17	Accounts payable and accrued expenses .			944,728	17	1,261,012
20 Tax-exempt bond liabilities		18	Grants payable		18			
Escrow or custodial account liability   Complete Part IV of Schedule D		19	Deferred revenue		19			
Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		20	Tax-exempt bond liabilities		20			
23 4,000,000 24 Unsecured notes and loans payable to unrelated third parties	ر. ص	21	Escrow or custodial account liability Complete Part IV of Schedul		21			
23 4,000,000 24 Unsecured notes and loans payable to unrelated third parties	ilitie	22						
23 4,000,000 24 Unsecured notes and loans payable to unrelated third parties	æ		persons Complete Part II of Schedule L			22		
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 D		23	Secured mortgages and notes payable to unrelated third parties				23	4,000,000
and other liabilities not included on lines 17-24) Complete Part X of Schedule D  Total liabilities. Add lines 17 through 25		24	Unsecured notes and loans payable to unrelated third parties				24	
Total liabilities. Add lines 17 through 25		25	and other liabilities not included on lines 17-24) Complete Par			169,829,610	25	187,835,049
Organizations that follow SFAS 117, check here  and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets		26				170,774,338		· · ·
Permanently restricted net assets	— Ф		Organizations that follow SFAS 117, check here ▶ ┌ and comp	lete li	nes 27			
Permanently restricted net assets	ž	27					27	
Permanently restricted net assets	<u> </u>						28	
Second	=							
30   Capital stock or trust principal, or current funds   30     31   Paid-in or capital surplus, or land, building or equipment fund   31     32   Retained earnings, endowment, accumulated income, or other funds   16,139,918   32   17,354,357     33   Total net assets or fund balances   16,139,918   33   17,354,357	· Fun		Organizations that do not follow SFAS 117, check here ▶ 🔽 an	d com	plete			
31   Paid-in or capital surplus, or land, building or equipment fund   31		30	_	_			30	
33 Total net assets or fund balances	Ęţ.							
33 Total net assets or fund balances					16,139,918		17.354.357	
<b>34</b> Total liabilities and net assets/fund balances								
	ž							

Ра	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		9,5	559,77
2	Total expenses (must equal Part IX, column (A), line 25)	2			505,15
3	Revenue less expenses Subtract line 2 from line 1	3		g	954,62
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		16,1	139,91
5	Other changes in net assets or fund balances (explain in Schedule O)	5		2	259,819
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		17,3	354,35
Pai	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	
c	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 Consolidated basis Both consolidated and separated 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 raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		No

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Open to Public

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

Inspection

	me of the organization  O ROCKS CREDIT UNION	omi ppor P dee separate instructions.	Emp	oyer identifica	tion numbe	er		
IXLL	NOCKS CREDIT ONION		84-0	808889				
Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99				. Complet	te if the		
		(a) Donor advised funds	(	<b>b)</b> Funds and o	ther accou	nts		
L	Total number at end of year							
2	Aggregate contributions to (during year)							
3	Aggregate grants from (during year)							
1	Aggregate value at end of year							
5	Did the organization inform all donors and donor advifunds are the organization's property, subject to the		nor advi	sed	☐ Yes	┌ No		
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit				┌ Yes	┌ No		
Pa	rt III Conservation Easements. Complete	ıf the organization answered "Yes"	to Form	1 990, Part I\	/, line 7.			
1 2	Purpose(s) of conservation easements held by the o  Preservation of land for public use (e.g., recreating in the 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 a Preservation of a	certified	i historic struc	,	a		
	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					
c	Number of conservation easements on a certified his	storic structure included in (a)	2c					
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d					
3	Number of conservation easements modified, transfe	erred, released, extinguished, or terminat	ed by th	e organization	durina			
	the taxable year ►	<u> </u>	,		<b>J</b>			
ı	Number of states where property subject to conserva	ation easement is located ►						
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds		ndling of	violations, and	☐ Yes	┌ No		
5	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easer	ments dı	ırıng the year 🖡	·			
,	Amount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easement	ts during	the year				
	<b>▶</b> \$							
3	Does each conservation easement reported on line 2(d) above satisfy the requirements of section $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$ ?							
•	In Part XIV, describe how the organization reports contained balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financia						
ar	t III Organizations Maintaining Collection Complete if the organization answered	ons of Art, Historical Treasures,	or Oth	ner Similar	Assets.			
La	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 statem for public exhibition, education or reseal	rch ın fuı			<del>)</del> ,		
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) 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		for financ	cial gain, provi	de the			
а	Revenues included in Form 990. Part VIII. line 1			<b>⊳</b> - \$				

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

Part	Organizations Maintaining Co	llections of Art	t, His	tori	cal Tre	asure	es, or Othe	<u>r Similar As</u>	sets (	continued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	owing tha	at are a	a sıgnıfıcant u	se of its collec	tion	
а	Public exhibition		d	Γ	Loan or	excha	nge programs			
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ıın hov	w they	further t	the org	ganızatıon's ex	cempt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							nılar	┌ Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answered "Y	es" to Form 9	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	edıary	forc	ontributio	ons or	other assets	not	✓ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving ta	ble			<b>T</b>		
								Ar	nount	
с	Beginning balance						1c			8,011
d	Additions during the year						1d			16,786
e	Distributions during the year						1e			17,975
f	Ending balance						1f			6,822
2a	Did the organization include an amount on Fo	•	e 21?						│ Yes	▼ No
	If "Yes," explain the arrangement in Part XIV									
Par	<b>t V</b> Endowment Funds. Complete								<b>.</b>	
1a	Beginning of year balance	(a)Current Year	(D	Prior \	rear (	(c) I Wo	Years Back (d)	Three Years Back	(e)Four	Years Back
_	Contributions									
b	Investment earnings or losses									
c d	Grants or scholarships									
u 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 ▶									
За	Are there endowment funds not in the posses	ssion of the organiz	ation	that a	re held a	nd adr	mınıstered for	the		
	organization by (i) unrelated organizations							200	Yes	S No
	(ii) related organizations			•				3a		+
b	If "Yes" to 3a(II), are the related organization							3		<del> </del>
4	Describe in Part XIV the intended uses of th	•				-				
Par	Land, Buildings, and Equipme	snu. See ronn 95		<b>1</b> ΓL X,	line 10					
Par		int. See Form 99	, 0, 10				<b>b)</b> Cost or other	(c) Accumulated	1 (1)	211
Par	Description of property	ent. See Follil 99		(a)	Cost or ot s (investme	her (	<b>b)</b> Cost or other basis (other)	(c) Accumulated depreciation	i (d)	Book value
				(a)	Cost or ot	her (			i (d)	Book value
<b>1</b> a L	Description of property			(a)	Cost or ot	her (			(a)	300k value 2,298,436
<b>1</b> a L	Description of property			(a)	Cost or ot	her (	basis (other)	depreciation	(a)	
1a L b E c L	Description of property  and			(a)	Cost or ot	her (	basis (other)	depreciation 576,60	52	
1a L b E c L d E	Description of property  and	ent. See Folill 95		(a)	Cost or ot	her (	2,875,098	depreciation 576,60	52	2,298,436

Part VIII Investments—Other Securities. Sec	Form 990, Part X, line 12	
<ul><li>(a) Description of security or category (including name of security)</li></ul>	( <b>b)</b> Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		Cost of the of year market value
(2)Closely-held equity interests		
(3)Other		
(A) VISA Stock	31,964	С
(B) FHLB Stock	401,100	С
(C) SunCorp Capital & Membership Shares	1,635,835	С
(e) surreorp eapital a riembership shares	1,033,033	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line 1	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of ella 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,		(h) Paak valua
(a) Descr	iption	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part		
1 (a) Description of Liability	( <b>b</b> ) Amount	
Federal Income Taxes	(S) / Illiound	
Non-Member Accounts	99,214	
Member Shares, Deposits and Certificates	187,735,835	
· ·		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)		

al expenses (Form 990, Part IX, column (A), line 25) sess or (deficit) for the year Subtract line 2 from line 1 sunrealized gains (losses) on investments nated services and use of facilities estment expenses or period adjustments her (Describe in Part XIV) al adjustments (net) Add lines 4 - 8 sess or (deficit) for the year per financial statements Combine lines 3 and Reconciliation of Revenue per Audited Financial State tal revenue, gains, and other support per audited financial statements mounts included on line 1 but not on Form 990, Part VIII, line 12		s With Reve	nue pe	2 3 4 5 6 7 8 9	8,605,154 954,620 259,819 259,819 1,214,439
estment expenses or period adjustments ner (Describe in Part XIV) al adjustments (net) Add lines 4 - 8 ress or (deficit) for the year per financial statements Combine lines 3 and Reconciliation of Revenue per Audited Financial Statements tal revenue, gains, and other support per audited financial statements mounts included on line 1 but not on Form 990, Part VIII, line 12		s With Reve	nue pe	4 5 6 7 8 9 10	259,819 259,819 1,214,439
nated services and use of facilities estment expenses or period adjustments her (Describe in Part XIV) al adjustments (net) Add lines 4 - 8 hess or (deficit) for the year per financial statements. Combine lines 3 and  Reconciliation of Revenue per Audited Financial State htal revenue, gains, and other support per audited financial statements hounts included on line 1 but not on Form 990, Part VIII, line 12		s With Reve	nue pe	5 6 7 8 9	259,819 1,214,439
estment expenses or period adjustments her (Describe in Part XIV) al adjustments (net) Add lines 4 - 8 hess or (deficit) for the year per financial statements. Combine lines 3 and  Reconciliation of Revenue per Audited Financial State tal revenue, gains, and other support per audited financial statements mounts included on line 1 but not on Form 990, Part VIII, line 12		s With Reve	nue pe	6 7 8 9 10	1,214,439
or period adjustments  ner (Describe in Part XIV)  al adjustments (net) Add lines 4 - 8  ness or (deficit) for the year per financial statements. Combine lines 3 and  Reconciliation of Revenue per Audited Financial State  nounts included on line 1 but not on Form 990, Part VIII, line 12		s With Reve	nue pe	7 8 9 10	1,214,439
ner (Describe in Part XIV)  al adjustments (net) Add lines 4 - 8  less or (deficit) for the year per financial statements. Combine lines 3 and  Reconciliation of Revenue per Audited Financial State  tal revenue, gains, and other support per audited financial statements  mounts included on line 1 but not on Form 990, Part VIII, line 12		s With Reve	nue pe	8 9 10	1,214,439
al adjustments (net) Add lines 4 - 8 less or (deficit) for the year per financial statements. Combine lines 3 and  Reconciliation of Revenue per Audited Financial State lital revenue, gains, and other support per audited financial statements mounts included on line 1 but not on Form 990, Part VIII, line 12		s With Reve	nue pe	9	1,214,439
al adjustments (net) Add lines 4 - 8 less or (deficit) for the year per financial statements. Combine lines 3 and  Reconciliation of Revenue per Audited Financial State lital revenue, gains, and other support per audited financial statements mounts included on line 1 but not on Form 990, Part VIII, line 12		s With Reve	nue pe	10	1,214,439
Ress or (deficit) for the year per financial statements. Combine lines 3 and Reconciliation of Revenue per Audited Financial State tal revenue, gains, and other support per audited financial statements mounts included on line 1 but not on Form 990, Part VIII, line 12		s With Reve	nue pe		
Reconciliation of Revenue per Audited Financial State total revenue, gains, and other support per audited financial statements mounts included on line 1 but not on Form 990, Part VIII, line 12		s With Reve	nue pe	er Retur	
nounts included on line 1 but not on Form 990, Part VIII, line 12					n
· · · · · · · · · · · · · · · · · · ·				1	9,428,808
et unrealized gains on investments	2a				
onated services and use of facilities	2b				
coveries of prior year grants	2c				
ther (Describe in Part XIV)	2d	-130	966,0		
id lines <b>2a</b> through <b>2d</b>				2e	-130,966
btract line <b>2e</b> from line <b>1</b>				3	9,559,774
nounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>					
vestment expenses not included on Form 990, Part VIII, line 7b .	4a				
ther (Describe in Part XIV)	4b				
ld lines <b>4a</b> and <b>4b</b>				4c	
tal Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, lin	e 12 )		.	5	9,559,774
Reconciliation of Expenses per Audited Financial Sta	<u>temen</u>	ts With Expe	enses	per Reti	
tal expenses and losses per audited financial				1	8,474,188
			-		
	2a				
	<del>                                     </del>				
, -	<del>                                     </del>				
	$\vdash$				
				2e	
btract line <b>2e</b> from line <b>1</b>			. 🖯	3	8,474,188
nounts included on Form 990, Part IX, line 25, but not on line 1:					· · ·
· · · · · · · · · · · · · · · · · · ·	4a				
	4b	13	0,966		
Id lines <b>4a</b> and <b>4b</b>				4c	130,966
tal expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, III	ne 18 )			5	8,605,154
	nated services and use of facilities	nated services and use of facilities	nated services and use of facilities	nated services and use of facilities	nated services and use of facilities

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
,	Part XIII, Line 4b Other revenue amounts included on 990 but not included in F/S	Investment impairment loss \$130966
,	an agent, trustee, custodian or other intermediary for contrib	In prior years, the Credit Union sold first mortgage loans to others with servicing retained. The custodial escrow accounts related to these mortgage loans are not included in the Credit Union's financial statements, but the Credit Union continues to service these loans.

DLN: 93493220012622

**Employer identification number** 

OMB No 1545-0047

# **Compensation Information**

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

RFF	D ROCKS CREDIT UNION				
	84-080	8889			
Pa	rt I Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in F 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these				
	First-class or charter travel  Housing allowance or residence for personal				
	Travel for companions Payments for business use of personal resid				
	Tax idemnification and gross-up payments  Health or social club dues or initiation fees				
	Discretionary spending account  Personal services (e.g., maid, chauffeur, che	∍f)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain		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?		2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply  Compensation committee  Independent compensation consultant  Compensation survey or study				
	Form 990 of other organizations  Approval by the board or compensation com	mittee			
	Approval by the board of compensation com	IIIIICCEE			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing or a related organization	organization			
а	Receive a severance payment or change-of-control payment?		4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		Νo
C	Participate in, or receive payment from, an equity-based compensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part II	I			
5	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.  For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of				
а	The organization?	L	5a		
b	Any related organization?		5b		
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, line $1a$ , did the organization pay or accrue any compensation contingent on the net earnings of				
а	The organization?	L	6a		
b	Any related organization?		6b		
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III		8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Red	ulations			

section 53 4958-6(c)?

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

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

Note. The sum of columns (B)(I)-(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

-					1			
(A) Name		(B) Breakdown of  (i) Base compensation	W-2 and/or 1099-MIS  (ii) Bonus & Incentive compensation	SC compensation  (iii) Other reportable compensation	(C) Retirement and other deferred compensation	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
(1) RUSSELL DALKE	)	129,920	6,091		5,746	9,361	151,118	
(2) PATRICK T AHERN	)	220,834	43,253		8,784	16,059	288,930	

Schedule J (Form 990) 2011 Page **3** 

#### 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

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.

2011

Open to Public Inspection

Name of the organization RED ROCKS CREDIT UNION **Employer identification number** 

84-0808889

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Once the Board has met each month and approved the financial statements, the monthly financial statements are posted at each branch for the public. The governing documents and conflict of interest policy are not made available to the general public.
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	A contracted third party provider makes a determination of external (market) pay rates for each Vice President position based on benchmark jobs from local, regional, and national compensation reports of the financial services industry. Salary grades are developed by third party based on current market rates for the position. No less that biennially, the entire salary plan is reviewed for external and internal equity with assistance from a third party.
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	The Statement of Oath, Acknowledgment of Policy Compliance is distributed to the Board of Directors annually, following the annual election of the Board Each Board member agrees and certifies that they have no present conflicts. Furthermore, the Board members agree to promptly disclose to the President/CEO or the Chairman of the Board any further conflict of interest or violations should one develop.
Form 990, Part VI, Line 9	Form 990, Part VI, Line 9 Officer, Director, Trustee, Key Employee Mailing Address	Robert Epper - 9288 Cactus Bluff Way, Highlands Ranch, CO 80126Roy Palmer - 56 Brookhaven Lane, Littleton, CO 80123Norm Thiele - 2276 Indian Paintbrush Drive, Highlands Ranch, CO 80129Todd Kemp - 877 Brixham Place, Castle Rock, CO 80108Tom Hurley - 2231 Indian Paintbrush Drive, Highlands Ranch, CO 80129Christy Pearson - 3422 W 39th Avenue, Denver, CO 80211Patrick Shannon - 502 N Jackson, Golden, CO 80403Jeffrey Rudolph - 1303 Meyerwood Circle, Highlands Ranch, CO 80129
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	Management provides the required information to the Credit Union's independent CPA Firm for completion of the Form 990. The Form 990 in then reviewed and approved by the CEO and CFO before it is filed.
Form 990, Part VI, Line 7b	Form 990, Part VI, Line 7b Describe Decisions of Governing Body Approval by Members or Shareholders	Any proposed merger must be approved by the majority of the membership
Form 990, Part VI, Line 7a	Form 990, Part VI, Line 7a How Members or Shareholders Elect Governing Body	The Credit Union members elect on an annual basis the members of the Board of Directors
Form 990, Part VI, Line 6	Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	Red Rocks Federal Credit Union was established in 1979 to serve the employees of Martin Marietta (now Lockheed Martin) Red Rocks' field of membership was expanded in 1994 to serve those that live, work, worship or attend school in Douglas County, Colorado As a result of a conversion to a state-chartered credit union in August 2006, the credit union's name changed slightly to Red Rocks Credit Union

#### **Additional Data**

**Software ID:** 11000144

**Software Version:** 2011v1.2

**EIN:** 84-0808889

Name: RED ROCKS CREDIT UNION

### Form 990, Special Condition Description:

### **Special Condition Description**