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Form **990** 

Department of the Treasury

Internal Revenue Service

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

| Do not enter Social Security numbers on this form as it may be made public ► Information about Form 990 and its instructions is at 101010 are goot form 990. and ending

Open to Public Inspection

A	For the	2013 calendar year, or tax year beginning	and e	ending		
В	Check if applicable	SOUTHEWSTERN CKEDIT ONT	ON FOUNDATION		D Employer identific	eation number
	Addres: change					
	Name change	Doing Business As			59-22	252733
	Initial return Termin- ated	Number and street (or P 0 box if mail is not delive 3692 COOLIDGE COURT	red to street address)	Room/suite	E Telephone number	576-8171
F	Amendo return Applica tion	City or town, state or province, country, and Zi	P or foreign postal code		G Gross receipts \$ H(a) Is this a group re	129,036.
	pending		ICK LAPINE		for subordinates	Yes X No
_	Tay ava		(insert no ) 4947(a)(1) o	r 527	H(b) Are all subordinates in	
		mpt status: X 501(c)(3) 501(c)( ) ◆ s: ➤ WWW · LSCU · COOP	(insert no ) 4947(a)(1) o	321		list. (see instructions)
			ciation Other ►	I Voor	H(c) Group exemption	
		Summary	Ciation Other	L Year	or tormation 1902 M	State of legal domicile FL
			ODEDA	\me e∩	ס יישר ארונאאור	יבאבאית הב
Activities & Governance	8	Briefly describe the organization's mission or most signification.  SCIENCE, CHARITY & EDUCATI	ON AND FOR OTHE	ER CHA	RITABLE PU	RPOSES,
e.u		Check this box 🕨 📖 if the organization disconti		ed of more	than 25% of its net as	
õ	1	lumber of voting members of the governing body (P	•		3	11
ಷ	4 1	lumber of independent voting members of the gove	ming body (Part VI, line 1b)		4	10
ies	5 7	otal number of individuals employed in calendar yea	ar 2013 (Part V, line 2a)		5	0
Ĭ	6 T	otal number of volunteers (estimate if necessary)			6	11
Act	7 a T	otal unrelated business revenue from Part VIII, colu	mn (C), line 12		7a	0.
_	ы	let unrelated business taxable income from Form 99	90-T, line 34	<u>``</u>	7b	0.
				(8)	Prior Year	Current Year
<u>•</u>	8 (	Contributions and grants (Part VIII, line 1h)	nd 7d)	<i>&gt;</i>	288,910.	122,583.
en		Program service revenue (Part VIII, line 2g)		3.X	0.	0.
Revenue	10 li	nvestment income (Part VIII, column (A), lines 3, 4, a	nd 7d)	<i>ې</i> /	5,994.	6,453.
	11 (	nvestment income (Part VIII, column (A), lines 3, 4, a Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9 Total revenue - add lines 8 through 11 (must equal P	c, 10c, and We)	′ ∟	0.	0.
	12 T	otal revenue - add lines 8 through 11 (must equal P	art VIII2.column (A), hine 12)		294,904.	129,036.
		Grants and similar amounts paid (Part IX, column (A)			354,809.	71,283.
	14 E	Benefits paid to or for members (Part IX, column (A),	line 4)		0.	0.
Se	15 8	Salaries, other compensation, employee benefits (Pa	rt IX, column (A), lines 5-10)		78,153.	0.
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line	e 11e)		0.	0.
χĎ	ьт	otal fundraising expenses (Part IX, column (D), line	25) 🕨	<u>0.</u>		<u> </u>
Ш	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 1	1f-24e)		62,767.	204,610.
	18 T	otal expenses. Add lines 13-17 (must equal Part IX,	column (A), line 25)		495,729.	<u>275,893.</u>
	19 F	Revenue less expenses. Subtract line 18 from line 12	2		<200,825.	<146,857.>
Net Assets or Fund Balances				Be	ginning of Current Year	End of Year
set	20 T	otal assets (Part X, June 18)			2,473,245.	<u>2,354,664.</u>
A As	21 7	otal liabilities (Par) X, line (20)		<u></u>	119,906.	122,345.
캺	22 N	let assets or fund balanges. Subtract line 21 from li	ne 20		2,353,339.	2,232,319.
P	art (l	Signature/Block/ / /				
Und	er penali	iles of perjuny, I declary that'I have examined this return, in	cluding accompanying schedules	and statem	ents, and to the best of my	knowledge and belief, it is
true	, correct	and complete Declaration of operater (other than officer)	is based on all information of whi	ich preparer	has any knowledge	, k
		an / i			۔ ۲۱ر	14
Sig	n	Signature of officer			Date	
He	re	PATRICK LAPINE, EXECUTI Type or print name and title	VE DIRECTOR			
		Print/Type preparer's name P	reparer's signature		Date Check	PTIN
Paid		MICHAEL C CARTER	1		rf setf-employe	P00292302
	F	Firm's name CARR, RIGGS & ING	RAM, LLC		Firm's EIN	72-1396621
	· -	Firm's address 1713 MAHAN DRIVE			, in o Ent	
	, , ,	TALLAHASSEE, FL 3	2308		Phone no (85	50) 878-8777
Ma	v the IR	S discuss this return with the preparer shown above			11.110110110 ( 01	X Yes No

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	Statement of Program Service Accomplishments
<u>.</u>	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:  OPERATE FOR THE ADVANCEMENT OF SCIENCE, CHARITY & EDUCATION AND FOR
	OTHER CHARITABLE PURPOSES, ESPECIALLY AS THEY RELATE TO CONSUMER
	CREDIT.
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.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No If "Yes," describe these changes on Schedule O.
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 \$ 4 , 000 . including grants of \$ 4 , 000 . ) (Revenue \$
-	COLLEGE SCHOLARSHIPS PROGRAM FOR HIGH SCHOOL SENIORS IN FLORIDA. 4 SCHOLARSHIPS ARE AWARDED.
	· · · · · · · · · · · · · · · · · · ·
	45 525 45 204
4b	(Code) (Expenses \$ 45,525. Including grants of \$ 45,284.) (Revenue \$
	SCHOLARSHIPS FOR MEMBERS TO ATTEND CLASSES RELATING TO CONSUMER CREDIT
	<del> </del>
	<del>-</del>
	<del></del>
	<del>-</del>
	<del>-</del>
4c	(Code) (Expenses \$ 21,999 • Including grants of \$ 21,999 • ) (Revenue \$
	DONATIONS TO THE COMMUNITY
	<del> </del>
4d	Other program services (Describe in Schedule O.)
4d	Other program services (Describe in Schedule O.)  (Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses > 71,524.

	SOUTHEASTERN CREDIT UNION FOUNDATION	E 2 7 2 2	۰ _	
.,,,,,		52733	<u> </u>	age 3
Pal	rt Ⅳ Checklist of Required Schedules			
•	In the example time decembed in continue $E01(a)/2$ or $A047(a)/4$ (other than a private foundation)?		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	х	
2		2	X	<b>-</b>
3	Is the organization required to complete Schedule B, Schedule of Contributors  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	-	1	-
3	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in eff		<del> </del>	
•	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		1	<del> </del>
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		<del></del>
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Pa	rti 6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			T
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		-	<b></b>
•	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for		<del>                                     </del>	1
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permane			
•	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	(		1
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			1
	Part VI	11a	Х	
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	116		X
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		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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	11f	X	ļ
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	<u> </u>	ļ
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	12b	<del> </del>	X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business		1	
	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		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	1	X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	1		v
-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-	X
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-	1	X
0	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	+-	┼^
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18		X
	1c and 8a? If "Yes," complete Schedule G, Part II	10	1	<u> </u>

Form 990 (2013)

X

19

20a

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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?

complete Schedule G, Part III

Page 4

21. Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), ins 1 / If "Nes." complete Schedule I, Parts I and II  22. Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III  23. Did the organization answer "Yes" to Part VIII, Section A, Ind 3, 4, or 5 about compensation of the organization current and former offices, directors, trustees, key employees, and highest compensation of the organization's current and former offices, directors, trustees, key employees, and highest compensation of more than \$100,000 as of the last day of the year, that was issued after Discember 31, 2002? If "Yes," answer lanes 24b through 24d and complete Schedule IV If No.", or to live 15d.  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 Discember 31, 2002? If "Yes," answer lanes 24b through 24d and complete Schedule IV If No.", or to live 15d.  25a Did the organization marks are an ecrow account other than a refunding escrow at any time during the year?  25b Secrition \$016(3) and \$5016(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If Yes, "complete Schedule II, Part! II be the organization has not been reported on any of the organization pror Forme 990 or 990-EZ? If "Yes," complete Schedule II, Part! II be the organization has not been reported or any of the organization provides and provide	Pa	rt IV Checklist of Required Schedules (continued)			
powermment on Part IX, column (A), line 17 lf "Yes," complete Schedule I, Parts I and II  21 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 27 lf "Yes," complete Schedule I, Parts I and III and the organization answer "Yes" to Part IXI, Section A, line 3, 4, or 5 about compensation of the organization current and former officers, directors, trustees, leve yemployees, and highest compensated employees? If "Yes," complete Schedule II and 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 II will be organization will an escrive account other than a refunding escrive at any time during the year?  24a				Yes	No
powermment on Part IX, column (A), line 17 lf "Yes," complete Schedule I, Parts I and II  21 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 27 lf "Yes," complete Schedule I, Parts I and III and the organization answer "Yes" to Part IXI, Section A, line 3, 4, or 5 about compensation of the organization current and former officers, directors, trustees, leve yemployees, and highest compensated employees? If "Yes," complete Schedule II and 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 II will be organization will an escrive account other than a refunding escrive at any time during the year?  24a	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
22 De the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? if "Yes," complete Schedule I, Parts I and III.  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 Is an an an an an an an an analysis of the last day of the year, that was issued after Described 71, 2002? If "Yes," answer lines 24b through 24d and complete Schedule Is It "In "Yes," to the 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  42b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  42d Did the organization and 501 (c)(4) organizations. Did the organization epops on an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I  42d Did 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 990-527 If "Yes," complete Schedule I, Part IV  42b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule I, Part IV  42c Did the organization provide a grant or other assistance to an officer, director, trustee, experibly expert or expert yet therefore, a grant eslection committee member, or to a 35% controlled entity or family member of army of these persons? If "Yes," complete Schedule I, Part IV  42c Did the organization receives more than \$25,000 in non-cash controllutions of at "Yes," complete Schedu			21	Х	
column (A), line 27 if "Yes," complete Schedule I, Part I and III 2  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 hiphest compensated employees? If "Yes," complete Schedule I 2  A 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," carmewrines 24b through 24d and complete Schedule II" Into 25a  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24b  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  25c  Did the organization and acts as an "on behalf of" issuer for bonds beyond a temporary period exception?  25d  Did the organization and acts as an "on behalf of" issuer for bonds outstanding at any time during the year?  25d  Did the organization and acts as an "on behalf of" issuer for bonds outstanding at any time during the year?  25d  Did the organization and acts as an "on behalf of" issuer for bonds outstanding at any time during the year?  25d  Did the organization and acts as an "on behalf of" issuer for bonds outstanding at any time during the year?  25d  Did the organization aware that the regard in an excess benefit transaction with a disqualified person in a prior year, and that the transaction as an excess benefit transaction with a disqualified person in a prior year, and that the transaction as an activity of the organization are provided and any of the organization specified person in a prior year, and that the transaction as an activities of the organization are provided and any of the organization of provide against organization are provided and the organization of provide against organization are provided and activities of the organization are provided and activities of the organization are provided and activities of the a	22				
23 Did the organization answer "Yes" to Part VIII. Section A, Jine 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 I was assued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II If the year, that was assued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II If			22		Х
and former officens, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 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 I, "I have 25s be the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization has not been reported on any of the organization engage 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 II  Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any ourrent or former officer, director, trustee, key employees, substantial contributor or employee thereof, garant selection committee member, or to a 35% controlled entity or family member of a current or former officer, director, t	23				
Schedule I 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 25a  Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds.  Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds of the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  b Is the organization sware that it engaged in an excess benefit transaction with a disqualified person on a protect program of that the transaction has not benefit transaction with a disqualified person in a prior year, and that the transaction has not bene reported on any of the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not bene reported on any of the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not benefit transaction with a disqualified person in a prior year, and that the transaction has not benefit transaction with a disqualified persons? If so, complete Schedule L, Part I  Did the organization provide a grant or other assistance to an officer, director, trustee, we employees. If yes, "complete Schedule L, Part IV and the transaction is of any of the programization provide a grant selection committee member, or to a 35% controlled entity or family member of any of three persons?" If "yes, "complete Schedule L, Part IV and the organization is of a current or former officer, director, trustee, or key employee? If "yes," complete Schedule L, Part IV and the organization receive contributions of art, historical treasures, or other similar assets, or quali	_		İ		
Det 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 2d and complete Schedule K If No." op to line 25a  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary pende exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary pende exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary pende exception?  Did the organization invest any proceeds of tax-exempt bonds outstanding at any time during the year to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24c  25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit fransaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I  b Is the organization has not been reported on any of the organization's prior Forms 990 or 990-E2? If "yes," complete Schedule I, Part II  25b If the organization report any amount on Part X, line 5, 8, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule I, Part III  27b Obt 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 I, Part III  27c A was the organization a party to a business transaction with ne of the following parties (see Schedule I, Part IV  28d A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV  29d A family immember of a current or former officer, director, trustee, or key employee? If "Yes," co			23	Х	1
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 25a  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penciod exception?  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization and sond the year? If "Yes," complete Schedule L, Part II "Essae Schedule L, Part II"  b Is the organization and ware 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 or prome 900 or 990-E2? If "Yes," complete Schedule L, Part III "Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, furestors, trustee, key employees, inighest compensated employees, or disqualified persons? If so, complete Schedule L, Part III and the organization promide a grant or other assistance to an officer, director, trustee, betwee Junganization promide a grant or other assistance to an officer, director, trustee, between the programization and promide schedule L, Part III and the organization reservent or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  d Did the organization promide Schedule III and the organization was an officer, director, trustee, or key empl	24a			_	
Schedule K If "No", go to line 25a   b Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception?   24b   24c   24b   24c   24c   24c   24c   24c   24d   24c   24d   2					
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception?  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24d 22d 22d 2d			24a		Х
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24d Journal of the granization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24d Journal of the granization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24d Journal of the granization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24d Journal of the granization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24d Journal of the granization act as an 'on behalf of' issuer for bonds outstanding and supplies to any current or former officers, directors, trustees, benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, trustees, key employees, or disqualified persons? If so, complete Schedule L, Part III  25b X  26c X  27d X  28b X  28c X  28	b				_
any tax-exempt bonds?    Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?    24d    Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year?    25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a pnor year, and that the transaction has not been reported on any of the organization year.    25a					
d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  258 Section 901(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person unit property at the 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-E27 if "Yes," complete Schedule L, Part I 25b X  25b Ib the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II 27d 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 II 27d X 27d X 28d A structed for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27d X 2			24c		
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disqualified person during the year? If "Yes," complete Schedule L, Part I  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 pror Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I  25b					
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-E27 If "Yes," complete Schedule L, Part II  25b X  26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part III  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  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28b X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  31 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part II  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 Did the organization related to any tavexempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Ime 1  33 A X  34 Was the organi			25a		х
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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  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  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35b 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 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 X  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		If "Yes," complete Schedule N, Part I	31		Х
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sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  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)?  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  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  X  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  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		Schedule N, Part II	32		X
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Note. All Form 990 filers are required to complete Schedule O			37	ļ	X
	38				
		Note. All Form 990 filers are required to complete Schedule O	38		<u> </u>

Page 5

Pai	Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response or note to any line in this Part V				ᆜ
		1. 1	·	Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 1 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	10			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	eportable gaming		Х	
•	(gambling) winnings to prize winners?	1 1	1c	^	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	2a 0			
	filed for the calendar year ending with or within the year covered by this return		2b	} :	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined.		-20		
2-	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions Did the organization have unrelated business gross income of \$1,000 or more during the year?	s)	3a	1	Х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other		35		
40	financial account in a foreign country (such as a bank account, securities account, or other financial	•	4a		х
<b>h</b>	If "Yes," enter the name of the foreign country:	accounty:			
U	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	ACCOCATIO.	5a	1	Х
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ection?	5b		Х
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	ne organization solicit			
-	any contributions that were not tax deductible as charitable contributions?		6a		Х
ь	If "Yes," did the organization include with every solicitation an express statement that such contribut	tions or gifts			
	were not tax deductible?	•	6b		
7	Organizations that may receive deductible contributions under section 170(c).		21111		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required	1		1
	to file Form 8282?	1 1	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract? .	7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	ract?	7f	ļ	X
g	If the organization received a contribution of qualified intellectual property, did the organization file February	orm 8899 as required?	7g	ļ	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h	ļ	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D				
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8	<del> </del>	ļ
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?		9a		
10 10	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	-	
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	ĺ		
11	Section 501(c)(12) organizations. Enter:	100	1		
	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1		
_	amounts due or received from them.)	11b		[	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	· · · · · · · · · · · · · · · · · · ·	12a		]
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		1		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			-	
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	13b	1		
С	Enter the amount of reserves on hand	13c	<u> </u>		<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a	ļ	X
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	le O	14b	1	<u> </u>
			Fort	ո 990	/2013

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Form 990 (2013) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI						X
Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		11			
	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						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip with	any other				
	officer, director, trustee, or key employee?			2	2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?			3	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	as filed?	4	1	_	_X_
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?			5		<u>X</u>
6	Did the organization have members or stockholders?				3		<u>X</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or				
	more members of the governing body?	-		7	a		<u>X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or		-		
	persons other than the governing body?			7	ь		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following				
а	The governing body?			8	a	<u>X</u> _	
b	Each committee with authority to act on behalf of the governing body?			8	b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ached	at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		<del></del>		)		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu-	e Code )				
				_	_	Yes	No
	Did the organization have local chapters, branches, or affiliates?		-	10	)a		<u> X</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,		- [		
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10	-		
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy befo	re filing the form	<sup>7</sup> 11	a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				1		
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12	$\neg$	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give risi			12	2b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escnbe			v	
	in Schedule O how this was done			_	2c	X	
13	Did the organization have a written whistleblower policy?			1	-	X	
14	Did the organization have a written document retention and destruction policy?			1	4	X	
15	Did the process for determining compensation of the following persons include a review and approv	-	ndependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,			.		v
	The organization's CEO, Executive Director, or top management official			15	-		$\frac{x}{x}$
D	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			15	D		
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange		urth a				
·va	taxable entity during the year?	illent v	vitii a	16			Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the control of the organization of the second of the control of the control of the organization of the control of the contro	ato de i	articipation		,,,		
	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to evaluation to ev						
	exempt status with respect to such arrangements?	unzanc	11.5	16		;	
Sec	tion C. Disclosure				1		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed NONE		<del></del>		_		
 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	ion 501(c)(3)s on	ly) avai	lable	e	
	for public inspection. Indicate how you made these available. Check all that apply.	,= 55		,,		-	
	Own website Another's website X Upon request Other (explain	n in Sc	hedule O)				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co		•	and fi	nand	cial	
	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 a	and rec	ords of the organ	nization	. <b>&gt;</b>		
	DEBBIE CARUTHERS - 850-558-1116						
	3692 COOLIDGE COURT, TALLAHASSEE, FL 32311						

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### Form 990 (2013) Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

### 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.

(A) Name and Title	(B) Average	/		(C) Posi	ition			(D) Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
	hours per	box	, unle	ss pe	rson	than is bot	h an	compensation	compensation	amount of
	(list any	director	cer an	dad		or/trus		from the	from related organizations	other compensation
	hours for related organizations	Tustee or (	frustee		8	npensated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related
	below line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) STEVE SWOFFORD	1.00									
DIRECTOR		X				<u> </u>	_	0.	0.	0.
(2) DERRICK RAGLAND	1.00						İ	_	_	_
DIRECTOR		X	<u> </u>			<u> </u>	<u> </u>	0.	0.	0.
(3) BRENT LISTER	1.00									
DIRECTOR	1 00	X				<u> </u>		0.	0.	0.
(4) MARY WOOD	1.00		'							0
DIRECTOR	1 00	X	H					0.	0.	0.
(5) JOE MCGEE	1.00	X					1	0.	0.	0.
DIRECTOR (6) AC COWANS	1.00	^				-	-	0.	0.	
TRUSTEE	1.00	X					ŀ	0.	0.	0.
(7) TINA WILLIAMS	1.00	71				$\vdash$		•	•	
TRUSTEE		X						0.	0.	0.
(8) JAN BIAS	1.00									
TRUSTEE		X					ŀ	0.	0.	0.
(9) KEVIN JOHNSON	1.00									_
TRUSTEE		X				L.		0.	0.	0.
(10) PATRICK LAPINE	1.00		l							
TRUSTEE	40.00	X						0.	405,358.	37,888.
(11) RICH HELBER	1.00									_
TRUSTEE	40.00	X				<u> </u>		0.	0.	0.
(12) LEONARD PARKHURST	40.00	ł		.,					60 714	16 700
EXECUTIVE DIRECTOR		-	ļ	X				0.	69,714.	16,708.
		ł								
			-							<del></del>
		ł					ĺ			
		-	├							<del></del>
		1					1			
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	990 (2013) INC.									59-22	<u> 2527</u>	33	Pa	ge <b>8</b>
Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees			ghe	st C	ompensated Employe	es (continued)				
•	(A) Name and title	(B) Average hours per week (list any hours for	box offic	not c , unle	Pos heck ss pe	more erson lirecto	than is bot or/trus	h an tee)	( <b>D)</b> Reportable compensation from the organization	(E)  Reportable  compensatio  from related  organizations  (W-2/1099-MIS	s	Estin amoi oti compe	unt o her	f ion
		related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-1011C	,0,	organ and r	ızatıc elate	on d
						_		-						
	Sub-total  Total from continuation sheets to Part V	II, Section A				l	<u> </u>	<b>&gt;</b>	0.	475,0	0.	54		0.
	Total (add lines 1b and 1c)							<u> </u>	0.	475,0		54	, 59	<u>6.</u>
2	Total number of individuals (including but recompensation from the organization	ot limited to th	ose	liste	ed a	bov	e) wi	no re	eceived more than \$100	),000 of reportab	e	Y	es	0 <b>No</b>
3	Did the organization list any <b>former</b> officer line 1a? If "Yes," complete Schedule J for s		ıste	e, ke	ey er	nplo	yee	, or	highest compensated e	mployee on		3		х
4	For any individual listed on line 1a, is the s and related organizations greater than \$15			-						the organization		4	x	
5	Did any person listed on line 1a receive or rendered to the organization? <i>If</i> "Yes," con	accrue comper	nsat	ion f	rom	any	unr			idual for services		5		Х
Sec	tion B. Independent Contractors								<del></del>					
1	Complete this table for your five highest co the organization. Report compensation for	•									pensat	ion fro	m	
	(A) Name and business	•		ONI			<u> </u>		(B) Description of s	ì	Co	(C)	ation	I
									· · · · · · · · · · · · · · · · · · ·					
													_	
2	Total number of independent contractors (\$100,000 of compensation from the organ		ot li	mite	d to		se li: 0	stec	d above) who received n	nore than		orm QC	20 40	040

Forn	n 99	90 (	2013) INC.					59-2252	2733 Page 9
Pa	rt	VII	Statement of Reve	nue	-				
			Check if Schedule O conf	tains a response	or note to any lin	e in this Part VIII	-		_
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1	а	Federated campaigns	1a					
Contributions, Giffs, Grants and Other Similar Amounts		b	Membership dues	1b					
Am.		С	Fundraising events	1c			,		-
ar Jair		d	Related organizations	1d					
ă,ï	ŀ	е	Government grants (contribut	tions) 1e					
įς		f	All other contributions, gifts, gran	its, and					
흏			similar amounts not included abo	ve 1f	122,583.				
E S		g	Noncash contributions included in lines	1a-1f \$					
<u>3 g</u>		h	Total. Add lines 1a-1f		<b>&gt;</b>	122,583.			
					<b>Business Code</b>				
9	2	2 a							
و کّ		b							
en S		c					_		
ě a		d	·						
Program Service Revenue	!	е						<u> </u>	
<u>α</u>		f	All other program service reve	enue					<u> </u>
		g	Total. Add lines 2a-2f		<b>&gt;</b>				
	3	3	Investment income (including	dıvıdends, ınter	est, and				
			other similar amounts)		▶	6,453.			6,453
	4	ļ	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
	5	•	Royalties	···	<u> </u>				
				(i) Real	(ii) Personal				
	6	a	Gross rents	<u> </u>	_				
		Ь	Less. rental expenses	ļ					
		c Rental income or (loss)							
	_		` '	<u> </u>	<b>•</b>				1
	7	a	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory						
		b	Less: cost or other basis						
			and sales expenses						
			Gain or (loss)						
	١.		Net gain or (loss) Gross income from fundraisin	a ayanta (nat					<u> </u>
Other Revenue	°	a	including \$	g events (not of					
ě.			contributions reported on line						
Ę.			Part IV. line 18	a 10). 000					
the	ļ	ь	Less: direct expenses	b					
Ò			Net income or (loss) from fund		<b></b>				1
	9		Gross income from gaming ac			<del></del>			
		_	Part IV, line 19	а					
		ь	Less: direct expenses	b					
			Net income or (loss) from gam	ning activities	<b>•</b>				Ì
	10		Gross sales of inventory, less			· · · · · · · · · · · · · · · · · · ·			
			and allowances	а					
		b	Less: cost of goods sold	b					
			Net income or (loss) from sale	s of inventory	<b></b>			· 	
			Miscellaneous Revenu		Business Code				
	11	а							
		b							
		С							
		d	All other revenue						

129,036

332009 10-29-13

e Total. Add lines 11a-11d

6,453.

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respon			42	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	67,283.	67,283.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	4,000.	4,000.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				<del></del>
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				<del></del>
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				<del>-</del>
11	Fees for services (non-employees):				
а	Management				
b	Legal	7 (5)		7 (5)	
C	Accounting	7,652.		7,652.	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25,	2 200		2 200	
	column (A) amount, list line 11g expenses on Sch O)	2,388. 5,500.	· · · · · ·	2,388. 5,500.	
12	Advertising and promotion	9,453.	<del></del>	9,453.	
13	Office expenses	9,060.		9,060.	
14	Information technology	7,000.		5,000.	
15	Royalties	6,343.		6,343.	<del></del>
16	Occupancy	22,241.		22,241.	
17 10	Travel	22/211.		22/241.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			-	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,500.		3,500.	
23	Insurance	586.		586.	
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	PROGRAM SERVICES	121,161.		121,161.	
b	MISCELLANEOUS	15,469.		15,469.	
c	SERVICE CHARGES	565.	241.	324.	
d	TRAINING & DEVELOPMENT	425.		425.	
е	All other expenses	267.		267.	
25_	Total functional expenses. Add lines 1 through 24e	275,893.	71,524.	204,369.	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 If following SOP 98-2 (ASC 958-720)				

59-2252733 Page **11** 

rart	X	Balance Sheet					<del></del>
•		Check if Schedule O contains a response or not	te to ar	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	_	Oh			Beginning or year	_	End of year
	1	Cash - non-interest-bearing		-	2,441,904.	2	2,326,389.
	2	Savings and temporary cash investments		}	17,500.	3	2,320,309.
	3	Pledges and grants receivable, net	<u> </u>	13,841.	4	14,275.	
	4	Accounts receivable, net		13,041.	4	14,213	
-	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensa	ateo er	nployees. Complete		5	
		Part II of Schedule L	mana (an dafinad waday		3		
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section					
,,		employers and sponsoring organizations of sec		6			
Assets	7	employees' beneficiary organizations (see instr).	. Comp	piete Part II of Sch L	· · · · · · · · · · · · · · · · · · ·	7	
AS:	7	Notes and loans receivable, net	-	· . <u>-</u> -	8		
	8	Inventories for sale or use		<del></del>	9		
١.	9	Prepaid expenses and deferred charges  Land, buildings, and equipment: cost or other	1	ı		9	
	IVa	basis. Complete Part VI of Schedule D	10a	17,500.			
		Less: accumulated depreciation	10b	3,500.	0.	10c	14,000.
١.	ь 11	Investments - publicly traded securities	3/300.		11	11,000.	
- 1	11 12	Investments - other securities. See Part IV, line		12			
- 1	13	investments - other securities. See Part IV, line		13			
- 1	14	Intangible assets		14			
- 1	1 <del>5</del>	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ	al line	34)	2,473,245.	16	2,354,664
	17	Accounts payable and accrued expenses	CI IIIIC	04)	24,613.	17	2,354,664. 8,110.
1	18	Grants payable		18			
	19	Deferred revenue		<del></del>	19		
- 1	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D	<del></del>	21	
	22	Loans and other payables to current and forme		Ţ.	······································		
] III		key employees, highest compensated employee		i			
Liabilities		Complete Part II of Schedule L	,			22	
נֵן בֿ	23	Secured mortgages and notes payable to unrela	ated th	ird parties		23	
	24	Unsecured notes and loans payable to unrelate		·		24	
	25	Other liabilities (including federal income tax, pa		·			
		parties, and other liabilities not included on lines					
		Schedule D			95,293.	25	114,235.
	26	Total liabilities. Add lines 17 through 25			119,906.	26	122,345.
		Organizations that follow SFAS 117 (ASC 958	3), che	ck here ▶ X and			
စ္မ		complete lines 27 through 29, and lines 33 ar	nd 34.				
Net Assets or Fund Balances	27	Unrestricted net assets			1,15 <u>7,791</u> .	27	1,041,771.
	28	Temporanly restricted net assets	537,569.	28	532,569		
<u> </u>	29	Permanently restricted net assets	657,979.	29	657,979		
2		Organizations that do not follow SFAS 117 (A	8), check here ▶ 🔲 📗				
5		and complete lines 30 through 34.					
g   :	30	Capital stock or trust principal, or current funds				30	
ĝ   :	31	Paid-in or capital surplus, or land, building, or ed	quipme	ent fund		31	
}   :	32	Retained earnings, endowment, accumulated in	come,	or other funds		32	
<b>'</b>   ;	33	Total net assets or fund balances			2,353,339.	33	2,232,319.
:	34	Total liabilities and net assets/fund balances			2,473,245.	34	2,354,664.
				•			Form <b>990</b> (20

### SOUTHEASTERN CREDIT UNION FOUNDATION

	990 (2013) INC.	59-	<u>-2252</u>	<u> 2733</u>	Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets			_		
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				36.
2	Total expenses (must equal Part IX, column (A), line 25)	2				93.
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>57.</u> >
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	2,35	3,3	<u> 39.</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6		2	5,8	37.
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	2	2,23	2,3	<u> 19.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		<u>X</u>
	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:					
	Separate basis Consolidated basis 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 separat	e basis,	,			
	consolidated basis, or both:					
	X Separate basis Consolidated basis 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	e 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 Sch	edule O	)			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si					
	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 requ	ired aud	th			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

► Information about Schedule A [Form 990 or 990-EZ] and its instructions istatuw.irs.qov/form990.

SOUTHEASTERN CREDIT UNION FOUNDATION Employe

Employer identification number

59-2252733 INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II c Type III - Functionally integrated d \_\_\_\_ Type III - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (vi) Is the (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (iii) Type of organization (vii) Amount of monetary organization in col in col (i) listed in your organization in col organization (described on lines 1-9 (i) organized in the US? support governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes No Yes No No Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

59-2252733 Page 2

### Part # Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support		•		<del></del>		
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and		,	1.7			
	membership fees received. (Do not						
	include any "unusual grants.")	224,796.	130,820.	318,957.	288,910.	122,583.	1,086,066.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge					25,837.	<u>25,837.</u>
4	Total. Add lines 1 through 3	224,796.	130,820.	318,957.	288,910.	148,420.	1,111,903.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract tine 5 from line 4						1,111,903.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 4	224,796.	130,820.	318,957.	288,910.	148,420.	1,111,903.
	Gross income from interest,	_		-	-		
-	dividends, payments received on						
	securities loans, rents, royalties					i	
	and income from similar sources	5,040.	9,909.	8,458.	5,994.	6,453.	35,854.
9	Net income from unrelated business	·		•	_	•	· · ·
•	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)			45.			45.
11	Total support. Add lines 7 through 10						1,147,802.
	Gross receipts from related activities,	etc (see instruction	ons)		<b>1</b>	12	
	First five years. If the Form 990 is for	·	•	d. fourth, or fifth ta	ax vear as a sectio		
	organization, check this box and stor	-	,,	<b>-</b> , , , <b>-</b> , , , , , , , , , , , , , , , , , , ,	<b></b>	,, (-)(-)	▶□
Se	ction C. Computation of Publ		rcentage				
14	Public support percentage for 2013 (	ine 6, column (f) d	ivided by line 11, o	column (f))		14	96.87 %
	Public support percentage from 2012		•	\ <i>''</i>		15	96.20 %
	33 1/3% support test - 2013. If the o		•	n line 13, and line	14 is 33 1/3% or n	nore, check this box	
	stop here. The organization qualifies					·	$\triangleright X$
Ŀ	33 1/3% support test - 2012. If the o				l line 15 is 33 1/3%	6 or more, check the	s box
_	and stop here. The organization qual					· · · · · · · · · · · · · · · · · · ·	▶□
17a	10% -facts-and-circumstances tes	• •			e 13. 16a. or 16b.	and line 14 is 10% o	or more.
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					it it itom the engan	<b>▶</b> □
,	10% -facts-and-circumstances tes					17a, and line 15 is 1	0% or
•	more, and if the organization meets to						
	organization meets the "facts-and-cire						ightharpoons
18	Private foundation. If the organization		_	•			
		did not officer d				edule A (Form 990	

## Schedule A (Form 990 or 990-EZ) 2013 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization failed	ails to
qualify under the tests listed below, please complete Part II.)	

ection A. Public Support						
lendar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,					<u>.</u>	
merchandise sold or services per-						
formed, or facilities furnished in				}		
any activity that is related to the				ļ		
organization's tax-exempt purpose  Gross receipts from activities that			<del></del>	<del> </del>	<del>- </del>	
are not an unrelated trade or bus-						
iness under section 513		1				
- · · · · · · · · · · · · · · · · · · ·			-	<del>                                     </del>	<del> </del>	<del></del>
Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
Total. Add lines 1 through 5						
a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received						
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year				L		
c Add lines 7a and 7b						
Public support (Subtract line 7c from line 6)						
ection B. Total Support		•				_
lendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
Amounts from line 6	(2) 2000	(5) 25 : 5	(0) 20 / /	(5) = 5 : =	(0,20.0	(1) 1010.
a Gross income from interest.					<del> </del>	
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						···
c Add lines 10a and 10b						
Net income from unrelated business activities not included in line 10b,					•	
whether or not the business is				1		
regularly carned on						
Other income. Do not include gain						
or loss from the sale of capital assets (Explain in Part IV.)						
Total support. (Add lines 9, 10c, 11, and 12)						
First five years. If the Form 990 is for t	he organization's	s first, second, thir	d, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	ation,
check this box and stop here	÷		• • • • • • • •		(-)(-)	<b>_</b>
ection C. Computation of Public	Support Pe	rcentage		· · · · · · ·		
Public support percentage for 2013 (lin	ie 8, column (f) d	livided by line 13, o	column (f))		15	
Public support percentage from 2012 S	• • •	•	. "		16	
ction D. Computation of Invest						·
Investment income percentage for 201			ne 13, column (fl)		17	
Investment income percentage from 20			,		18	
a 33 1/3% support tests - 2013. If the c			on line 14, and line	e 15 is more than		7 is not
	ngameation aid i					, 13 HOL
	d etap hara The	Argonization	ifiae ae a amhliati			
more than 33 1/3%, check this box and	-	•				. <b>-</b> (
	rganization did r	not check a box on	line 14 or line 19	a, and line 16 is m	nore than 33 1/3%,	and ⊾ ſ

### SOUTHEASTERN CREDIT UNION FOUNDATION

Schedule A	(Form 990 or 990-EZ) 2013 INC.	59-2252733 Page 4
Part IV	(Form 990 or 990-EZ) 2013 INC.  Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17	a or 17b; and Part III, line 12.
•	Also complete this part for any additional information. (See instructions).	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s
•	The semple of the part for any accelerate information (occ instructions).	<del></del>
		· · · · - · · · · · · · · · · · · · · ·
		<del></del>
-		
•		
		· <del>-</del> ·
r		

### 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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

SOUTHEASTERN CREDIT UNION FOUNDATION Employed

OMB No 1545-0047 Open to Public Inspection

Name of the organization

INC.

**Employer identification number** 59-2252733

Par	TI Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 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 advi	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		e used only
	for charitable purposes and not for the benefit of the donor	<del>-</del> -	
	impermissible private benefit?	, , ,	Yes No
Par	······································	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
•	Preservation of land for public use (e.g., recreation or		storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
-	day of the tax year.		
	day of the taryour		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		
-	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased extinguished or terminated by th	<del></del>
·	vear	to this to the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the sta	o organization during the tax
4	Number of states where property subject to conservation ea	esement is located >	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements	- ·	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		during the year
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	tion easements in its revenue and expens	e statement, and balance sheet, and
•	include, if applicable, the text of the footnote to the organiza	•	
	conservation easements		
Par	TIL Organizations Maintaining Collections	of Art, Historical Treasures, or (	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	· ·	
	the text of the footnote to its financial statements that descri		,
b	If the organization elected, as permitted under SFAS 116 (A		nt and balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	,	
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	al gain, provide
_	the following amounts required to be reported under SFAS		3 b. 0.1.00
а	Revenues included in Form 990, Part VIII, line 1	, to out, totaling to most norms.	<b>▶</b> \$
	Assets included in Form 990, Part X		► \$ ► \$
	, lactic molacou in Form body Fait A		· •

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

### SOUTHEASTERN CREDIT UNION FOUNDATION

Part III   Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued)	***	dule D (Form 990) 2013 INC.			<del></del>			9-22			ge <b>2</b>
check all that apply):   a	Par	t III   Organizations Maintaining C	collections of Ar	t, Historical Tr	easures, or	<u>Other</u>	Simila	<u>ir Asse</u>	<b>ts</b> (contin	ued)	
a Public exhibition d Loan or exchange programs b Scholarly research e Other Preservation for future generations e Other Other Preservation for future generations e of other or provide a description of the organization's collections and explain how they further the organization's exempt purpose in Parl XIII.  Port IV Scholar funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Parl IV, line 9, or reported an amount on Form 990, Parl X, line 21.  Is the organization an agent, tristlee, custodial arrangements. Complete if the organization answered "Yes" to Form 990, Parl IV, line 9, or reported an amount on Form 990, Parl X, line 21.  Is If Yes, explain the arrangement in Parl XIII and complete the following table.  Beginning balance  Additions during the year  Destributions during the year of the organization answered "Yes" to Form 990, Parl XIII  Parl V Endowment Funds. Complete if the organization has been provided in Parl XIII  Parl V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Parl IV, line 10.  Destributions  Descributions  Descributio	3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that a	re a sigr	nıficant u	se of its	collection	ı ıtems	3
b Scholarly research c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds a rainalization as local to the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990. Part X, line 21.  Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990. Part X, line 21.  Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990. Part X, line 21.  Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990. Part X, line 21.  Is If Yes, explain the arrangement in Part XIII and complete the following table.  C Beginning balance  2 Both the organization include an amount on Form 990. Part X, line 21?  British organization include an amount on Form 990. Part X, line 21?  British organization include an amount on Form 990. Part X, line 21?  British organization include an amount on Form 990. Part X, line 21?  British organization include an amount on Form 990. Part X, line 21.  British organization include an amount on Form 990. Part X, line 21.  British organization include an amount on Form 990. Part X, line 10.  Contributions  C Net investment Part XIII. Check here if the explanation has been provided in Part XIII.  British organization include an amount on Form 990. Part X, line 10.  Contributions  C Net investment Part XIII. Check here if the explanation has been provided in Part XIII.  British organization include an amount on Form 990. Part X, line 10.  C Net in vestment Part XIII. Check here if the explanation has been provided in Part XIII.  British organization include an amount on Form 990. Part X,		(check all that apply):									
c	а		d	Loan or exc	hange programs	s					
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 donatrons 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?  Part XII Secrow and Custodial Arrangements. Complete if the organization answered "Yee" 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 XX line 21.  b If "Yes," explain the arrangement in Part XIII and complete the following table.  C Beginning balance  d Additions during the year  f Ending balance  2 Distributions during the year  f Ending balance  2 Distributions during the year  f Ending balance  3 Distributions during the year  f Ending balance  4 Distributions during the year  f Ending balance  5 Distributions during the year  f Ending balance  8 Distributions during the year  f Ending balance  9 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Ending balance  1 Distributions during the year  f Endin	b		е	Other							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be seld to praise that hat be maintained as part of the organization's collection?  Part IV   Scrow 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 apart, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  It is list the organization an apart, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  It is list the organization an apart XIII and complete the following table.  Beginning balance  C Beginning balance  D 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 X, line 10.  Beginning of year balance  D 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.  1a Beginning of year balance  D It "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.  1a Beginning of year balance  D It yes to St. St. St. St. St. St. St. St. St. St.	C										
to be sold to raise funds rather than to be maintained as pert of the organization's collection?	4	Provide a description of the organization's co	ollections and explair	n how they further t	he organization'	's exem <sub>l</sub>	pt purpo	se in Pari	XIII.		
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 bit "Yes," explain the arrangement in Part XIII and complete the following table.    1a   Stephinist   No bit "Yes," explain the arrangement in Part XIII and complete the following table.    1a   Stephinist   No bit "Yes," explain the arrangement in Part XIII and complete the following table.    2a   Dot the organization include an amount on Form 990, Part X, line 21?   Yes   No bit "Yes," explain the arrangement in Part XIII. Check here if the explaination has been provided in Part XIII   Yes   No bit "Yes," explain the arrangement in Part XIII. Check here if the explaination answered "Yes" to Form 990. Part IV, line 10.    1a   Beginning of year balance   1, 195, 548, 1, 203, 548, 549, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 633, 559, 6	5	During the year, did the organization solicit of	or receive donations of	of art, historical trea	sures, or other s	sımılar a	ssets		_		
reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table.  C Beginning balance of Additions during the year  1 Ending balance organization include an amount on Form 990, Part X, line 21?  2 Dot the organization include an amount on Form 990, Part X, line 21?  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.  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance	-										No
on Form 990, Part X?  b if "Yes," explain the arrangement in Part XIII and complete the following table.  C Beginning balance d Additions during the year e Distributions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 217 but fives," 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	Par	Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Control Contro		te if the organizatio	n answered "Ye	es" to Fo	orm 990,	Part IV, i	ine 9, or		
b If "Yes," explain the arrangement in Part XIII and complete the following table.    Amount   1c	1a	Is the organization an agent, trustee, custod	ian or other intermed	lary for contribution	is or other asset	ts not in	cluded				
C   Beginning balance   1   C     C   C   C   C   C   C   C		on Form 990, Part X?							Yes		No
C   Beginning balance     10	b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing table.							
d Additions during the year    Distributions during the year   16   16   16   16   16   16   16   1									Amount		
e Distributions during the year  f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 217 2b If Yes,* explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Inc 10.    Part V   Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.    Part V   Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.    Part V   Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.    Part V   Endowment Funds. Complete if the organization share been provided in Part XIII. Inc 10.    Part V   Endowment Funds. Complete if the organization share been provided in Part XIII. Inc 10.    Part V   Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.    Part V   Endowment Funds have been provided in Part XIII. Inc 10.    Part V   Endowment Funds. Complete if the organizations is sent organization funds in Part XIII. Inc 10.    Part V   Endowment Funds have been provided in Part XIII. Inc 10.    Part V   Endowment Funds. Complete if the organizations is endowment   Part XIII. Inc 10.    Part V   Endowment Funds have been provided in Part XIII. Inc 10.    Part V   Endowment Funds. Complete if the organization is endowment funds. Provided in Part XIII. Inc 10.    Part V   Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Part V   Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Part V   Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Part V   Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Part V   Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X,	C	Beginning balance					1c				
Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending balance   Tending b	d	Additions during the year			-		1d				
2a	е	Distributions during the year					1e				
B. If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.	f	Ending balance					1f		<u> </u>		
Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.	2a	Did the organization include an amount on F	orm 990, Part X, line	21?					Yes		No
(a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years back   1,195,548.    1,203,548.    549,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,633.    559,63		· · · · · · · · · · · · · · · · · · ·									
1, 195,548. 1, 203,548. 549,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,633. 559,6	Par	TV Endowment Funds. Complete	i								
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 1,190,548, 1,195,548, 1,203,548, 549,633, 559,633.  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasivendowment  ### Special Column  ### Special Colu									(e) Four	•	
c Net investment earnings, gains, and losses d Grants or scholarships 5,000. 8,000. 10,000.  Cother expenditures for facilities and programs 190,315.  f Administrative expenses 1,190,548. 1,195,548. 1,203,548. 549,633. 559,633.  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ 9/25.00 %  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:  (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations  5 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1a	* * *	1,195,548.	1,203,548.			5	59,633.		559,0	<u>633.</u>
d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses g End of year balance  1,190,548. 1,195,548. 1,203,548. 549,633. 559,633.  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶	b			· · · · · · · · ·	844,2	230.					
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance  1,190,548. 1,195,548. 1,203,548. 549,633. 559,633.  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment	C										
and programs  f. Administrative expenses g. End of year balance  1,190,548. 1,195,548. 1,203,548. 549,633. 559,633.  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment  55.00  6 Permanent endowment  55.00  7 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:  (i) unrelated organizations (ii) related organizations (ii) related organizations  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.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  b Buildings c Leasehold improvements d Equipment e Other  17,500. 3,500. 14,000.	d	·	5,000.	8,000.				10,000.			
g End of year balance  1,190,548. 1,195,548. 1,203,548. 549,633. 559,633.  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment	е	·									
g End of year balance	_				190,3	315.					
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶	T	·	1 100 510								
a Board designated or quasi-endowment ▶		•				548.	5	19,633.		559,0	633.
b Permanent endowment ▶	2		rent year end balanc	- 1 T	a)) held as:						
c Temporarily restricted endowment ▶ 45.00% 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:  (i) unrelated organizations (ii) related organizations (iii)  related organizations (iii) related organizations	a	== ^^	^	_%							
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:  (i) unrelated organizations  (ii) related organizations  3a(i) X  3a(i) X  3a(i) X  3a(i) X  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  basis (other)  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other  17,500. 3,500. 14,000.	D										
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations  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.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  basis (investment)  basis (other)  c Leasehold improvements d Equipment e Other  17,500. 3,500. 14,000.	С										
by: (i) unrelated organizations (ii) related organizations  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.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  basis (investment)  b Buildings  c Leasehold improvements d Equipment e Other  17,500. 3,500. 14,000.	20	-	•					-4			
(ii) unrelated organizations (iii) related organizations  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.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  basis (investment)  basis (other)  c Leasehold improvements d Equipment e Other  17,500. 3,500. 14,000.	Sa	_	ssion of the organiza	ation that are neig a	no aoministerec	or the	organiz	ation	Г	V	NI-
(ii) related organizations 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.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  basis (other)  (c) Accumulated depreciation  (d) Book value  to Buildings  c Leasehold improvements  d Equipment  e Other  17,500. 3,500. 14,000.		-								res	
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.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other  17,500. 3,500. 14,000.		•								-+	
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other  17,500.  3,500.  14,000.	h	· ·	s listed as required o	n Schedule R?						-	
Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other  17,500.  3,500.  14,000.			•						_00		
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  basis (other)  Land b Buildings c Leasehold improvements d Equipment e Other  Co) Accumulated depreciation  (d) Book value  11a. See Form 990, Part X, line 10.  (b) Cost or other basis (other)  (c) Accumulated depreciation  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form 990, Part X, line 10.  (d) Book value  12a. See Form	Par										
Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (e) Book value  (f) Book value	<b></b>	<del></del>		, Part IV, line 11a. S	ee Form 990, Pa	art X, lin	ne 10.				
1a Land         b Buildings         c Leasehold improvements         d Equipment         e Other       17,500.       3,500.       14,000.	,		(a) Cost or of	ther (b) Cost	or other	(c) Acc	umulate	d	(d) Bool	value	•
b Buildings c Leasehold improvements d Equipment e Other  17,500. 3,500. 14,000.	1a	Land		,	· · · · · · · · · · · · · · · · · · ·	-1					
c Leasehold improvements           d Equipment           e Other         17,500.         3,500.         14,000.	_				<del></del>						
d Equipment e Other 17,500. 3,500. 14,000.		_		· · · · · ·							
e Other 17,500. 3,500. 14,000.		·			···			i			
		• •		1	7,500.		3,50	00.	1	4,00	00.
			equal Form 990, Part								

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59	-2	25	27	33	Page :

Part VII Investments - Other Securities.		/ has 44h Oss Farri 000 /	D 171 10	
Complete if the organization answered "Yes" t  (a) Description of security or category (including name of security)	(b) Book value			d-of-year market value
(1) Financial derivatives	(b) Book value	(b) Metrica of V	aldation: Cost of en	Joryea market value
(2) Closely-held equity interests				
(3) Other			-	
(A)			<del></del>	
(B)				
(C)				
(D)			<del>-</del>	
(E)			<del></del>	<del></del>
(F)			· <del>-</del> · <del>-</del> ····	
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			***************************************	······································
Part VIII Investments - Program Related.			· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered "Yes" to	to Form 990, Part IV	, line 11c. See Form 990, F	Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of va	aluation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				<del></del>
(8)			<del></del>	
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				<u></u>
Part IX Other Assets.				
Complete if the organization answered "Yes" to		, line 11d. See Form 990, F	Part X, line 15.	
	Description	<u> </u>		(b) Book value
(1)				
(2)			_	
(3)				
(4)				
(5)	<del> </del>	<del></del> -		
(6)				<del></del>
(7) (8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15 \	<del></del>	<b>•</b>	<del></del>
Part X Other Liabilities.	15.)	<del></del>		<del></del>
Complete if the organization answered "Yes" to	o Form 990. Part IV	line 11e or 11f See Form	990 Part X line 25	
(a) Description of liability	o i dilli dod, i di civi	(b) Book value	550,1 4117, 1110 20.	
(1) Federal income taxes				
(2) FUNDS HELD FOR OTHERS		94,515.		
(3) INTERCOMPANY PAYABLE		19,720.		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)	114,235.		

2. Liability for uncertain tax positions. 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 X

٠.	SOUTHEASTERN CREDIT UNION FOUNDATION adule D (Form 990) 2013 INC.	5022	52733 Page <b>4</b>
	edule D (Form 990) 2013 INC.  TXI Reconciliation of Revenue per Audited Financial Statements With Revenue per		32/33 Page 4
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	110101111	
1	Total revenue, gains, and other support per audited financial statements	1	154,873.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 25,837	·	
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)	_	
е	Add lines 2a through 2d	2e	<u>25,837.</u>
3	Subtract line 2e from line 1	3	129,036.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	_	
b	Other (Describe in Part XIII.)	-	•
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	129,036.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Keturn	•
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	1.1	275 002
1	Total expenses and losses per audited financial statements	1	275,893.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities  2a	$\dashv$ $\parallel$	
b	Prior year adjustments 2b	-	
C	Other losses 2c	-	
d	Other (Describe in Part XIII.)	-   <sub>0-</sub>	0.
e 2	Add lines 2a through 2d Subtract line 2e from line 1	2e 3	275,893.
3 4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	2/3,033.
+ a	Investment expenses not included on Form 990, Part VIII, line 7b		
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	275,893.
Pa	rt XIII Supplemental Information.		·
	ide 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, lin 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information	ne 4; Part X,	ıne 2; Part XI,
PAI	RT V, LINE 4:		
EXI	PLANATION: THE INTENDED USE OF THE TEMPORARILY RESTRICTED	FUNDS	ARE FOR
DIS	SASTER RELIEF EFFORTS. THE INTENDED USE OF THE PERMANENT	LY RES	TRICTED
FUI	NDS ARE TO SUBSIDIZE THE FOUNDATION'S MISSION OF PROVIDIN	IG SCHO	LARSHIPS.
PAI	RT X, LINE 2:		
EXI	PLANATION: THE FOUNDATION UTILIZES THE NEW ACCOUNTING REQ	UIREME	NTS
ASS	SOCIATED WITH UNCERTAINITY IN INCOME TAXES USING THE PROV	/ISIONS	OF
FII	NANCIAL ACCOUNTING STANDARDS BOARD (FASB) ASC 740, INCOME	TAXES	. USING
	AT GUIDANCE, TAX POSITIONS INITIALLY NEED TO BE RECOGNIZE		
	NANCIAL STATEMENTS WHEN IT IS MORE-LIKELY-THAN-NOT THE PO		<del></del>
	STAINED UPON EXAMINATION BY THE TAX AUTHORITIES. IT ALSO		<u>_</u>

332054 09-25-13

## SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

OMB No 1545-0047 Open to Public

► Attach to Form 990.

SOUTHEASTERN CREDIT UNION FOUNDATION

INC.

Employer identification number 59-2252733 Inspection

Parti	General Information on Grants and Assistance	nd Assistance						
_	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	istance, and the select	·
J	criteria used to award the grants or assistance?	stance?						X Yes No
	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for monit	oring the use of grant	funds in the United	States.			
Part	_	Governments and	d Organizations in the	United States. C	omplete if the orga	nization answered "Y	es" to Form 990, Part I	V, line 21, for any
	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	\$5,000. Part II can	be duplicated if addition	onal space is need	led.			
-	(a) Name and address of organization     or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ILD S W	CHILDREN'S MIRACLE NETWORK							
ij	SALT LAKE CITY, UT 84101	87-0387205	501(C)(3)	21,999.	. 0			OPERATING
					-			
					-			
	Enter total number of section 501(c)(3) and government organizations I	nd government or	ions	isted in the line 1 table				1
က	Enter total number of other organizations listed in the line 1 table	s listed in the line						•
H	For Paperwork Reduction Act Notice, see the Instructions for Forr	, see the Instructi	ons for Form 990.					Schedule I (Form 990) (2013)

59-2252733

Schedule I (Form 990) (2013) INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Provide the information required in		e 2, Part III, column	Part I, line 2, Part III, column (b), and any other additional information	dditional information.	
PART I, LINE 2:					
EXPLANATION: BEFORE THE SCHOLARSHIPS		ARE AWARDED, THE		STUDENT MUST INCLUDE	
LICATION A LETTER	CCEPTANCI	E TO A FLO	OF ACCEPTANCE TO A FLORIDA FOUR YEAR	YEAR	
UNIVERSITY OR A FLORIDA COMMUNITY COLL	COLLEGE.	THE SCHO	SCHOLARSHIP IS USED	USED TO	
OFFSET EXPENSES RELATED TO COLLEGE	EXPENSES.				

### **SCHEDULE J** (Form 990)

### **Compensation Information**

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

Information about Schedule J (Form 990) and its instructions is at 101010, irs. gop / form990 SOUTHEASTERN CREDIT UNION FOUNDATION Employer identification number

OMB No 1545-0047

Inspection

59-2252733

Department of the Treasury Internal Revenue Service Name of the organization

INC.

Part I **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef) Discretionary spending account 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 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 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. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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? X Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X 4c 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. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: X 5a a The organization? X 5b 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? X Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments X not described in lines 5 and 69 lf "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the Х initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

## SOUTHEASTERN CREDIT UNION FOUNDATION

Schedule J (Form 990) 2013 INC •

Part il 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 (ii) 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.

· Page 2

59-2252733

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.

								L
		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Sugin		reported as deterred in prior Form 990
(1) PATRICK LAPINE	€	0	0	0	0	0	0	0
50	(ii)	405,35	0	0	25,500	12,388.	443,24	
	0							
	▣					-		
	(3)							
	(ii)							
	Ξ							
	Ξ							
	Ξ							
	€							
	8							
	€							
	ε							
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332112				ć			Sched	Schedule J (Form 990) 2013

# SOUTHEASTERN CREDIT UNION FOUNDATION INC.

· Page 3

59-2252733

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 J (Form 990) 2013 Part III Supplemental Information

332113 09-13-13

### **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 Open to Public Inspection

Name of the organization

Information about Schedule O (Form 990 or 990-FZ) and its instructions issetutu irs got/form990 SOUTHEASTERN CREDIT UNION FOUNDATION

**Employer identification number** 

INC.	59-2252733
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION:
ESPECIALLY AS THEY RELATE TO CONSUMER CREDIT.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
DEFERRED AGENCY CONTRIBUTIONS	
FORM 990, PART VI, SECTION B, LINE 11:	
EXPLANATION: THE GOVERNING BODY RECEIVES AND REVIEWS A	COPY OF FORM 990
BEFORE IT IS FILED.	
FORM 990, PART VI, SECTION B, LINE 12C:	
EXPLANATION: THE CONFLICT OF INTEREST POLICY IS REVIEWE	D WITH THE BOARD
ANNUALLY AND THEY SIGN A COPY OF THE POLICY.	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUM	ENTS, CONFLICT OF
INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO	THE PUBLIC UPON
REQUEST.	
FORM 990, PART XI, LINE 2C	
EXPLANATION: THE PROCESS HAS NOT CHANGED FROM THE PRIOR	YEAR.
	<u>-</u> -

(g) Section 512(b)(13) controlled Open to Public Inspection £ **Employer identification number** OMB No 1545-0047 2013 × entity? Direct controlling Yes 59-2252733 Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Direct controlling entity CREDIT UNIONS SOUTHEASTERN LEAGUE OF End-of-year assets <u>e</u> status (if section Public charity 501(c)(3)) ▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. SOUTHEASTERN CREDIT UNION FOUNDATION Total income Related Organizations and Unrelated Partnerships Exempt Code E section 501(C)(6) চ ► See separate instructions. Legal domicile (state or Identification of Disregarded Entities Complete If the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or foreign country) foreign country) FLORIDA ► Attach to Form 990. Primary activity Primary activity ASSOCIATION 94-3458406, 3692 COOLIDGE CT, TALLAHASSEE Name, address, and EIN (if applicable) LEAGUE OF SOUTHEASTERN CREDIT UNIONS Name, address, and EIN of related organization of disregarded entity INC. Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R 32311 (Form 990) Part # Part

Schedule R (Form 990) 2013

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SOUTHEASTERN CREDIT UNION FOUNDATION INC.

59-2252733 · Page 2 Part its Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Schedule R (Form 990) 2013

# SOUTHEASTERN CREDIT UNION FOUNDATION

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Schedule R (Form 990) 2013 INC.

Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	ş
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?	sactions with one or more r	elated organizations listed	ın Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	d entity			19		×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b		×
c Gift, grant, or capital contribution from related organization(s)				5	×	
d Loans or loan guarantees to or for related organization(s)				19		×
e Loans or loan guarantees by related organization(s)				10		×
f Dividends from related organization(s)				=		×
g Sale of assets to related organization(s)				19		X
h Purchase of assets from related organization(s)				ŧ		×
i Exchange of assets with related organization(s)				<b>;</b> =		×
j Lease of facilities, equipment, or other assets to related organization(s)				<b>;</b> -		×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
I Performance of services or membership or fundraising solicitations for related organization(s)	ted organization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	ed organization(s)			Ę		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ganization(s)			1	×	
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>				9	×	
p Reimbursement paid to related organization(s) for expenses				4		×
				10	×	
r Other transfer of cash or property to related organization(s)				<b>-</b>		×
s Other transfer of cash or property from related organization(s)				18		×
for infor	ion on who must complete t	his line, including covered	mation on who must complete this line, including covered relationships and transaction thresholds.			
(a) Name of related organization	(b)	(c)	(d) Mathod of designment polytome	porqui		
	type (a-s)					
(1) LSCU SERVICE CORPORATION	υ	15,505.				
(2)						
(3)						
(4)						
(5)						
(9)						
332163 09-12-13	34		Schedule R (Form 990) 2013	R (Form	(066	2013

SOUTHEASTERN CREDIT UNION FOUNDATION INC.

59-2252733

Schedule R (Form 990) 2013 INC

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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.

of entity	Tilliary activity	(state or foreign country)	rrecomment income pa (related, unrelated, sexcluded from tax — under section 512-514) y	parmers sec 501(c)(3) orgs ?	oriare or total	onare or	tionate	tionate amount in box 20 managing ownership of Schedule K-1 partner?	managing	il Percentage
			Inder section 512-514)		omood	order year	allocations	100		ownership
				Yes No	elilcome	assets	Yes No	(Form 1065)	Yes No	
				-						
		, .	-							
									_	
					-					
			•							