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DLN: 93493135078194

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)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 ca	lendar year, or tax year beginning	01-01-2013 , 2013, and end	ing 12-31	L-2013		•	
<b>B</b> Ch	eck if a	applicable	C Name of organization MENDO LAKE CREDIT UNION				D Emplo	yer ide	entification number
		hange	MENDO LARE CREDIT ONION				_ 94-15	54151	5
⊢ Na	me cha	ange	Doing Business As						
┌ Init	ial retu	um	Number and street (or P O box if ma	all is not delivered to street address)	Poom/suit	†a			
_	mınate		526 SOUTH STATE STREET	in is not delivered to street address)	ROOM/Suit	.e	E Teleph	one nun	nber
		return	City or town, state or province, count	ry, and ZIP or foreign postal code					
		n pending	UKIAH, CA 95482	ry, and 21 or foreign poster code					
ו יי	Jilcatio	ii pending							\$ 7,055,924
			<b>F</b> Name and address of prince DAVID RHOADES	cipai officer			this a group pordinates?		n for □ Yes 🔽 No
						54.	oramaces		, 105, 110
							all subordi	nates	▼ Yes  No
——— <b>т</b> Та	x-exer	mpt status	5	(insert no.)	527		luded? No." attach	ı a lıst	(see instructions)
				1317(4)(1) 01					
	ebsit	e: F W	NW MLCU ORG			<b>H(c)</b> Gr	oup exempt	ion nu	mber 🟲
			n 🔽 Corporation 🗌 Trust 🦳 Association	Other ► CREDIT UNION		<b>L</b> Year of	formation 19	59 <b>N</b>	State of legal domicile CA
Pa	rt I	Sun	nmary						
			describe the organization's mission			. D. T. I. E. M. T.	65 H65 0 5		
			) VIDE FINANCIAL SERVICES TO OWLEDGE AND ABILITY OF OU						
3		1112 111	WEEDGE AND ABIET OF GO	K TIETIDE KO TO TIMIKKOE AK	10 00111	NO E TITLE		., ***	
€									
₽									
Governance	2	Checkt	his box 析 if the organization dis	continued its operations or dis	sposed of	f more than	125% of its	net a	ssets
	3	Number	of voting members of the governing	ng body (Part VI. line 1a)				з	7
Activities &			of independent voting members o					4	7
톧			ımber of ındıvıduals employed ın c					5	67
ş			ımber of volunteers (estimate if ne					6	14
-			nrelated business revenue from Pa					7a	0
	1		elated business taxable income fro					7b	
				·		Pı	rior Year	<u> </u>	Current Year
	8	Contr	ributions and grants (Part VIII, lin	e 1 h)					0
₽	9		am service revenue (Part VIII, lin				6,271,	165	7,055,924
Revenue	10	Inves	tment income (Part VIII, column	(A), lines 3, 4, and 7d)			616,		502,020
<del>ď</del>	11	Other	revenue (Part VIII, column (A), l	ines 5, 6d, 8c, 9c, 10c, and 1	1e)				0
	12		revenue—add lines 8 through 11 (						
	<u> </u>						6,887,	327	7,557,944
	13		s and similar amounts paid (Part I				100		0
	14		fits paid to or for members (Part IX				108,	619	108,619
83	15	Salar 5-10	ies, other compensation, employee )	e benefits (Part IX, column (A)	), lines		2,835,	314	3,449,036
Expenses	16a		, ssional fundraising fees (Part IX, c	column (A), line 11e)					0
÷.	Ь		undraising expenses (Part IX, column (D),						
ш	17		r expenses (Part IX, column (A), lı	· · ·			3,942,	854	3,815,802
	18		expenses Add lines 13-17 (mus				6,886,		7,373,457
	19		nue less expenses Subtract line 1		•			540	184,487
<u>%</u> &			·				ing of Curre	nt	End of Year
Not Assets or Fund Balances							Year		
4.55 B.25	20		assets (Part X, line 16)				126,774,	-	174,036,495
2 E	21		liabilities (Part X, line 26)				1,337,	-	1,420,753
	22		ssets or fund balances Subtract I	ine 21 from line 20			125,437,	645	172,615,742
	rt II		nature Block						
			perjury, I declare that I have example belief, it is true, correct, and comp						
			nowledge	piece Deciaration of preparer	(other th	an onicer)	is based on	all lill	offilation of which
							2014-05-15		
Sigr		Sign	ature of officer				Date		
Her	е		TD RHOADES CFO						
		17	e or print name and title	I.D.	1 -			I p===:	
			Print/Type preparer's name	Preparer's signature	Da	I .	heck if elf-employed	PTIN	
Paid			Firm's name 🕨		<u> </u>		ım's EIN 🕨		
	pare		F				I		
Use	• On	ıly	Firm's address 🗠			l P	hone no		

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

┌Yes ┌No

## Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)		
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), line 1? If "Yes," complete Schedule I, Parts I and II	21	No
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 $2?$ If "Yes," complete Schedule I, Parts I and III	22	No
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? <i>If "Yes," complete Schedule J</i>	23	No
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	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	
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 II	26	No
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? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		
		28a	No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part $I$	33	No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2$	35b	No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 files are required to complete Schedule O	38	No

a I	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	 Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   2,811		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
3	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
ı	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	11 163, to fine 3a of 3b, and the organization metrorin 0000-1"	5c		
•	Does the organization have annual gross receipts that are normally greater than $$100,000$ , and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year   7d	<del></del>		
	The test, indicate the number of forms 5252 med during the year.	1		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7</b> f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	Ť		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	<u>.</u>		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year	1		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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	-		
	Enter the amount of reserves on hand	 		-
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0	14h	i	

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

Check if Schedule O contains a	esponse or note to ar	v line in this Part VI .							

<u> </u>	ection A. Governing Body and Management			
			Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		103	
	more members of the governing body?	7a	Yes	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
S€	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		No
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
Ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

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

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
  ►DAVID RHOADES 526 SOUTH STATE STREET
  UKIAH,CA 95482 (707)467-4807

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ♣ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

( <b>A)</b> Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers and	than on is	one bot ecto	not box h ar or/tr	office ustee	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	onal Trustee		ployee	Highest compensated employee				
(1) CAMERON REEVES	2	x						0	0	0
CHAIRMAN OF THE BOARD										
(2) ROBERT SCOTT	2	×						0	0	0
VICE CHAIRMAN								Ŭ	Ŭ	
(3) ARLENE COLOMBINI	2	×						0	0	0
SECRETARY OF THE BOARD		^						ŭ	Ŭ	
(4) JACK DANIELS	2							0	0	0
BOARD DIRECTOR								Ŭ	Ŭ	
(5) MONTE HILL	2							0	0	0
BOARD DIRECTOR								Ů	0	
(6) KAREN CHRISTOPHERSON	2	х						0	0	0
BOARD DIRECTOR (7) LARRY MYERS	2									
BOARD DIRECTOR		х						0	0	0
(8) RICHARD COOPER	40			х				146,306	0	0
PRESIDENTCEO										
(9) JOHN PETERSON	40			x				96,913	0	0
CHIEF OPERATING OFFICER				<u> </u>				33,313	Ŭ	
(10) DAVID RHOADES	40			×				97,254	0	0
CHIEF FINANCIAL OFFICER								11,25	, and the second	
(11) DALE SIMPSON	2							0	0	0
BOARD DIRECTOR								Ĭ	Ŭ	
(12) GALE BEACHAMP	2							0	0	0
BOARD DIRECTOR	_								0	
	1	I	ı	1	ı	l	1	l		

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	tion ( han d on is	ne l both	box, an c	heck unless officer stee)		Repor comper from organiza	table sation the tion (W-	(E)  Reportable  compensation  from related  organizations (W	-	(F) Estima mount o compens from t	ted f other ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
												+		
				_								_		
												+		
												+		
												+		
1b Sub	o-Total			_				<u> </u>						
	al from continuation sheet		ection A	١.		•		Þ				+		
d Tot	al (add lines 1b and 1c) .							<b> -</b>		340,473				
	al number of individuals (in 10,000 of reportable compe						d abov	e) w	ho receive	d more th	an			
													Yes	No
	the organization list any fo						emplo	yee	, or highes	t compen	sated employee			
	ine 1a? If "Yes," complete S any individual listed on line						neatio	n an	d other cor	mnoncatu	on from the	3		No
orga	anızatıon and related organ													
	any person listed on line 1	a receive or acc	rue cor	nnen	• satu	• on fr	om an	• V IIDI	· ·	 anızatıon	or individual for	4		No
	vices rendered to the organ									• • •		5		No
Sectio	on B. Independent Co	ntractors												
<b>1</b> Com	nplete this table for your five the state of	/e highest comp											tax vear	
		(A) lame and business						,			(B) cription of services		(C Comper	)
		Eddiness								203		$\downarrow$		
												7		
 2 Total	number of Independent co	ntractors (inclu	dına but	not	lımıt	ed to	o those	e list	ted above)	who rece	ıved more than	+		

\$100,000 of compensation from the organization  $\blacktriangleright 0$ 

Form 99		· · · · · · · · · · · · · · · · · · ·				Page <b>9</b>
Part V	* • • •	Statement of Revenue Check if Schedule O contains a response or note to any l	ine in this Part VIII			
		Check if Schedule O Contains a response of note to any i	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
u L	1a	Federated campaigns 1a				
ant	b	Membership dues 1b				
Gr	С	Fundraising events 1c				
ifts, ar A	d	Related organizations 1d				
s, G mil	е	Government grants (contributions) <b>1e</b>				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	·  			
tib Ott	g	Noncash contributions included in lines 1a-1f \$				
ind ind	h	Total. Add lines 1a-1f				
		Business Code				
Program Serwde Revenue	2a	INTEREST INCOME ON LOANS 52213	5,144,832	5,144,832		
eve Fe	b	FEE INCOME 522130	1	1,911,092		
Ce F	С					
ærv	d					
E :	е					
ୁମୟ	f	All other program service revenue				
Ğ	g	Total. Add lines 2a-2f	7,055,924			
	3	Investment income (including dividends, interest,	502,020	502,020		
	4	and other similar amounts)	,	,		
	5	Royalties				
		(ı) Real (ıı) Personal				
	6a	Gross rents	_			
	Ь	Less rental expenses				
	С	Rental income or (loss)	_			
	d	Net rental income or (loss)				
	7a	(i) Securities (ii) Other Gross amount	-			
	, u	from sales of assets other				
	b	than inventory Less cost or	-			
	b	other basis and sales expenses				
	С	Gain or (loss)				
	d	Net gain or (loss)				
ine	8a	Gross income from fundraising events (not including  \$				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18				
Jer	h	Less direct expenses b	<del> </del>			
ŧ o	c	Net income or (loss) from fundraising events	-			
	9a	Gross income from gaming activities See Part IV, line 19				
		Less direct expenses <b>b</b> Net income or (loss) from gaming activities	-			
		Gross sales of inventory, less returns and allowances .				
	L	a lass cost of goods cold	-l			
		Less cost of goods sold <b>b</b> Net income or (loss) from sales of inventory <b>b</b>	-{			
		Miscellaneous Revenue Business Code				
	11a		1			
	b					
	С					
	d	All other revenue				
	е	<b>Total.</b> Add lines 11a−11d				
	12	Total revenue. See Instructions	7,557,944	7,557,944	0	0
		<del></del>				Form <b>990</b> (2013)

	,
Part IX	Statement of Functional Expenses
Section 50:	1(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

3600	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	-		olete column (A )	
	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, b, 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				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members	108,619	108,619		
5	Compensation of current officers, directors, trustees, and key employees	340,473	340,473		
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	2,451,478	2,451,478		
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	67,131	67,131		
9	Other employee benefits	366,307	366,307		
10	Payroll taxes	223,647	223,647		
11	Fees for services (non-employees)				
а	Management	42,478	42,478		
b	Legal	33,231	33,231		
c	Accounting	42,889	42,889		
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	210,429	210,429		
13	Office expenses	1,259,555	1,259,555		
14	Information technology	185,375	185,375		
15	Royalties				
16	Occupancy	391,481	391,481		
17	Travel	33,117	33,117		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	24,949	24,949		
20	Interest	198,054	198,054		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	382,031	382,031		
23	Insurance	131,727	131,727		
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	LOAN SERVICING	398,382	398,382		
b	PROVISION FOR LOAN LOSSES	288,347	288,347		
c					
d					
e	All other expenses	193,757	193,757		
25	Total functional expenses. Add lines 1 through 24e	7,373,457	7,373,457	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)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
			Beginning of year		End of year
	1	Cash-non-interest-bearing	2,722,166	1	2,553,994
	2	Savings and temporary cash investments	4,606,989	2	7,462,342
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	148,649	4	998,673
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
ş	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	74,248,875		98.546,273
ď	8	Inventories for sale or use	74,240,070	8	30,040,270
	9	Prepaid expenses and deferred charges	165,330		154,258
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  6,481,5	,		101,200
	ь	Less accumulated depreciation	87 2,815,754	10c	3,249,395
	11	Investments—publicly traded securities	41,572,955	11	60,406,722
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	494,188	15	664,838
	16	Total assets. Add lines 1 through 15 (must equal line 34)	126,774,906	16	174,036,495
	17	Accounts payable and accrued expenses	1,337,261	17	1,420,753
	18	Grants payable		18	<u> </u>
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ø	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
<u>, o</u> v	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabilit		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	0	25	0
	26	Total liabilities. Add lines 17 through 25	1,337,261	26	1,420,753
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets		27	
<u>а</u>	28	Temporarily restricted net assets		28	
Ξ	29	Permanently restricted net assets		29	
ır Fu		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ↓ and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds	113,367,836	30	157,729,407
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Ą	32	Retained earnings, endowment, accumulated income, or other funds	12,069,809	32	14,886,335
Šet	33	Total net assets or fund balances	125,437,645	33	172,615,742

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				▽
•	Total revenue (must equal Bort VIII, column (A.) line 12)				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,5	57,944
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,3	373,457
3	Revenue less expenses Subtract line 2 from line 1	3			.84,487
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
		4		125,4	37,645
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses				
8	Prior period adjustments	7			
0		8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		46,9	993,610
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		172,6	515,742
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ┌
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	n		
	Separate basis 🔽 Consolidated basis 🗆 Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	ne <b>2c</b>		No
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

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OMB No 1545-0047

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public Inspection

ame of the organization	Emp	Employer identification number					
ENDO LAKE CREDIT UNION	94-	94-1541515					
organizations Maintaining Dono organization answered "Yes" to Form				Complet	e if the		
	(a) Donor advised funds		<b>(b)</b> Funds and o	ther accou	nts		
Total number at end of year							
Aggregate contributions to (during year)							
Aggregate grants from (during year)							
Aggregate value at end of year							
Did the organization inform all donors and donor funds are the organization's property, subject to		onor advı	sed	☐ Yes	┌ No		
Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?	·			┌ Yes	┌ No		
art III Conservation Easements. Comp	lete if the organization answered "Yes"	to Forn	n 990, Part IV	, lıne 7.			
Purpose(s) of conservation easements held by t  Preservation of land for public use (e g , recr  Protection of natural habitat  Preservation of open space  Complete lines 2a through 2d if the organization	reation or education)  Preservation of a	a certifie	d historic struct	ure			
easement on the last day of the tax year			Γ				
		<u> </u>	Held at the	End of the	Year		
Total number of conservation easements  Total acreage restricted by conservation easem		2a					
Total acreage restricted by conservation easem		2b					
Number of conservation easements on a certifie	, ,	2c					
Number of conservation easements included in historic structure listed in the National Register	2d						
Number of conservation easements modified, tra	ansferred, released, extinguished, or termina	ited by th	ne organization o	luring			
the tax year 🗠							
Number of states where property subject to con	servation easement is located ►						
Does the organization have a written policy rega enforcement of the conservation easements it h		ndling of	violations, and	☐ Yes	┌ No		
Staff and volunteer hours devoted to monitoring	, inspecting, and enforcing conservation easo	ements d	luring the year				
A mount of expenses incurred in monitoring, insp	pecting, and enforcing conservation easemer	nts during	g the year				
Does each conservation easement reported on l and section 170(h)(4)(B)(II)?	ine 2(d) above satisfy the requirements of so	ection 17	70(h)(4)(B)(ı)	☐ Yes	┌ No		
In Part XIII, describe how the organization repo balance sheet, and include, if applicable, the tex the organization's accounting for conservation e	t of the footnote to the organization's financi asements	al staten	nents that desci	ıbes			
	ctions of Art, Historical Treasures red "Yes" to Form 990, Part IV, line 8.	or Otl	her Similar <i>A</i> ————	Assets.			
If the organization elected, as permitted under S works of art, historical treasures, or other simila service, provide, in Part XIII, the text of the foo	ir assets held for public exhibition, education	n, or rese	arch in furtherai				
If the organization elected, as permitted under S works of art, historical treasures, or other simila service, provide the following amounts relating t	SFAS 116 (ASC 958), to report in its revenu ir assets held for public exhibition, educatior	e statem	ent and balance		ıc		
(i) Revenues included in Form 990, Part VIII, I	ine 1		<b>►</b> \$				
(ii) Assets included in Form 990, Part X			<b>►</b> \$				
If the organization received or held works of art, following amounts required to be reported under							
Revenues included in Form 990, Part VIII, line	1		<b>►</b> \$				
Assets included in Form 990. Part X	sets included in Form 990, Part X						

Part	Organizations Maintaining Collections of Art, H	<u>listo</u>	rie	cal T	reasu	res, or Ot	he	r Similar Asse	ts (co	ntınued)
3	Using the organization's acquisition, accession, and other records, collection items (check all that apply)	, chec	k a	any of	the foll	owing that a	re a	significant use of	its	
а	Public exhibition	d [	_	Loan	orexc	hange progra	ms			
b	Scholarly research	е Г	_	Othe	r					
c	Preservation for future generations									
4	Provide a description of the organization's collections and explain I Part XIII	how th	ney	/ furth	er the d	organization'	s ex	empt purpose ın		
5	During the year, did the organization solicit or receive donations of assets to be sold to raise funds rather than to be maintained as pa								Yes	□ No
Par	<b>Escrow and Custodial Arrangements.</b> Complete Part IV, line 9, or reported an amount on Form 990,	ıf th	e (	organ	ızatıoı			es" to Form 990	),	<u>,                                     </u>
1a	Is the organization an agent, trustee, custodian or other intermedia included on Form 990, Part X?					or other asse	ets r	not	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIII and complete the fol	lowing	g t	able						
								Amou	ınt	
С	Beginning balance						1c			
d	Additions during the year					<u> </u>	Ld			
e	Distributions during the year					<u> </u> :	Le			
f	Ending balance						1f			
2a	Did the organization include an amount on Form 990, Part X, line 2 $$	1?						Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIII Check here if the ex	cplana	itic	on has	been p	rovided in P	art :	XIII		Γ
Pai	rt V Endowment Funds. Complete if the organization a									
1.	<del> </del>	<b>(b)</b> Prid	or y	/ear	<b>b (c)</b> ⊤	wo years back	(d)	Three years back (e	)Four ye	ears back
1a L	Beginning of year balance				-					
b	Contributions									
С	Net investment earnings, gams, and losses									
d	Grants or scholarships									
e	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current year end balance (	(line 1	Lg,	colum	nn (a))	held as				
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment ►									
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100%									
За	Are there endowment funds not in the possession of the organization	on tha	t a	re hel	d and a	idministered	for	the		
	organization by							2=(2)	Yes	No
	(i) unrelated organizations	•	•				•	3a(i) 3a(ii)		
ь	(ii) related organizations	n Sch	ed	·     • ule R?	٠		٠. '	3b		
4	Describe in Part XIII the intended uses of the organization's endow									
Par	<b>t VI</b> Land, Buildings, and Equipment. Complete if the 11a. See Form 990, Part X, line 10.	orga	an	ızatıo	n ansv	vered 'Yes'	to	Form 990, Part	IV, lır	ne
	Description of property			Cost o s (inves	r other stment)	(b)Cost or ot basis (other		(c) Accumulated depreciation	<b>(d)</b> Bo	ok value
1a	_and					326,	709			326,709
	Buildings					2,775,		751,580		2,023,659
	_easehold improvements					726,	906	288,459		438,447
d i	Equipment					2,652,	728	2,192,148		460,580
_e (	Other									
	I. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, c	olumr	1 (E	3), line	10(c).)			🕨		3,249,395
								Schedule D (F	orm 9	90) 2013

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>	
Part VIII Investments—Program Related. C	omplete if the organizati	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>F</b>	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
<b>Part X Other Liabilities.</b> Complete if the organization of the organization of the property	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
		4
		-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )		†
Total. (Column (b) mast equal rollin 990, Fart A, Coll brille 25 7		_

Part	the organization answered 'Yes' to Form 990, Part IV, line 12a.	er R	leturn Complete if
1	Total revenue, gains, and other support per audited financial statements	1	7,557,944
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII ) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	7,557,944
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII ) 4b		
c	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	7,557,944
Part :		per	Return. Complete
1	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	1	7,373,457
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		7,373,137
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII )		
e	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	7,373,457
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		.,,,,,,,,
а	Investment expenses not included on Form 990, Part VIII, line 7b   4a		
b	Other (Describe in Part XIII ) 4b		
С	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	7,373,457
Part	Supplemental Information		
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b 7, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to lation		de any additional
	Return Reference Explanation		
PART )	FOR THE YEARS ENDED MARCH 31 2013 AND 2012 MANAGEMENT I THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THE CRED NOT SUBJECT TO EXAMINATION BY U S FEDERAL AUTHORITIES F 2008 AND BY STATE TAX AUTHORITIES BEFORE 2007	IT UN	NION IS GENERALLY

	·	i ago e
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation
_		
_		
_		
_		

Schedule D (Form 990) 2013

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#### **SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Name of the organization MENDO LAKE CREDIT UNION

Employer identification number

94-1541515

#### 990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI GOVERNANCE MANAGEMENT AND DISCLOSURE	6 THE DEPOSITORS OF THE CREDIT UNION ARE MEMBERS ALL MEMBERS HAVE THE RIGHT TO ELECT THE GOVERNING BODY
PART VI GOVERNANCE MANAGEMENT AND DISCLOSURE	7A THE DEPOSITORS OF THE CREDIT UNION ARE MEMBERS ALL MEMBERS HAVE THE RIGHT TO ELECT THE GOVERNING BODY
PART VI GOVERNANCE MANAGEMENT AND DISCLOSURE	11B NO REVIEW WAS OR WILL BE CONDUCTED
PART VI GOVERNANCE MANAGEMENT AND DISCLOSURE	19 FINANCIAL STATEMENTS ARE POSTED IN THE MAIN OFFICE LOBBY GOVERNING DOCUMENTS AND FORM 990 ARE MADE AVAILABLE UPON REQUEST
PART XI RECONCILIATION OF NET ASSETS	5 OTHER CHANGES IN NET ASSETS OR FUND BALANCES INCLUDE DEPOSITS AND WITHDRAWALS OF MEMBER SHARES