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Form **990**

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 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2011 calendar year, or tax year beginning 2011, and ending 20 C Name of organization VALLEY CREDIT UNION D Employer identification number Check if applicable Address change Doing Business As 93-6027729 Number and street (or P O box if mail is not delivered to street address) E Telephone number Name change 2096 MISSION STREET SE Initial return 503-364-7999 City or town, state or country, and ZIP + 4 Terminated **SALEM OR 97302** Amended return 3.168.765. G Gross receipts \$ F Name and address of principal officer JEAN WHEAT-PALM Application pending H(a) is this a group return for affitiates? Thes Ves Vo SAME AS ABOVE H(b) Are all affiliates included? Yes No. If "No," attach a list (see instructions) 501(c)(3) **✓** 501(c) (14) ◀ (insert no) ☐ 4947(a)(1) or Tax-exempt status: Website: ▶ H(c) Group exemption number ▶ Form of organization Corporation Trust Association ☐ Other ► L Year of formation M State of legal domicile OR Summary Part I **OUR MISSION IS TO PROVIDE MEMBER** Briefly describe the organization's mission or most significant activities: THRIFT AND SAVINGS SERVICES WHILE PROVIDING LOW COST LOANS TO MEMBERS Governance Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a). 3 8 Activities & Number of independent voting members of the governing body (Part VI, line 1b) 0 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 23 Total number of volunteers (estimate if necessary) 6 11 Total unrelated business revenue from Part VIII, column (C), line 12 0 7a Net unrelated business taxable income from Form 990=T\ line 34 0 Current Year Pnor Year SSO Contributions and grants (Part VIII, line 1h Revenue Program service revenue (Part VIII, line 2) JUN 2.1 .2012. 2,950,986 2,985,694. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 193,171. 183,071. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c Total revenue—add lines 8 through 11 (must equal Par VIII) 12 3,144,157 3,168,765. Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 13 14 Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,004,669. 1,082,757 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,043,311. 2.086.008. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 3,168,765. 3,047,980 SCANNED 19 Revenue less expenses. Subtract line 18 from line 12 96,177 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 53,242,030. 58,224,479. 21 Total liabilities (Part X, line 26) 53,126,400. 48,143,951. Net assets or fund balances. Subtract line 21 from line 20 5,098,079. 5,098,079 Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete of which preparer has any knowledge Sign Here Type or print name and title Print/Type preparer's name Paid Check / f R KEITH BEBB self-employed P00329883 Preparer R KEITH BEBB CPA Firm's name Firm's EIN ▶ **Use Only** Firm's address ▶ 14780 SW OSPREY DR # 370, BEAVERTON OR 9,7007 503-642-4129 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) ✓ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2011)

Cat. No 11282Y

	30 (201	1)		Page 2
Part	Ш	Statement of Program Service Accomplishments	-	
		Check if Schedule O contains a response to any question in this Part III	·	. 🗆
1		fly describe the organization's mission:		
	OUR	R MISSION IS TO PROVDE MEMBERS WITH THRIFT AND SAVINGS SERVICES AS WELL AS LOW COST LOANS		
2	Did	the organization undertake any significant program services during the year which were not listed on the		
_	prior		☐ Yes	☑ No
		es," describe these new services on Schedule O	_ 103	<u></u> 140
3		the organization cease conducting, or make significant changes in how it conducts, any program		
	serv		☐Yes	✓ No
	lf "Y	es," describe these changes on Schedule O.	_	_
4		cnbe the organization's program service accomplishments for each of its three largest program services,	as meas	sured by
	expe	enses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to repoi	rt the an	nount of
	gran	its and allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Coc	de:) (Expenses \$ including grants of \$) (Revenue \$)
	PRC	OVIDE LOW COST LOANS TO MEMBERS USEING FUNDS ON DEPOSIT		
4b	(Coc	de:) (Expenses \$ including grants of \$) (Revenue \$		١
	(, (L. (L		/
			-	
40	(Coo	to: \(\(\(\(\) \\ \) \(\)		
4c	(Coc	de:) (Expenses \$ including grants of \$) (Revenue \$)

		•		

		,		
		٠, ,		
				
4d		er program services (Describe in Schedule O)		
		penses \$ including grants of \$) (Revenue \$)		
4e	Tota	al program service expenses		

Part	V 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		✓_
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓_
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		1
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,			
6	Part III 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	5		_
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		<i>y</i>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			
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	8		<i>y</i>
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 V	10		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Det the second of the lead building and anti-mark in Det V. line 100 tf for 7	11a	√	A. S. S. S. S.
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	_ <u></u>	1
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		1
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	✓	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		14a		✓
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, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		1
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 United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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 (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
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		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		1

Part	Checklist of Required Schedules (continued)			
	7 11		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
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		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		√
c b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 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		√
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		1
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		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable 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		1
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		1
		For	m 990	(2011)

Form 99	0 (2011)			Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			. 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 143	5	蓬	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	上漢	靈	77
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		15%	
	reportable gaming (gambling) winnings to prize winners?	1c	E . 3000	V
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2	10000		1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	√	luer - Tak
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	ستستم		تحصفا
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	1
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	_3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a ∵∵∌:	شده ادر آنا	V Verage of the second
þ	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.			诗笔
			-551	2
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		├ ~
с 6а	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
Va	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			+
~	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	-		7.5
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			133
	and services provided to the payor?	7a	-	4
ь	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		İ	
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	1	75.5	4.30
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			1
f	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	支	173	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		135	
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		E.E.	1
а	Did the organization make any taxable distributions under section 4966?	9a	ļ	<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	E-F-34	S FEET WA
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40	against amounts due or received from them.)	40		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes " enter the amount of tax-exempt interest received or accrued during the year.	12a	1 2 2 3	. 1248. Fe
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	- 3	摧	IN THE
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-	THE.	OF THE ST
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	- Daniel	La Projection
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	PER SE	
. 70	Did the digalization receive any payments for induor tailing services during the tax year:	1 70	J	_ ▼

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

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Part		•	-		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				ions.
	Check if Schedule O contains a response to any question in this Part VI	<u> </u>			
Secti	on A. Governing Body and Management				
			- less =	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	_1a	8		157-1
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar		为事	N.	15.
	committee, explain in Schedule O.		泛 漆	2.3013	
b	Enter the number of voting members included in line 1a, above, who are independent .	1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business i			1 A	
	any other officer, director, trustee, or key employee?		2		1
3	Did the organization delegate control over management duties customanly performed by or	under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other	er person? .	3		✓_
4	Did the organization make any significant changes to its governing documents since the prior Form 98		4		✓_
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets? .	5		<u> </u>
6	Did the organization have members or stockholders?		6	✓	
7a	Did the organization have members, stockholders, or other persons who had the power to	elect or appoint	1	,	
	one or more members of the governing body?		7a	✓	
b	stockholders, or persons other than the governing body?	by) members	7b		1
8	Did the organization contemporaneously document the meetings held or written actions un	 dertaken during		<u> </u>	12 2 77 1
	the year by the following.	aortanon aormig	73	12/0	1
а	The governing body?		8a	√	'''
b	Each committee with authority to act on behalf of the governing body?		8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot		:		
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		✓
Secti	on B. Policies (This Section B requests information about policies not required by th	e Internal Reve	enue C		
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities o affiliates, and branches to ensure their operations are consistent with the organization's exemple.		_ I		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		10b		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	-		in the state of th	
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a		√
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?			
С	Did the organization regularly and consistently monitor and enforce compliance with the	oolicy? If "Yes,"	,		
	describe in Schedule O how this was done		12c		
13	Did the organization have a written whistleblower policy?		13		✓
14	Did the organization have a written document retention and destruction policy?		14	√	T Turner
15	Did the process for determining compensation of the following persons include a review a		· 医多	9	2.20
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official			EE 3	
a b	Other officers or key employees of the organization		15a 15b	-	\ <u>\</u>
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				1
16a		lar arrangemen			
	with a taxable entity during the year?		16a		1
.p	If "Yes," did the organization follow a written policy or procedure requiring the organizatio		: II		
	participation in joint venture arrangements under applicable federal tax law, and take steps	to safeguard the		, † ==	3.7
	organization's exempt status with respect to such arrangements?		16b		
	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed NONE		503	(-)(0)	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	ına 990-1 (Secti	on 501	(C)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Don request				
19	 Own website ☐ Another's website ☐ Upon request Describe in Schedule O whether (and if so, how), the organization made its governing doci 	iments conflict	of into	roet :	odiov
13	and financial statements available to the public during the tax year.	amenta, confict	OI IIILE	i est	Juney,
20	State the name, physical address, and telephone number of the person who possesses the b	ooks and record	s of the	3	
	organization: ► JEAN WHEAT-PALM 2096 MISSION STREET SE, SALEM OR 97302 503-364-7999				

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Form	990	וטטו	31

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization noi	any relate	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, director	r, or trustee.
					C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average	(do not c						Reportable	Reportable	Estimated
	hours per					or/trus			compensation from	amount of
	week (describe	유	ing	Q.	6	g,∓	Fo	from the	related organizations	other compensation
	hours for	d ivid	릁	Officer	y en	ploy	Former	organization	(W-2/1099-MISC)	from the
	related organizations	당	2		Key employee	9 t co]	(W-2/1099-MISC)		organization and related
	in Schedule	Individual trustee or director	=		уее	l mg				organizations
	(0)	66	Institutional trustee			Highest compensated employee				
(1) DEAN ZELLER										
CHAIRMAN	0	✓	Ш		L		L	0	0	0
(2) KATHLEEN NOLL										
VICE CHAIRMAN	0	✓	Ш	<u> </u>	<u></u>			0	0	0
(3) KATIE CLARK						ĺ		1		
SECRETARY	0	✓						0	0	0
(4) JAY ORAND	_					_				
TRUSTEE	0	✓				_		0	0	0
(5) DENNY NIELSEN		l								
TRUSTEE	0	✓					<u> </u>	0	0	0
(6) ELDRON HOEKSTRA										
ALTERNATE DIRECTOR	0	✓						0	0	0
(7) ADAM TALLINGER										
TRUSTEE	0	✓						0	0	0
(8) STEVE GIESBERS										
TRUSTEE	0	✓						0	0	0
(9) JEAN WHEAT-PALM]									
CEO	70			✓	✓			122,606.	0	20,062.
(10) CHRISTOPHER MONTI						1				
CFO	70			✓	<	1	-	98,127.	0	22,680
(11)				-						
(12)	 									1
(13)	-						-			
(14)										

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
	(C)											
	(A)	(B) Position (do not check more than or							(D)	(E)		(F)
	Name and title	Average hours per					is both or/trust		Reportable compensation	Reportab compensation		Estimated amount of
		week							from the	related organizatio		other
		(describe hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	ng ghee	Former	organization	(W-2/1099-N		compensation from the
		related organizations	dual :	tion:		힣	yee yee	=	(W-2/1099-MISC)			organization and related
		ın Schedule	trust	1 to		yee	mpe					organizations
		O)	8	stee			Highest compensated employee		,			
(4.5)							ä					
(15)									§			
(16)								 				
31	-		-									
(17)												
(18)												
(10)			1			 						
(19)												
(20)					Ħ			<u> </u>				
31		1										
(21)											-	
	,							_				
(22)		1					Ì					
(23)			 		1			\vdash				
(23)		1						ļ				
(24)			İ	<u> </u>	 					,,		
32												
(25)		1										
			ļ			<u> </u>		Ļ_				
1b	Sub-total			•		•		•	220,733.	<u> </u>	0	42,742
c · d	Total from continuation sheets to Part Total (add lines 1b and 1c)					•		>	220,733.		0	42,742
2	Total number of individuals (including but		to th							1		
_	reportable compensation from the organi		3 10 11	1030	. 113	ıca	abov.	c, ••	110 10001400 111	Ore than wi	00,000	O.
												Yes No
3	Did the organization list any former of	ficer, direc	tor, c	or tr	rust	ee,	key (emp	oloyee, or high	est compe	ensated	
	employee on line 1a? If "Yes," complete											3 /
4	For any individual listed on line 1a, is the											
	organization and related organizations individual					ו זנ	1 16	S,	complete Sci	ledule J id	or Such	4 /
5	Did any person listed on line 1a receive of					fro	m an	v ur	related organiz	zation or in	 dividual	
Ū	for services rendered to the organization											5 /
Section	on B. Independent Contractors											
1	Complete this table for your five highest											
	compensation from the organization. Rep	oort compe	ensatio	on f	or ti	he c	alend	iar y	year ending wit	th or within	the org	janization's tax
	year							т—			1	
	(A) Name and business add	iress							(B) Description of s	ervices		(C) Compensation
	·	<u>-</u>						╁╌	<u></u>			`
								\vdash				
											<u> </u>	
											24.52	note the d
2	Total number of independent contractor	-	_					o th	nose listed ab	ove) who		

Part	VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Grants	1a	Federated campaigns 1a		ing state of the s			
irar	ь	Membership dues 1b			, ,		
e E	С	Fundraising events 1c			•		
ar /	d	Related organizations 1d		(** 45			
S, G	е	Government grants (contributions) 1e		, , , , , , , , , , , , , , , , , , ,			177
Sign	f	All other contributions, gifts, grants,		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	1		
the E		and similar amounts not included above 1f			30 ~ m . _cm .	<u>.</u>	7
<u> </u>	g	Noncash contributions included in lines 1a-1f: \$					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a–1f	▶				注了第二种作用
		Bus	iness Code	A FUETAL			
Program Service Revenue	2a	MEMBER LOANS		2,985,694.	2,985,694.		
æ	b						
<u> </u>	С						
Š	d			!			_
Ē	е						
gra	f	All other program service revenue .					
Pr	g	Total. Add lines 2a–2f	>	2,985,694.		it (Line of the control of the cont	[] " [] [] [] [] []
	3	Investment income (including dividends,	, interest,				
		and other similar amounts) .	🟲	183,071	183,071.		
	4	Income from investment of tax-exempt bond p	roceeds ►				
	5	Royalties	, , ▶				
		(i) Real (ii)) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	С	Rental income or (loss)				ない。一般の一般の	<u> </u>
	d	Net rental income or (loss)	▶	الله المناسب ا			
	7a	Cross direction saids of	(ii) Other				
		assets other than inventory					
	Ь	Less. cost or other basis					
		and sales expenses .					
	C	Gain or (loss)					
	d	Net gain or (loss)		ি কৈউচ কেলেও -	77 C#L	1 7 5 <u>2</u> 7 3 1 4 4 7 7	ि शिक्षाक्रमान्त्रम् <i>त</i> ३ १
<u>o</u>		One as in a sure from the description		Region of Section 27. Note: Description			
JU.	8a	Gross income from fundraising events (not including \$					- 1
Revenue		of contributions reported on line 1c).				学与表现	
		See Part IV, line 18 a					
Other	_	· -					
Ó	b	Less: direct expenses b Net income or (loss) from fundraising even	ts . ▶	6		* ***	1-3-4-7
		Gross income from gaming activities.			**************************************		<u> </u>
	"	See Part IV, line 19 a			医克里氏		
	ь	Less: direct expenses b					
	C	Net income or (loss) from gaming activities	s >	<u> </u>	- · ·		*20
	10a	Gross sales of inventory, less		5 75,6 7 7 7		2 7 4 7 5	1.7
		returns and allowances a			1 4 4 4	The state of	
	ь	Less. cost of goods sold b			國 医骨髓性病		
	c	Net income or (loss) from sales of inventor	γ ►	1 12 - 2 - 1 - 2 - 1 2 -		1	
	Ť		siness Code		F-7-8777		5, 75
	11a	-				7/ 1/2	
	ь			-			
	С						
	d	All other revenue					<u> </u>
	е	Total. Add lines 11a-11d	▶		1,430		
	12	Total revenue. See instructions	▶	3,168,765.		0.	0.

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 respon	se to any question	in this Part IX	<u></u>	🔲
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	:			
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	263,475.			
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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	545,800. 33,010			
9	Other employee benefits	155,065.			
10	Payroll taxes	85.406	· · · · · · · · · · · · · · · · · · ·		
11	Fees for services (non-employees).	00,400			
a	Management				
b	Legal	13,076.			
С	Accounting	13,550.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	91,470.			
12	Advertising and promotion	110,303.			
13	Office expenses	32,057.			
14	Information technology	175,787.			
15	Royalties	,	·		
16	Occupancy	86,505.			
17	Travel	-			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	66,026.			
20	Interest	580,649.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	69,238	•		
23	insurance	21,546.			
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	PROVISION FOR LOAN LOSSES	398,858.	<u> </u>		
b	OPERATING FEES	355,074			
С	CHARITABLE DONATIONS	33,333			
d	MISCELLANIOUS	22,268.			
e	All other expenses ASSOC DUES	16,269.			
25	Total functional expenses. Add lines 1 through 24e	3,168,765.			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	3,733,733.			
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

P	art X	Balance Sheet			Page II
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,014,864.	1	757,200.
	2	Savings and temporary cash investments	16,922,403.	2	22,664,770.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
S	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net	34,260,097.	7	33,790,047
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	148,240.	9	177,900
	10a	Land, buildings, and equipment cost or			
		other basis. Complete Part VI of Schedule D 1,931,91		L. d	
	b	Less. accumulated depreciation 10b 1,285,37	1. 723,473.		662,525.
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	<u> </u>
	13	Investments—program-related See Part IV, line 11	-	13	
	14	Intangible assets	470.000	14	470.007
	15	Other assets. See Part IV, line 11	172,953.	15	172,037.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	53,242,030.	16	58,224,479.
	17	Accounts payable and accrued expenses	48,143,951.	17	53,126,400.
	18 19	Grants payable	~~~~	19	-
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	ļ	21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
_	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 D			
	26	Total liabilities. Add lines 17 through 25	AQ 1/3 051	25	53 126 ADD
	26	Organizations that follow SFAS 117, check here ▶ □ and complete	48,143,951.	26	53,126,400.
ces		lines 27 through 29, and lines 33 and 34.		50° v£	
Net Assets or Fund Balances	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
<u> </u>	30	Capital stock or trust principal, or current funds	the state of the s	30	A CONTRACTOR OF THE PARTY OF TH
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .	5,098,079	32	5,098,079
Zet.	33	Total net assets or fund balances	5,098,079	33	5,098,079.
	34	Total liabilities and net assets/fund balances	53,242,030.	34	58,224,479.
					Form 990 (2011

Par	XI Reconciliation of Net Assets					
	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		2 100	765	
2	Total expenses (must equal Part IX, column (A), line 25)	2			3,765	
3	Revenue less expenses. Subtract line 2 from line 1	3		3,168,765.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5 000	0.	
5	Other changes in net assets or fund balances (explain in Schedule O)	5	5,098,079.			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	-				
U	column (B))	6		5.098	3,079.	
Part	XII Financial Statements and Reporting				.,	
	Check if Schedule O contains a response to any question in this Part XII				. 🗆	
				Yes	No	
1	Accounting method used to prepare the Form 990. Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	lain ın				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		1	
b					1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over of the audit, review, or compilation of its financial statements and selection of an independent account		2c			
	If the organization changed either its oversight process or selection process during the tax year, exp Schedule O.	olain in	調製			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the yearssued on a separate basis, consolidated basis, or both:	r were				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			建門	200	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set f the Single Audit Act and OMB Circular A-133?	orth in	3a		1	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		3b			
			Form	. 990	(2011)	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization **VALLEY CREDIT UNION** 93-6027729 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, 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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. . 🦉 . Held at the End of the Tax Year a Total number of conservation easements . 2a Total acreage restricted by conservation easements. 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 . . . (ii) Assets included in Form 990, Part X \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

В-	_	_	2

Part								
3	Using the organization's acquisition, a collection items (check all that apply):	accession,	and other rec	ords, chec	k any of the	e follov	ving that are a	significant use of its
а	☐ Public exhibition ~		d	☐ Loan	or exchang	e prog	rams	
b	☐ Scholarly research		е	☐ Othe	r			
С	☐ Preservation for future generations							
4	Provide a description of the organizat	ion's colle	ctions and exp	laın how t	hey further	the org	anızation's exe	empt purpose in Part
	XIV.							
5	During the year, did the organization							ilar
	assets to be sold to raise funds rather			-				· 🗌 Yes 🗌 No
Part					janization a	answe	red "Yes" to f	Form 990, Part IV,
	line 9, or reported an amoun						· 	
1a	Is the organization an agent, trustee,							
	included on Form 990, Part X?					•		· Yes No
b	If "Yes," explain the arrangement in Pa	art XIV and	complete the	following t	able:			A
						-	+	Amount
C	5 5					10		
d	Additions during the year					10	+	
e	Distributions during the year					1e		
f o-	Ending balance					1f		□ Vaa □ Na
2a	Did the organization include an amount "No."		1 990, Part X, III	ne 21? .		•		☐ Yes ☐ No
Par	If "Yes," explain the arrangement in Particle 1. Endowment Funds. Complete 1.		organization	neworod	"Voc" to E	orm 0	00 Part IV III	20.10
rai	Endowment i dilds. Compi	(a) Curren		rior year				ack (e) Four years back
1a	Beginning of year balance	(4) 04:101	,		(0) 1110 300	o Daon	(a) moo your be	TOTAL PARTIES
b	Contributions							
C	Net investment earnings, gains, and	<u>'</u>						
·	losses							
d								The state of the s
e	Other expenditures for facilities and							
	programs		1					
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of t	he current	vear end balar	ce (line 1	a. column (a)) held	as.	TOTAL STRUCTURES SECTION
а	Board designated or quasi-endowmer	nt ▶	%		91	,,		
b	Permanent endowment	%						
С	Temporarily restricted endowment ▶	·	%					
	The percentages in lines 2a, 2b, and 2							
За	Are there endowment funds not in the			nization th	at are held	and ad	ministered for	the
	organization by.							Yes No
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations							. 3a(ii)
b	If "Yes" to 3a(II), are the related organi							3b
4	Describe in Part XIV the intended uses							
Part	VI Land, Buildings, and Equip	ment. Se	ee Form 990,	⊃a rt X, l ın	ne 10.			
	Description of property	(a)	Cost or other basis (investment)		or other basis other)	d	Accumulated epreciation	(d) Book value
1a	Land				193093	[].	第三种工程 :	193093
b	Buildings				774447		369841	404606
С	Leasehold improvements				150387		145641	4746
d	Equipment				193698		182477	11221
е	Other	.			636272		587413	48859
Total.	Add lines 1a through 1e. (Column (d) n	nust equal	Form 990, Pan	X, columi	n (B), line 10	(c).)	▶	662525

Part VII Inve	estments - Other Securities.	See Form 990, Part X	, line 12.	
	ption of security or category uding name of security)	(b) Book value	(c) Method of v Cost or end-of-year	
(1) Financial deriva	atives			
(2) Closely-held ed	quity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F) (G)				
(H)				
(I)				
	equal Form 990, Part X, col. (B) line 12.)		10000000000000000000000000000000000000	
	estments—Program Related	1 See Form 990 Part \		The state of the s
	cription of investment type	(b) Book value	(c) Method of	valuation
(4) 500	anphon of invocations type	(5) 2001 14:40	Cost or end-of-year	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	equal Form 990, Part X, col (B) line 13)			
Part IX Oth	er Assets. See Form 990, Pa			
	(a	n) Description		(b) Book value
(1)			· · · · · · · · · · · · · · · · · · ·	
(2)				
(3)				
(4)				
(5) (6)	 			
(7)				
(8)	·			
(9)		·		
(10)				
) must equal Form 990, Part X, co	ol (B) line 15)		-
	er Liabilities. See Form 990,			
) Description of liability	(b) Book value		THE PARTY OF THE P
(1) Federal incom	ne taxes			
(2)	-			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
	equal Form 990, Part X, col. (B) line 25.)		一点,要:要 多点证	
			o the organization's financial stat	ements that reports the
organization's liab	pility for uncertain tax positions u	naer FIN 48 (ASC 740).		

Schedu	le D (Form 990) 2011			Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financia	Staten	nents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	3168765
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	3168765
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	0
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9.		10	0
Part	XII Reconciliation of Revenue per Audited Financial Statements With Reve			
1	Total revenue, gains, and other support per audited financial statements		1	3168765
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		. 151	-
а	Net unrealized gains on investments 2a		1.75	
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIV.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		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	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	3168765
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Exp			
1	Total expenses and losses per audited financial statements			3168765
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	, , ,	7.32	
а	Donated services and use of facilities		1	
b	Pnor year adjustments			
С	Other losses			
d	Other (Describe in Part XIV)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		7 375	
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV.)			
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	3168165
Part				
Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. dditional information.			
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Part XIV,	Supplemental Information (continued)	<u> </u>
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