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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2012

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

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

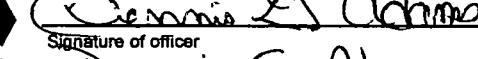
Open to Public
Inspection

A For the 2012 calendar year, or tax year beginning		and ending	
B Check if applicable	C Name of organization		D Employer identification number
<input type="checkbox"/> Address change	FIRST COMMERCE CREDIT UNION		59-0687423
<input checked="" type="checkbox"/> Name change	Doing Business As		E Telephone number
<input type="checkbox"/> Initial return	Number and street (or P O box if mail is not delivered to street address)		Room/suite
<input type="checkbox"/> Terminated	2073 SUMMIT LAKE DRIVE		100
<input type="checkbox"/> Amended return	City, town or post office, state, and ZIP code		(800) 533-5772
<input type="checkbox"/> Application pending	TALLAHASSEE FL 32317		G Gross receipts \$
			28,375,066
F Name and address of principal officer			H(a) Is this a group return for affiliates?
CECILIA HOMISON 2073 SUMMIT LAKE DRIVE, SUITE 100, TALLAHA			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I Tax-exempt status	<input type="checkbox"/> 501(c)(3)	<input checked="" type="checkbox"/> 501(c) (14)	H(b) Are all affiliates included?
< (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			<input type="checkbox"/> Yes <input type="checkbox"/> No
J Website: ► WWW.FIRSTCOMMERCECU.ORG			
K Form of organization	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Association <input checked="" type="checkbox"/> Other ► CREDIT UNION
		L Year of formation:	1940
		M State of legal domicile	FL

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: MEMBERS IN THE FRAMEWORK OF A FINANCIAL COOPERATIVE.	TO PROVIDE SERVICES AND EDUCATION TO	

Revenue	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	141
	6 Total number of volunteers (estimate if necessary)	6	10
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	44,424
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0
Expenses	8 Contributions and grants (Part VIII, line 1h)	RECEIVED	Prior Year
	9 Program service revenue (Part VIII, line 2g)	0	0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	23,632,741	23,320,686
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	449,338	491,410
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,066,005	3,357,755
		27,148,084	27,169,851
		0	0
Net Assets or Fund Balances	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	7,526,494	8,429,491
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25)	0	0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17,240,180	17,376,525
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	24,766,674	25,806,016
19 Revenue less expenses. Subtract line 18 from line 12	2,381,410	1,363,835	
	Beginning of Current Year	End of Year	
20 Total assets (Part X, line 16)	349,230,187	354,673,140	
21 Total liabilities (Part X, line 26)	304,616,736	308,597,528	
22 Net assets or fund balances Subtract line 21 from line 20	44,613,451	46,075,612	

Part II Signature Block	
Under penalties of perjury, 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. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	

Sign Here		8-15-13
	Signature of officer	Date
	DENNIS G. ADAMS CFO	
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	DOUGLAS ORTH		8-15-13		P01076394
	Firm's name ► ORTH, CHAKLER, MURNANE AND CO., CPAs		Firm's EIN ► 65-0662923		
	Firm's address ► 12060 SW 129 COURT, SUITE 201, MIAMI, FL 33186		Phone no (305) 232-8272		

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.
HTA

Form 990 (2012)

15

Part III**Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission.

TO BE OUR MEMBERS' FINANCIAL PARTNER FOR LIFE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

If "Yes," describe these new services on Schedule O

Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

If "Yes," describe these changes on Schedule O

Yes No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$) including grants of \$ (Revenue \$)

TALLAHASSEE'S #1 AUTO LENDING PROGRAM OVER THE PAST DECADE- FIRST COMMERCE HAS EARNED THE TITLE OF TALLAHASSEE'S NUMBER ONE AUTO LENDER YEAR AFTER YEAR. THIS TITLE HAS BEEN CONSISTENTLY EARNED BECAUSE THE CREDIT UNION OFFERS A RANGE OF AUTO LOAN CHOICES FOR ALMOST EVERY BUDGET AND CREDIT LEVEL. FIRST COMMERCE'S FLEXIBLE TERMS AND COMPETITIVE RATES ALLOW MEMBERS TO PURCHASE THE VEHICLE THEY NEED AT A MONTHLY PAYMENT THEY CAN AFFORD. OVER 9,000 MEMBERS CURRENTLY ENJOY THE MOST CONSUMER-FRIENDLY AUTO LOAN PROGRAM IN THE AREA

4b (Code) (Expenses \$) including grants of \$ (Revenue \$)

BUSINESS SERVICES PROGRAM - FIRST COMMERCE CREDIT UNION HAS BEEN AN INNOVATOR IN THE DELIVERY OF SERVICES TO ITS MEMBERS. FCCU HAS ADAPTED TO A CHANGING WORLD WHILE REMAINING FOCUSED ON THE MISSION TO BE "PEOPLE HELPING PEOPLE" AND BUILDING A TRUSTED FINANCIAL INSTITUTION THAT NOW HAS NINE BRANCHES AND CLOSE TO 40,000 MEMBERS. TODAY, IN ADDITION TO PROVIDING SERVICES FOR THE VARIED FINANCIAL NEEDS OF INDIVIDUAL MEMBERS, FCCU OFFERS IBIZ, A BUSINESS SERVICES PROGRAM, WITH A NEW AND EXCITING LINE OF SERVICES FOR BUSINESSES OF ALL SIZES. IBIZ INCLUDES FREE AND INTEREST-BEARING CHECKING OPTIONS, MERCHANT SERVICES, PAYROLL SERVICES, BUSINESS LENDING, BUSINESS CREDIT CARDS, AND SBA LENDING.

4c (Code) (Expenses \$) including grants of \$ (Revenue \$)

FIRST COMMERCE SERVICES OFFERS A WIDE ARRAY OF ELECTRONIC SERVICES TO MEMBERS. MORE THAN 16,000 MEMBERS UTILIZE IBRANCH! ONLINE BANKING TO KEEP TRACK OF THEIR ACCOUNTS, MAKE TRANSFERS, AND PAY BILLS. FCCU'S BILL PAY OFFERS SAME DAY PAYMENTS AND OVERNIGHT CHECK OPTIONS TO GIVE MEMBERS FLEXIBILITY IN HOW THEY MAKE THEIR PAYMENTS. PERSON-TO-PERSON PAYMENTS (P2P) AND ACCOUNT-TO-ACCOUNT (A2A) TRANSFERS GIVE MEMBERS CONVENIENT OPTIONS IN MOVING THEIR MONEY. FCCU'S IBRANCHMOBILE! WAS DEPLOYED IN EARLY 2012 WITH BROWSER BASED AND SMS (TEXT MESSAGE) OPTIONS. IN SEPTEMBER 2012 A DOWNLOADABLE APPLICATION WAS LAUNCHED FOR BOTH APPLE DEVICES AND ANDROID DEVICES. IN A LITTLE OVER A YEAR, ROUGHLY 13% OF THE MEMBERSHIP HAS ENROLLED IN MOBILE BANKING. MEMBERS CAN KEEP TRACK OF ACCOUNTS, MAKE TRANSFERS, PAY BILLS, AND USE OUR P2P SERVICE. FCCU ALSO PRESENTS MEMBERS AND NON-MEMBERS WITH OPTIONS TO OPEN AN ACCOUNT, APPLY FOR AUTO OR PERSONAL LOANS, AND APPLY FOR A MORTGAGE ONLINE. THE 15-MINUTE MORTGAGE APPLICATION GIVES MEMBERS AN IMMEDIATE DECISION ON THEIR LOAN

4d Other program services (Describe in Schedule O)

(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ►

0

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.

2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?

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

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.

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

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

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

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, for escrow or custodial account liability, 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

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

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.

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI

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

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII

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

e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

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

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII

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 and XII is optional

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

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

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

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

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)

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

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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
1		X
2		X
3	X	
4		
5		
6	X	
7	X	
8	X	
9	X	
10	X	
11a	X	
11b	X	
11c	X	
11d	X	
11e	X	
11f	X	
12a	X	
12b	X	
13	X	
14a	X	
14b	X	
15	X	
16	X	
17	X	
18	X	
19	X	
20a	X	
20b		

Part IV Checklist of Required Schedules (continued)

		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	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25	24a	X
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
24c	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	
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	
25b	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, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a	a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X
28b	b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28b	X
28c	c 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	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
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	X
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	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
35b	b If "Yes" to line 35a, 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	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	X

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	5,928
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
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	141
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)</i>	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X
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, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country <i>See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts</i>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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 as charitable contributions?	6a	X
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).	7a	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7b	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8	
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?	9	
9	Sponsoring organizations maintaining donor advised funds.	9a	
a	Did the organization make any taxable distributions under section 4966?	9b	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	10a	
10	Section 501(c)(7) organizations. Enter	10b	
a	Initiation fees and capital contributions included on Part VIII, line 12	11a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	11b	
11	Section 501(c)(12) organizations. Enter	12a	
a	Gross income from members or shareholders	12b	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	13a	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	13b	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	13c	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	14a	X
a	Is the organization licensed to issue qualified health plans in more than one state?	14b	
	<i>Note. See the instructions for additional information the organization must report on Schedule O</i>		
b	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		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Section A. Governing Body and Management

1a	Enter the number of voting members of the governing body at the end of the tax year 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 committee, explain in Schedule O	1a	7	Yes	No
1b	Enter the number of voting members included in line 1a, above, who are independent	1b	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6	X		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.	8a	X		
a	The governing body?	8b	X		
b	Each committee with authority to act on behalf of the governing body?	9			X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		
13	Did the organization have a written whistleblower policy?		
14	Did the organization have a written document retention and destruction policy?		
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?		
a	The organization's CEO, Executive Director, or top management official.		
b	Other officers or key employees of the organization		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		
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			

Section C. Disclosure

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ►

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website Upon request Other (explain in Schedule O)

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 during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► WILMA WOOTEN (850) 410-3563

PO BOX 6416 TALLAHASSEE, FL 32314

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

 Check if Schedule O contains a response to any question in this Part VII.
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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated			
(1) J.R PHELPS DIRECTOR	1.00 0.00								
(2) RIVERS BUFORD III VICE CHAIRMAN	1.00 0.00		X						
(3) MIKE GOMEZ TREASURER	1.00 0.00			X					
(4) JERRY OSTERYOUNG CHAIRMAN	1.00 0.00			X					
(5) CANITA PETERSON SECRETARY	1.00 0.00				X				
(6) KATHY ARRANT DIRECTOR	1.00 0.00					X			
(7) JOHN GRAYSON DIRECTOR	1.00 0.00						X		
(8) CECILIA HOMISON CEO	40.00 0.00							348,517	38,207
(9) DENNIS G. ADAMS VP/CFO	40.00 0.00							132,329	8,940
(10) MARY ESTES SR VP OF OPERATIONS	40.00 0.00							230,259	24,357
(11) JEFF BOND VP AND CIO	40.00 0.00							189,214	17,413
(12) CARLA DE BALDO VP OF SALES	40.00 0.00							145,169	16,103
(13) DONNA MORAN DIRECTOR OF HUMAN RESOURCES	40.00 0.00							137,864	20,518
(14) ANDY PRICE GENERAL COUNCIL	40.00 0.00							123,293	10,876

Part VII		Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)						
		(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)
Individual trustee or director	Institutional trustee			Officer	Key employee	Highest compensated employee		
(15) SHERWOOD BROWN BUSINESS SERVICES MANGER	40.00 0.00			X		120,587		4,157
(16) CHUCK HUDSON JACKSON COUNTY EXECUTIVE	40.00 0.00			X		106,359		8,155
(17) WILMA WOOTEN CONTROLLER	40.00 0.00			X		107,429		7,872
(18) JOHN MEDINA PRESIDENT-INVESTMENT DIVISION	40.00 0.00			X		123,845		9,669
(19)								
(20)								
(21)								
(22)								
(23)								
(24)								
(25)								
1b Sub-total						► 1,764,865	0	166,267
c Total from continuation sheets to Part VII, Section A						► 0	0	0
d Total (add lines 1b and 1c)						► 1,764,865	0	166,267
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization					► 15			
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual						► 3	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual						► 4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person.						► 5	X	
Section B. Independent Contractors								
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year								
(A) Name and business address				(B) Description of services		(C) Compensation		
CORNERVIEW BUILDING LLC	1625 SUMMIT LAKE DRIVE, STE 229, TALLAHASSE	MONTHLY LEASE						1,167,305
DORIS MALOY TAX COLLECTOI	PO BOX 1835, TALLAHASSEE, FL 32302	TAXES-PROPERTY/TANGIE						249,739
JACK HENRY & ASSOCIATES	PO BOX 503328, ST. LOUIS, MO 63150	DATA PROCESSING SERV						444,244
THIRD DEGREE ADVERTISING	501 N WALKER, STE 100, OKLAHOMA CITY, OK 7	ADVERTISING						621,255
FISERV	PO BOX 409287, ATLANTA, GA 30384	DATA PROCESSING/ATM H						1,133,235
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization					► 13			

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

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)*Check if Schedule O contains a response to any question in this Part IX

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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	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	1,308,890	1,308,890		
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	5,237,741	5,237,741		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	319,239	319,239		
9 Other employee benefits	1,060,189	1,060,189		
10 Payroll taxes	503,432	503,432		
11 Fees for services (non-employees)				
a Management	50,342	50,342		
b Legal	109,204	109,204		
c Accounting	150,250	150,250		
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	421,364	421,364		
12 Advertising and promotion	1,121,968	1,121,968		
13 Office expenses	575,172	575,172		
14 Information technology	128,499	128,499		
15 Royalties	0			
16 Occupancy	1,614,862	1,614,862		
17 Travel	157,986	157,986		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	50,650	50,650		
20 Interest	2,081,155	2,081,155		
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	1,346,072	1,346,072	0	0
23 Insurance	177,978	177,978		
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.)				
a SEET ATTACHED SCHEDULE	9,391,023	9,391,023		
b	0			
c	0			
d	0			
e All other expenses	0			
25 Total functional expenses. Add lines 1 through 24e	25,806,016	25,806,016	0	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet**Check if Schedule O contains a response to any question in this Part X

		(A) Beginning of year	(B) End of year
Assets	1 Cash—non-interest-bearing	3,680,009	1 3,748,238
	2 Savings and temporary cash investments	45,551,203	2 18,326,982
	3 Pledges and grants receivable, net	0	3 0
	4 Accounts receivable, net	1,264,013	4 1,459,673
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees		
	Complete Part II of Schedule L		
	6 Loans and other 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) Complete Part II of Schedule L		
	7 Notes and loans receivable, net	254,639,131	7 280,827,724
	8 Inventories for sale or use	8	
	9 Prepaid expenses and deferred charges	928,532	9 734,384
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 27,541,735	
	b Less accumulated depreciation	10b 9,555,816	10c 16,717,861 17,985,919
	11 Investments—publicly traded securities	8,018,652	11 14,264,109
	12 Investments—other securities See Part IV, line 11	4,821,784	12 1,155,701
Liabilities	13 Investments—program-related See Part IV, line 11	0	13 0
	14 Intangible assets	0	14 0
	15 Other assets See Part IV, line 11	13,609,002	15 16,170,410
	16 Total assets. Add lines 1 through 15 (must equal line 34)	349,230,187	16 354,673,140
	17 Accounts payable and accrued expenses	5,473,448	17 5,592,899
	18 Grants payable	18	
	19 Deferred revenue	19	
	20 Tax-exempt bond liabilities	20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D	21	
Net Assets or Fund Balances	22 Loans and other 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	24,000,000	23 14,000,000
	24 Unsecured notes and loans payable to unrelated third parties	0	24 0
	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	275,143,288	25 289,004,629
	26 Total liabilities. Add lines 17 through 25	304,616,736	26 308,597,528
	Organizations that follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets		27	
28 Temporarily restricted net assets		28	
29 Permanently restricted net assets		29	
Organizations that do not follow SFAS 117 (ASC958), check here ► <input checked="" type="checkbox"/> and complete lines 30 through 34.			
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	44,613,451	32 46,075,612	
33 Total net assets or fund balances	44,613,451	33 46,075,612	
34 Total liabilities and net assets/fund balances	349,230,187	34 354,673,140	

Part XI Reconciliation of Net AssetsCheck 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	27,169,851
2	Total expenses (must equal Part IX, column (A), line 25)	2	25,806,016
3	Revenue less expenses Subtract line 2 from line 1	3	1,363,835
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	44,613,451
5	Net unrealized gains (losses) on investments	5	98,326
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	46,075,612

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both		
	<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b	Were the organization's financial statements audited by an independent accountant?	2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		
	<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

OMB No 1545-0047

2012

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Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
► See separate instructions.

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

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

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

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

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

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

Name of organization	Employer identification number
FIRST COMMERCE CREDIT UNION	59-0687423

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ► \$ 15,350
- 3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ 15,350
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ► \$ 15,350
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) FLORIDA CREDIT UNION POLITICAL ACTION	3773 COMMONWEALTH BLVD TALLAHASSEE, FL 32303	59-0246163	15,000	
(2) ANDY GARDINER FOR SENATE	1013 E MICHIGAN STREET ORLANDO, FL 32806		250	
(3) DARLENE TAYLOR FOR GA HOUSE	PO BOX 6580 THOMASVILLE, GA 31758		100	
(4)				
(5)				
(6)				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		0
b	Total lobbying expenditures to influence a legislative body (direct lobbying)		0
c	Total lobbying expenditures (add lines 1a and 1b)	0	0
d	Other exempt purpose expenditures		0
e	Total exempt purpose expenditures (add lines 1c and 1d)	0	0
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	0	0
If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:			
Not over \$500,000		20% of the amount on line 1e	
Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000		\$1,000,000	
g	Grassroots nontaxable amount (enter 25% of line 1f)	0	0
h	Subtract line 1g from line 1a If zero or less, enter -0-	0	0
i	Subtract line 1f from line 1c If zero or less, enter -0-	0	0
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount		0	0	0	0
b Lobbying ceiling amount (150% of line 2a, column(e))					0
c Total lobbying expenditures		0	0	0	0
d Grassroots nontaxable amount		0	0	0	0
e Grassroots ceiling amount (150% of line 2d, column (e))					0
f Grassroots lobbying expenditures		0	0	0	0

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

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			0
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	0
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		
5 Taxable amount of lobbying and political expenditures (see instructions)	5	0

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information

Part IV Supplemental Information (continued)

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

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

OMB No 1545-0047

2012Open to Public
Inspection

Name of the organization

FIRST COMMERCE CREDIT UNION

Employer identification number

59-0687423

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the 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

6 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.

1 Purpose(s) of conservation easements held by the organization (check all that apply)	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of an historically important land area
	<input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space
2 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	
a Total number of conservation easements	Held at the End of the Tax Year
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►	2d
4 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 violations, and enforcement of the conservation easements it holds? ►	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 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 ► \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, 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

1a 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 XIII, the text of the footnote to its financial statements that describes these items	► \$
b 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	► \$
2 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	
a Revenues included in Form 990, Part VIII, line 1	► \$
b Assets included in Form 990, Part X	► \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a Public exhibition
 b Scholarly research
 c Preservation for future generations

d Loan or exchange programs
 e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	0
1d	
1e	
1f	0

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	0	0			
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	0	0	0	0	0

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ► %

b Permanent endowment ► %

c Temporarily restricted endowment ► %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		0	3,851,526		3,851,526
b Buildings		0	13,446,337	2,994,187	10,452,150
c Leasehold improvements		0	1,698,791	458,270	1,240,521
d Equipment		0	8,545,081	6,103,359	2,441,722
e Other		0	0	0	0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ► 17,985,919

Part VII Investments—Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely-held equity interests	0	
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total (Column (b) must equal Form 990, Part X, col. (B) line 12) ►	0	

Part VIII Investments—Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total (Column (b) must equal Form 990 Part X, col. (B) line 13) ►	0	

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) . . . ►	0

Part X Other Liabilities. See Form 990, Part X, line 25.

(1)	(a) Description of liability	(b) Book value
(2)	Federal income taxes	0
(3)	SHARE DRAFTS	65,991,382
(4)	SHARES	52,324,894
(5)	MONEY MARKET	80,048,651
(6)	IRA SHARES	19,260,441
(7)	CERTIFICATES	71,379,261
(8)		
(9)		
(10)		
(11)		
Total (Column (b) must equal Form 990, Part X, col. (B) line 25) ►	289,004,629	

2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. . . .

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments	2a	
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII)	2d	
e Add lines 2a through 2d	2e	0
3 Subtract line 2e from line 1	3	0
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII)	4b	
c Add lines 4a and 4b	4c	0
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	0

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIII)	2d	
e Add lines 2a through 2d	2e	0
3 Subtract line 2e from line 1	3	0
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII)	4b	
c Add lines 4a and 4b	4c	0
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	0

Part XIII Supplemental Information

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 X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Part X Line 2 THE CREDIT UNION IS EXEMPT FROM MOST FEDERAL, STATE, AND LOCAL TAXES UNDER

THE PROVISIONS OF THE INTERNAL REVENUE CODE AND STATE LAWS THE INCOME TAXES TOPIC OF THE

FASB ASC CLARIFIES ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES REPORTED IN THE CONSOLIDATED

FINANCIAL STATEMENTS THE INTERPRETATION PROVIDES CRITERIA FOR ASSESSMENT OF INDIVIDUAL

TAX POSITIONS AND A PROCESS FOR RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS

TAX POSITIONS ARE EVALUATED ON WHETHER THEY MEET THE MORE LIKELY THAN NOT STANDARD FOR

SUSTAINABILITY UPON EXAMINATION BY TAX AUTHORITIES THE CREDIT UNION IS A STATE-CHARTERED

CREDIT UNION AS DEFINED IN THE INTERNAL REVENUE CODE (IRC) SECTION 504(14) AS SUCH, THE

Part XIII Supplemental Information (continued)

CREDIT UNION IS EXEMPT FROM FEDERAL TAXATION OF INCOME DERIVED FROM THE PERFORMANCE OF ACTIVITIES DIRECTLY RELATED TO ITS EXEMPT PURPOSES. HOWEVER, IRC SECTION 511 IMPOSES A TAX ON UNRELATED BUSINESS INCOME (UBI) DERIVED BY STATE-CHARTERED CREDIT UNIONS. BEGINNING IN MARCH 2008, THE INTERNAL REVENUE SERVICE (IRS) RELEASED TECHNNICAL ADVICE MEMORANDUMS (TAMs) TO SPECIFIC STATE-CHARTERED CREDIT UNIONS SPECIFYING THE REVENUE SOURCES SUBJECT TO UNRELATED BUSINESS INCOME TAX (UBIT). UBI MAY ALSO BE SUBJECT TO TAX IN CERTAIN STATES. MANAGEMENT HAS ASSESSED THE CREDIT UNION'S ACTIVITIES AND ANY POTENTIAL FEDERAL OR STATE INCOME TAX LIABILITY AND DETERMINED THAT THE CREDIT UNION HAS NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITON OR DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS. ADDITIONALLY, NO INTEREST AND PENALTIES HAVE BEEN RECORDED IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS RELATED TO UNCERTAIN TAX POSITIONS. CURRENTLY, THE 2011, 2010, AND 2009 FEDERAL INCOME TAX RETURNS ARE OPEN FOR EXAMINATION BY THE IRS. THE FILING YEARS OPEN FOR EXAMINATION BY THE STATE, IF APPLICABLE, MAY BE EQUAL TO, GREATER THAN OR LESS THAN THE YEARS OPEN FOR EXAMINATION BY THE IRS.

SCHEDULE J
(Form 990)

Compensation Information

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

2012

- Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.
- Attach to Form 990. ► See separate instructions.

Open to Public
Inspection

Name of the organization

FIRST COMMERCE CREDIT UNION

Employer identification number

59-0687423

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

<input type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 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

- a** The organization?

- b** Any related organization?

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

- a** The organization?

- b** Any related organization?

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

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
CECILIA HOMISON	(i) 234,500	22,500	91,517	18,918	19,289	386,724	
1 CEO	(ii)					0	
MARY ESTES	(i) 176,500	17,050	36,709	13,198	11,159	254,616	
2 SR VP OF OPERATIONS	(ii)					0	
JEFF BOND	(i) 155,000	18,120	16,094	11,007	6,406	206,627	
3 VP AND CIO	(ii)					0	
CARLA DE BALDO	(i) 130,900	14,105	164	9,572	6,531	161,272	
4 VP OF SALES	(ii)					0	
DONNA MORAN	(i) 121,124	15,600	1,140	9,596	10,922	158,382	
5 DIRECTOR OF HUMAN RESOURCES	(ii)					0	
6	(i)						
7	(i)						
8	(i)						
9	(i)						
10	(i)						
11	(i)						
12	(i)						
13	(i)						
14	(i)						
15	(i)						
16	(i)						

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information

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 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization

FIRST COMMERCE CREDIT UNION

Employer identification number

59-0687423

Form 990 Part VI Section A Line 6 THE CREDIT UNION HAS MEMBERS. THE CREDIT UNION'S MEMBERS

HAVE RIGHTS TO ELECT THE MEMBERS OF THE GOVERNING BODY. THE CREDIT UNION'S MEMBERS ALSO

RECEIVE A SHARE OF THE ORGANIZATION'S PROFITS IN THE FORM OF CASH DIVIDENDS

Form 990 Part VI Section A Line 7A MEMBERS OF THE CREDIT UNION HAVE THE RIGHT TO APPROVE THE

GOVERNING BODYS ELECTION AND REMOVAL OF MEMBERS OF THE GOVERNING BODY, AS WELL AS OTHER

MATTERS THAT ARE SUBJECT TO THE APPROVAL OF MEMBERS OF THE CREDIT UNION AS THEY OCCUR.

Form 990 Part VI Section B Line 11B THE ACCOUNTING DEPARTMENT DOES VERIFY AND TIE OUT THE

FIGURES TO THE FINANCIAL STATEMENTS

Form 990 Part VI Section B Line 12C THE EXTERNAL AUDITORS PERFORM AN AUDIT OF EMPLOYEE

ACCOUNTS AND THEIR RESPECTIVE FINANCIAL AND GENERAL LEDGER TRANSACTIONS ON A QUARTERLY BASIS

TO MONITOR AND VERIFY THAT THERE ARE NO TRANSACTIONS PERFORMED BY THE EMPLOYEE AND/OR ON THEIR

RESPECTIVE ACCOUNT THAT ARE IMPROPER AND/OR CONFLICT WITH THEIR JOB RESPONSIBILITIES

Form 990 Part VI Section B Line 15A&B A MINIMUM OF ONCE A YEAR, COMPARABLE COMPENSATION DATA

IS RESEARCHED USING SALARY.COM. SEVERAL DIMENSIONS ARE EVALUATED AND A SALARY RANGE IS

RECOMMENDED. THIS RANGE IS APPROVED BY THE CEO AND THEN ULTIMATELY BY THE BOARD OF DIRECTORS

Form 990 Part VI Section C Line 19 CONFLICTS OF INTEREST POLICIES ARE NOT PUBLICLY PUBLISHED

QUARTERLY FINANCIALS ARE PUBLISHED AT THE ENTRANCE OF EACH OF THE BRANCH OFFICES, THE CALL

REPORT IS FILED QUARTERLY WHICH IS PUBLIC INFORMATION AND OUR ANNUAL REPORT IS AVAILABLE TO

ALL MEMBERS WHICH CONTAINS FINANCIALS. IF REQUESTED, BY-LAWS WOULD BE MADE AVAILABLE FOR

VIEWING AT THE ADMINISTRATIVE OFFICES

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

Department of the Treasury
Internal Revenue Service
Name of the organization
FIRST COMMERCE CREDIT UNION

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047
2012

Open to Public
Inspection

Name of the organization
FIRST COMMERCE CREDIT UNION
Employer identification number
59-0687423

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) SIX PILLARS FINANCIAL ADVISORS, LLC 45-3322731 2073 SUMMIT LAKE DRIVE, ROOM 100 TALLAHASSEE, FL 32317	FINANCIAL ADVISORS	FL	126,910	82,035	FLORIDA COMME
(2)
(3)
(4)
(5)
(6)

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	Yes	No
(1)
(2)
(3)
(4)
(5)
(6)
(7)

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34)

because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(k) Percentage ownership
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
1a		
1b		
1c		
1d		
1e		
1f		
1g		
1h		
1i		
1j		
1k		
1l		
1m		
1n		
1o		
1p		
1q		
1r		
1s		

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
 b Gift, grant, or capital contribution to related organization(s)
 c Gift, grant, or capital contribution from related organization(s)
 d Loans or loan guarantees to or for related organization(s)
 e Loans or loan guarantees by related organization(s)
 f Dividends from related organization(s)
 g Sale of assets to related organization(s)
 h Purchase of assets from related organization(s)
 i Exchange of assets with related organization(s)
 j Lease of facilities, equipment, or other assets to related organization(s)
 k Lease of facilities, equipment, or other assets from related organization(s)
 l Performance of services or membership or fundraising solicitations for related organization(s)
 m Performance of services or membership or fundraising solicitations by related organization(s)
 n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
 o Sharing of paid employees with related organization(s)
 p Reimbursement paid to related organization(s) for expenses
 q Reimbursement paid by related organization(s) for expenses
 r Other transfer of cash or property to related organization(s)
 s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a)	(b)	(c)	(d)
Name of other organization	Transaction type (a-s)	Amount involved	Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI**Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
									Yes	No	
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
(11)											
(12)											
(13)											
(14)											
(15)											
(16)											

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Part VIII, Line 7 (990) - Gain/Loss from Sale of Assets Other than Inventory

Description	CUSIP #	Check if gain/loss is from sale of public securities	Check if gain/loss is from sale of non public securities	Check if purchaser is a business	Purchaser	Date acquired	Acquisition method	Date sold	Gross sales price	Cost or other basis (Enter one field only)			Depreciation	Description of Basis Method
										Cost	other basis and expenses	Cost of sale and cost of improvements		
1 OREO-251 CHINKAPIN LANE					H B SHEFFIELD	2/26/2010	FORECLOS	9/9/2012	25,447	33,771				
2 OREO-101 HENDERSON DR					L SINGLETON	6/29/2011	FORECLOS	5/1/2012	41,710	41,710				
3 OREO-6705 LANDOVER CIR					N J SUBIA	6/29/2012	FORECLOS	9/14/2012	182,309	151,079				
4 OREO-40 FARRIER LANE					J GUTHRIE	7/31/2010	FORECLOS	1/31/2012	140,326	164,406				
5 OREO-2319 UPLAND WAY					C BINGLIN	2/29/2012	FORECLOS	1/1/2012	218,333	186,623				
6 OREO-1726 FOLKSTONE RD					J A GRAY&FA GRA	4/30/2012	FORECLOS	9/2/2012	117,949	107,461				
7 OREO-2138 FAULK DRIVE					T D DICE	6/29/2011	FORECLOS	4/1/2012	111,700	110,000				
8 OREO-1816 WOODGATE W					B BREKER	6/30/2011	FORECLOS	6/28/2012	162,718	160,525				
9 OREO-85 MEADOWLARK DR					S.WERKMEISTER	6/30/2011	FORECLOS	3/14/2012	107,997	110,450				
10 OREO-250 NE 21 STREET					J C KING	6/30/2010	FORECLOS	7/6/2012	62,360	58,556				
11 OREO-2721 LEARY LANE					J METHVIN	6/29/2011	FORECLOS	6/8/2012	63,659	63,659				
12 OREO-33 JOHN DAVID RD					TRIFECTA PROPER	5/31/2009	FORECLOS	5/31/2012	13,608	16,975				

Part X, Line 4 (990) - Accounts Receivable

	Accounts receivable		Allowance for doubtful accounts	
	Beginning	End	Beginning	End
1 ACCRUED INCOME ON LOANS	1 941,155	1,012,367		
2 ACCRUED INCOME ON INVESTMENTS	2 36,322	47,371		
3 OTHER RECEIVABLES	3 286,536	399,935		
4	4			
5	5			
6	6			
7	7			
8	8			
9	9			
10	10			
11 Total accounts receivable	11 1,264,013	1,459,673	0	0

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

		Total:						0	16,717,861	17,985,911			
Category or Item		Land	Buildings	Leasehold Improvements	Equipment	Other	Check if Investment Asset	Cost/Other Basis	Beginning Accumulated Depreciation	Ending Accumulated Depreciation	Disposals/Adjustments	Beginning Balance	Ending Balance
1	LAND	X						3,851,526				3,851,526	3,851,526
2	BUILDING		X					13,446,337	2,602,759	2,994,187		8,610,830	10,452,151
3	FURNITURE AND EQUIPMENT			X				8,545,081	5,782,226	6,103,359		2,953,691	2,441,722
4	LEASEHOLD IMPROVEMENTS			X				1,698,791	301,820	458,270		1,301,814	1,240,521

Part X, Lines 11 and 12 (990) - Investments - Securities

Description	Total:				
	Check if Publicly Traded Securities?	Check if Financial Derivatives?	Check if Closely-Held Equity Interests	Value at Time of Donation	Beginning Balance Book Value FMV
1 FEDERAL AGENCY SECURITIES	X			8,018,652	1,281,459
2 MORTGAGE-BACKED SECURITIES (MARKET)	X			0	12,982,650
3 MORTGAGE-BACKED SECURITIES (COST)				2,384	1,801
4 QUICKRATE CD'S				3,076,500	0
5 SOUTHEAST CORPORATE CD				0	0
6 FHLB STOCK				1,742,900	1,153,900

Part X, Line 15 (990) - Other Assets

		Total:	13,609,002	16,170,410
			Beginning	End
1	LOANS HELD FOR SALE		1,614,176	1,377,300
2	NCUSIF DEPOSIT		2,534,007	2,684,511
3	OREO PROPERTY		4,322,108	2,700,989
4	LINCOLN FINANCIAL GROUP		172,234	100,764
5	NEW ENGLAND FINANCIAL LIFE		500,000	500,000
6	457 DEFERRED		4,906	5,406
7	INVESTMENTS IN CUSOS		449,049	445,742
8	OTHER ASSETS		96,961	239,499
9	CONSTRUCTION IN PROCESS		149,218	396,416
10	CLEARING ACCOUNTS - DEPOSIT		3,571,850	6,009,438
11	REPOSSESSIONS		194,493	
12	MINNESOTA LIFE INSURANCE			1,524,027
13	MORTGAGE SERVICING RIGHTS			186,318

Part X, Line 25 (990) - Other Liabilities

		Total:	275,143,288	289,004,629
			Beginning	End
1	Federal income taxes			0
2	SHARE DRAFTS		52,658,919	65,991,382
3	SHARES		43,808,044	52,324,894
4	MONEY MARKET		71,477,432	80,048,651
5	IRA SHARES		19,195,963	19,260,441
6	CERTIFICATES		88,002,930	71,379,261

EXPENSES

Description	Total
1 EDUCATION AND TRAINING	186,476
2 ASSOCIATION DUES/SUBSCRIPTIONS	89,927
3 MAINTENANCE AND RENTAL EXPENSES	713,479
4 PROVISION FOR LOAN LOSSES	4,383,586
5 MISCELLANEOUS	223,431
6 ATM EXPENSES	97,799
7 DEBIT CARD FEES AND REBATES	1,115,633
8 LOAN SERVICING	904,073
9 CORPORATE CREDIT UNION STABILIZATION FUND ASSESSMENTS	263,130
10 OREO RELATED EXPENSES/LOSSES	481,052
11 BILL PAY/MOBILE BANKING	472,024
12 GOVERNMENT AFFAIRS/EVENTS	29,026
13 LOSS ON OREO	408,147
14 LOSS ON FIXED ASSETS	23,240
15	
Total	9,391,023

Application for Extension of Time To File an
Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ▶
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete

Part I only ▶

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions FIRST COMMERCE CREDIT UNION	Employer identification number (EIN) or 59-0687423
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions. 2073 SUMMIT LAKE DRIVE, Room 100	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions TALLAHASSEE	FL 32317

Enter the Return code for the return that this application is for (file a separate application for each return)

 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► WILMA WOOTEN

Telephone No ► (850) 410-3563

FAX No ►

If the organization does not have an office or place of business in the United States, check this box ▶

If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 2106 If this is for the whole group, check this box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15/2013, to file the exempt organization return for the organization named above. The extension is for the organization's return for.

► calendar year 2012 or► tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	\$	0

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2013)