

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493320080905

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

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 20	014 cal	endar year, or tax year beginning	01-01-2014 , and ending 12-3	1-2014			
B Ch	eck if app	olicable	C Name of organization CREDIT UNION OF AMERICA			D	Employer id	entification number
☐ Add	dress chai	nge					48-04772	95
┌ Na	me chang	je	Doing business as					
☐ Init	tial return	ı				E	Telephone nu	mber
Fin	al urn/termı	ınated	Number and street (or P O box if ma PO Box 47528	all is not delivered to street address) Ro	oom/suite		•	
	ended re		Ct	har and 7TD and surren market and a			(316) 265-	-32/2
_			City or town, state or province, coun Wichita, KS 672017528	try, and ZIP or foreign postal code		G	Gross receipts	s \$ 38,375,601
i Api	olication p	renaing	E. Nama and address of some		1			
			F Name and address of prin- Robert Thurman	cipai officer	"	i(a) Is this a subordin		n for
			650 South Westdale Wichita,KS 672017528					
			Wichita, N.3 072017320			i(b) Are all s included		S
I Ta	x-exemp	t status	「 501(c)(3) ▼ 501(c) (14) ◄	(insert no) 4947(a)(1) or 52	.7			t (see instructions)
	ebsite:	▶ www	v cuofamerica com			V-> Group a	xemption n	umher 🕨
				E				
	n of orga rt I		Corporation Trust Association	Other F		L Year of forma	tion 1935	M State of legal domicile KS
Га			escribe the organization's missio					
Governance		source	and certificate accounts, investments It is box I if the organization dis					
			6				1 -	1
Activities &			of voting members of the governi of independent voting members o				. 4	9
\$			mber of individuals employed in c				. 5	236
æ			mber of volunteers (estimate if ne				. 6	18
			related business revenue from Pa	• •			. 7a	365,614
	b Ne	et unre	lated business taxable income fr	om Form 990-T, line 34			. 7b	-45,340
						Prior Y	ear	Current Year
					1		اء	_
a.			butions and grants (Part VIII, lin		-		0	0
enue	9	Progra	m service revenue (Part VIII, lir	ne 2g)	[,280,745	34,056,078
Revenue	9 10	Progra Invest	m service revenue (Part VIII, lir ment income (Part VIII, column	ne 2g)			,280,745	34,056,078 1,482,985
Revenue	9 10 11	Progra Invest Other	m service revenue (Part VIII, lir ment income (Part VIII, column revenue (Part VIII, column (A), l	ne 2g)			,280,745	34,056,078
Revenue	9 10 11 12	Progra Invest Other Total r	m service revenue (Part VIII, lir ment income (Part VIII, column	ne 2g)		3	,280,745	34,056,078 1,482,985
Revenue	9 10 11 12	Progra Invest Other Total r 12) .	m service revenue (Part VIII, lir ment income (Part VIII, column revenue (Part VIII, column (A), l revenue—add lines 8 through 11	ne 2g)	 e)	3	,280,745 ,394,042 229,823 ,904,610 30,078	34,056,078 1,482,985 321,508 35,860,571 29,758
Revenue	9 10 11 12 13 14	Progra Invest Other Total r 12) . Grants Benefi	m service revenue (Part VIII, lingument income (Part VIII, column revenue (Part VIII, column (A), lingumenue—add lines 8 through 11	ne 2g)		3	,280,745 ,394,042 229,823 ,904,610	34,056,078 1,482,985 321,508 35,860,571
	9 10 11 12 13 14	Progra Invest Other Total r 12) . Grants Benefi	m service revenue (Part VIII, linement income (Part VIII, column revenue (Part VIII, column (A), levenue—add lines 8 through 11	ne 2g)		34	,280,745 ,394,042 229,823 ,904,610 30,078	34,056,078 1,482,985 321,508 35,860,571 29,758
	9 10 11 12 13 14 15	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10)	m service revenue (Part VIII, linement income (Part VIII, column revenue (Part VIII, column (A), levenue—add lines 8 through 11	(A), lines 3, 4, and 7d)		34	,280,745 ,394,042 229,823 ,904,610 30,078 14,669	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018
	9 10 11 12 13 14 15	Progra Invest Other Total r 12) . Grants Benefi Salarie 5–10) Profes	m service revenue (Part VIII, lingument income (Part VIII, column revenue (Part VIII, column (A), lingument income (Part VIII, column (A), lingument — add lines 8 through 11 —	(A), lines 3, 4, and 7d)		34	,280,745 ,394,042 229,823 ,904,610 30,078 14,669	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685
Expenses Revenue	9 10 11 12 13 14 15 16a b	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total ful	m service revenue (Part VIII, linguage) ment income (Part VIII, column revenue (Part VIII, column (A), linguage) revenue—add lines 8 through 11	(A), lines 3, 4, and 7d)		3 34 9	,280,745 ,394,042 229,823 ,904,610 30,078 14,669 ,974,510	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685
	9 10 11 12 13 14 15 16a b	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total fu	m service revenue (Part VIII, lingument income (Part VIII, column revenue (Part VIII, column (A), lingument income (Part VIII, column (A), lingument income—add lines 8 through 11 income. Income and similar amounts paid (Part IX) and similar amounts paid (Part IX) are some compensation, employed signal fundraising fees (Part IX, column (D)) expenses (Part IX, column (D)) expenses (Part IX, column (A), linguments)	(A), lines 3, 4, and 7d)		3 34 9 17	,280,745 ,394,042 229,823 ,904,610 30,078 14,669	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685 0
	9 10 11 12 13 14 15 16a b	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total full Other Total e	m service revenue (Part VIII, linguage) ment income (Part VIII, column revenue (Part VIII, column (A), linguage) revenue—add lines 8 through 11	ne 2g)		3 34 9 17 27	,280,745 ,394,042 229,823 ,904,610 30,078 14,669 ,974,510	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685
Expenses	9 10 11 12 13 14 15 16a b	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total full Other Total e	m service revenue (Part VIII, linguage in moment income (Part VIII, column revenue (Part VIII, column (A), linguage in moment income (Part VIII, column (A), linguage in moments and similar amounts paid (Part IX) and similar amounts paid (Part IX) are sometimes, other compensation, employed in moments in moments (Part IX), and arising expenses (Part IX, column (D)) expenses (Part IX, column (A), linguage in moments	ne 2g)		34 34 9 17 27 7 Beginning of	,280,745 ,394,042 229,823 ,904,610 30,078 14,669 ,974,510 0 ,164,628 ,183,885 ,720,725 Current	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685 0 17,645,854 28,314,279 7,546,292
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven	m service revenue (Part VIII, line ament income (Part VIII, column revenue (Part VIII, column (A), line ament income (Part VIII, column (A), line ament income and lines 8 through 11 for a sand similar amounts paid (Part IX) and similar amounts paid (Part IX) are some compensation, employed sional fundraising fees (Part IX), and and sing expenses (Part IX, column (D)) are sexpenses (Part IX, column (A), line axpenses Add lines 13–17 (musue less expenses Subtract line 1	(A), lines 3, 4, and 7d)		34 34 9 17 27 7 Beginning of Year	,280,745 ,394,042 229,823 ,904,610 30,078 14,669 ,974,510 0 ,164,628 ,183,885 ,720,725 Current	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685 0 17,645,854 28,314,279 7,546,292 End of Year
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total full Other Total e Reven	m service revenue (Part VIII, line iment income (Part VIII, column revenue (Part VIII, column (A), line venue—add lines 8 through 11 standard amounts paid (Part IX) and similar amounts paid (Part IX) as, other compensation, employe sional fundraising fees (Part IX, column (D)) expenses (Part IX, column (A), line venue eless expenses Subtract line 1	(A), lines 3, 4, and 7d)		34 34 9 17 27 7 Beginning of Year 535	,280,745 ,394,042 229,823 ,904,610 30,078 14,669 ,974,510 0 ,164,628 ,183,885 ,720,725 Current	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685 0 17,645,854 28,314,279 7,546,292 End of Year 596,652,172
	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven	m service revenue (Part VIII, line ment income (Part VIII, column revenue (Part VIII, column (A), line venue—add lines 8 through 11 standard amounts paid (Part I) es, other compensation, employe sional fundraising fees (Part IX, column (D) expenses (Part IX, column (A), line venue (Part IX, line 16) sessets (Pa	ne 2g)		34 34 99 17 27 7 Beginning of Year 535 467	,280,745 ,394,042 229,823 ,904,610 30,078 14,669 ,974,510 0 ,164,628 ,183,885 ,720,725 Current ,414,253	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685 0 17,645,854 28,314,279 7,546,292 End of Year 596,652,172 521,550,439
Not Assets or Expenses Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total fui Other Total e Reven Total a Total I Net as	m service revenue (Part VIII, line iment income (Part VIII, column revenue (Part VIII, column (A), line venue—add lines 8 through 11 standard amounts paid (Part IX) and similar amounts paid (Part IX) as, other compensation, employe sional fundraising fees (Part IX, column (D)) expenses (Part IX, column (A), line venue eless expenses Subtract line 1	ne 2g)		34 34 99 17 27 7 Beginning of Year 535 467	,280,745 ,394,042 229,823 ,904,610 30,078 14,669 ,974,510 0 ,164,628 ,183,885 ,720,725 Current	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685 0 17,645,854 28,314,279 7,546,292 End of Year 596,652,172
k by the Met Assets of a by	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt III r penalt nowledgarer has	Progra Invest Other Total r 12) . Grants Benefir Salarie 5-10) Profes Total ful Other Total e Reven Total a Total I Net as Sign ties of pe and I any kr	m service revenue (Part VIII, line iment income (Part VIII, column revenue (Part VIII, column (A), line venue—add lines 8 through 11	(A), lines 3, 4, and 7d). Innes 5, 6d, 8c, 9c, 10c, and 11e (must equal Part VIII, column (A), lines 1-3). IX, column (A), lines 1-3). IX, column (A), line 4) e benefits (Part IX, column (A), line 25) Innes 11a-11d, 11f-24e) t equal Part IX, column (A), line 8 from line 12 Inne 21 from line 20 mined this return, including accompliance.		34 34 9 17 27 8eginning of Year 535 467 67	,280,745 ,394,042 229,823 ,904,610 30,078 14,669 ,974,510 0 ,974,510 0 ,164,628 ,183,885 ,720,725 Current ,414,253 ,927,814 ,486,439	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685 0 17,645,854 28,314,279 7,546,292 End of Year 596,652,172 521,550,439 75,101,733 nts, and to the best of
Signature State of Expenses of Fund Balances Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt III r penalt nowledgarer has	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven Total a Total I Net as Sign Lies of p ge and b any kr	m service revenue (Part VIII, line iment income (Part VIII, column revenue (Part VIII, column revenue (Part VIII, column (A), line venue—add lines 8 through 11	(A), lines 3, 4, and 7d)	ines 25) 27) 27) 27) 27) 27) 27) 28)	34 34 9 17 27 7 Beginning of Year 535 467 67 g schedules a officer) is bas	,280,745 ,394,042 229,823 ,904,610 30,078 14,669 ,974,510 0 ,164,628 ,183,885 ,720,725 Current ,414,253 ,927,814 ,486,439 and statemeeted on all in	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685 0 17,645,854 28,314,279 7,546,292 End of Year 596,652,172 521,550,439 75,101,733 nts, and to the best of formation of which
Signature Parameter Capenses And Mot Assets of Land Balances Capenses Capen	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 11 III r penalt nowledgarer has	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven Total a Total I Net as Sign Lies of p ge and b any kr	m service revenue (Part VIII, line iment income (Part VIII, column revenue (Part VIII, column (A), line venue—add lines 8 through 11	(A), lines 3, 4, and 7d). Innes 5, 6d, 8c, 9c, 10c, and 11e (must equal Part VIII, column (A), lines 1-3). IX, column (A), lines 1-3). IX, column (A), line 4) e benefits (Part IX, column (A), line 25) Innes 11a-11d, 11f-24e) t equal Part IX, column (A), line 8 from line 12 Inne 21 from line 20 mined this return, including accompliance.		34 34 34 39 97 17 27 78 8eginning of Year 535 467 67 67 g schedules a officer) is bas 2015- Date Check	,280,745 ,394,042 229,823 ,904,610 30,078 14,669 ,974,510 0 ,974,510 0 ,164,628 ,183,885 ,720,725 Current ,414,253 ,927,814 ,486,439 and statemested on all in	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685 0 17,645,854 28,314,279 7,546,292 End of Year 596,652,172 521,550,439 75,101,733 nts, and to the best of formation of which
Paid Balances Expenses Find Balances Paid Pa	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 11 III r penalt nowledgarer has	Progra Invest Other Total r 12) Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven Total a Total I Net as Sign Lies of p ge and b any kr	m service revenue (Part VIII, line iment income (Part VIII, column revenue (Part VIII, column revenue (Part VIII, column (A), line venue—add lines 8 through 11	(A), lines 3, 4, and 7d)	ines 25) 27) 27) 27) 27) 27) 27) 28)	34 34 9 17 27 7 Beginning of Year 535 467 67 g schedules a officer) is bas 2015- Date	,280,745 ,394,042 ,229,823 ,904,610 ,30,078 ,14,669 ,974,510 0 ,164,628 ,183,885 ,720,725 Current ,414,253 ,927,814 ,486,439 and statemer eled on all in statemer eled on all in specific principles.	34,056,078 1,482,985 321,508 35,860,571 29,758 -38,018 10,676,685 0 17,645,854 28,314,279 7,546,292 End of Year 596,652,172 521,550,439 75,101,733 nts, and to the best of formation of which

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

Form	990 (201	4)			Page 2
Par		atement of Program Service Ad eck if Schedule O contains a response o		:III	
1	Briefly de	scribe the organization's mission			
Prov	ıde lendıng	, savings and financial services to 57,99	51 members for mutual purpo	se	
2		ganization undertake any significant pro Form 990 or 990-EZ?			┌ Yes ┌ No
	If"Yes," o	describe these new services on Schedul	e O		
3		ganization cease conducting, or make s		onducts, any program	┌ Yes ┌ No
	If "Yes," o	describe these changes on Schedule O			
4	expenses	the organization's program service acco Section 501(c)(3) and 501(c)(4) organ expenses, and revenue, if any, for each p	nizations are required to repo		
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	PROVIDE I	DEPOSIT SERVICES TO 57,951 MEMBERS			
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	PROVIDE L	OAN SERVICES TO 28,904 MEMBERS			,
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	PROVIDE (CHECKING ACCOUNT TRANSACTION AND PAYMEN	NT SERVICES AND ACCOUNT ACCES	S TO 28,915 MEMBERS	
4d	O ther pr	ogram services (Describe in Schedule C))		
	(Expens	es \$ 0 including	grants of \$	0)(Revenue \$	0)
4e	Total pro	ogram service expenses 🏲	0		
					Form 990 (2014)

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^{\bullet}	3	Yes	
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	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? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	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 $11e^{7}$ 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? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more 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 domestic government on Part IX, column (A), line 1^7 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 or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer 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), 501(c)(4), and 501(c)(29) 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		
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? <i>If "Yes," complete Schedule L, Part II</i>	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? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or 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? <i>If "Yes," complete Schedule R, Part I</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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		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 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
4-	5-h		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 14,543 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	24	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
h	If "Yes," enter the name of the foreign country			
	See Instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
62	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5с 6а		No.
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	Ua .		
	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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
Qa.	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		

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 response or note	e to any line in this Part VI							
Check it Schedule O Contains a response of not	e to any mie in tins part vi							٠,١٠

Se	ection A. Governing Body and Management			
			Yes	No
1 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		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	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? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a			Yes	
10a b	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes	
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10a 10b 11a 12a 12b 12c 13 14	Yes	

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶KS
- 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 V Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records
 ▶PAUL MEISSNER

650 S WESTDALE DRIVE

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot	not box h ar or/tr	offic	ess er e)	(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
(1) Paul Spacıl	3	х						0	0	0
Chairman	0									
(2) Dean Lang Secretary	2	х						0	0	0
(3) David Blakemore	4	.,								
Director	0	Х						0	0	0
(4) Cushman Miller	2									
Director	0	Х						0	0	0
(5) Jim Means	2	· ·								
Director	0	Х						0	0	0
(6) Mary Kay Glasner	1 5							0	0	
Director	0	Х							U	0
(7) Brian McGuire	2	.,							0	
Director	0	Х							0	0
(8) Richard Gilstrap	2 5							0	0	0
Director	0	Х						U	U	
(9) Stanley Longhofer	2	х						0	0	0
Director	0	^						ľ	U	U
(10) Robert Thurman	50			Х				346,971	0	138,474
CEO	0			^				340,971	O	138,474
(11) Paul Meissner	50			Х				166,430	0	56,638
SVP/CFO	0							100,430	0	30,036
(12) Frank Shoffner	50			х				291,765	0	65,582
SVP/COO	0									·
(13) Rıchard Logan	50			х				133,431	0	29,181
SVP/CIO	0									·
(14) Eileen Phelps	50			х				115,030	0	22,439
SVP/CSO	0									
										Form 990 (2014)

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 pers	than on is	one bot	not bo: h ar	checl c, unle n office rustee	ss er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	organizations (W- 2/1099- MISC)	organization and related organizations
(15) Lea Ann Gabbert SVP/CAO	50 0			х				103,189	0	25,52
(16) Gary Austin VP-Operations Pmt Sys	50					х		105,747	0	20,686
(17) Glenda Burkett VP-Marketing/Bus Dev	50					х		103,043	0	36,854

1b	Sub-Total	•			
c	Total from continuation sheets to Part VII, Section A	H			
d	Total (add lines 1b and 1c)	•	1,365,606	0	395,379

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►8

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νo

	_				
Section	R	Indone	ndont	Contra	actore

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
Takal manakan Kandan andarkan akan kanakan katan	\	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►

Contributions, Gifts, Grants and Other Similar Amounts	1a i i i i i i i i i i i i i i i i i i i
Program Service Revenue	2. 1 0 6 f
svenue	3 4 5 6 6 1 c c c c c c 8 8
Other Re	t () () () () () () () () () (
	11:

VIIII	Statement o	of Revenue ule O contains a respo	nse or note to any lir	(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
					exempt function revenue	business revenue	excluded from tax under sections 512-514
1a	Federated cam	paigns 1a					
b	Membership du	ies 1b					
c	Fundraising ev	ents 1c					
d	Related organiz	zations 1d					
e	Government grant	s (contributions) 1e					
l f	All other contribute	ons, gifts, grants, and 1f		İ			
-	sımılar amounts no	ot included above		ļ	ļ		
g	Noncash contributi 1a-1f \$	ons included in lines					
h	Total. Add lines	s 1 a - 1 f	🔎	0			
			Business Code				
2a	Interest on loans		522130	23,263,105	23,263,105	0	0
b	Fees and other cha	arges	522130	4,577,713	4,577,713	0	0
c	Visa Interchange		522130	3,325,834	3,325,834	0	0
d	Insurance sales		522130	1,604,913	1,527,497	77,416	0
e	RE origination		522130	516,209	516,209	0	0
f	All other progra	am service revenue		768,304	480,106	288,198	0
g	Total. Add lines	s 2a – 2f		34,056,078			
3		ome (including dividen		1,318,300	1,318,300	0	0
4		ar amounts) stment of tax-exempt bond		0	0	0	0
5				62,133	62,133	0	0
		(ı) Real	(II) Personal				
6a	Gross rents						
b	Less rental expenses						
c	Rental income or (loss)	0	0				
d	Net rental inco	me or (loss)					
		(ı) Securities	(II) O ther				
7a	Gross amount from sales of assets other than inventory	2,208,639	471,076				
Ь	Less cost or other basis and	2,201,427	313,603				
	sales expenses Gain or (loss)	7,212	157,473				
d	Net gain or (los			164,685	164,685		
8a		from fundraising					
	\$of contributions See Part IV, lir	s reported on line 1c)					
		a					
b		penses b					
c 9a		(loss) from fundraising from gaming activities	events -				
) Ja		ne 19					
		а					
		penses b	Lustines :				
	Gross sales of	(loss) from gaming acti inventory, less	vities				
	returns and allo						
_		а					
b	-	oods sold b	ontory :				
c	Miscellaneous	(loss) from sales of inv s Revenue	entory				
11a	Federal Tax Re		522130	173,558	173,558	0	0
ь	SERP Investme		522130	85,646	85,646	0	0
С	O ther non-ope		522130	171	171	0	0
d	_	ue					
e	Total. Add lines	s 11a-11d	🕨	259,375			
12	Total revenue.	See Instructions .	🗚	35.860.571	35.494.957	365,614	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete col	umn (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	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	29,758			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members	-38,018			
5	Compensation of current officers, directors, trustees, and key employees	1,494,655			
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	7,249,818			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	445,255			
9	Other employee benefits	875,391			
10	Payroll taxes	611,566			
11	Fees for services (non-employees)				
а	Management				
b	Legal	12,330			
C	Accounting	448,592			
d	Lobbying				
е	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)	111,232			
12	Advertising and promotion	830,375			
13	Office expenses	782,386			
14	Information technology	2,713,450			
15	Royalties				
16	Occupancy	1,033,978			
17	Travel	53,424			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	263,918			
20	Interest	385,400			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,153,663			
23	Insurance	191,879			
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	Dividends	3,756,504			
b	Loan Servicing	2,774,814			
c	Provision for loan losses	2,151,667			
d					
е	All other expenses	982,242			
25	Total functional expenses. Add lines 1 through 24e	28,314,279	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2014)

Part X Balance Sheet

Pal	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in	n this F	art	х			
		. , , , , , , , , , , , , , , , , , , ,				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			•	4,179,679	1	5,502,849
	2	Savings and temporary cash investments				25,459,863	2	20,751,367
	3	Pledges and grants receivable, net		3				
	4	Accounts receivable, net				959,763	4	1,166,736
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete F Schedule L	art II	of			5	
Assets	6	Loans and other receivables from other disqualified persons (section $4958(f)(1)$), persons described in section $4958(c)(3)$ employers and sponsoring organizations of section $501(c)(9)$ beneficiary organizations (see instructions) Complete Part II)(B), a volun	nd c tary	ontributing employees'		6	
88	7	Notes and loans receivable, net				409,980,436	7	477,528,285
⋖	8	Inventories for sale or use					8	
	9	Prepaid expenses and deferred charges				1,683,574	9	2,030,555
	10a	Land, buildings, and equipment cost or other basis						
		Complete Part VI of Schedule D	10a	_	22,800,300	Į l		
	Ь	Less accumulated depreciation	10b		9,790,918		10 c	13,009,382
	11	Investments—publicly traded securities				47,680,623	11	42,662,866
	12	Investments—other securities See Part IV, line 11				5,669,049	12	5,690,451
	13	Investments—program-related See Part IV, line 11					13	
	14	Intangible assets					14	
	15	Other assets See Part IV, line 11				26,617,509	15	28,309,681
	16	Total assets. Add lines 1 through 15 (must equal line 34) .				535,414,253	16	596,652,172
	17	Accounts payable and accrued expenses			•	5,946,666	17	4,880,827
	18	Grants payable					18	
	19	Deferred revenue			•	126,081	19	271,674
	20	Tax-exempt bond liabilities			-		20	
8	21	Escrow or custodial account liability Complete Part IV of Sci					21	
Liabilitie	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqua	lıfıed		•			
<u> </u>		persons Complete Part II of Schedule L	•	•			22	
	23	Secured mortgages and notes payable to unrelated third parti				17,560,711	23	24,071,425
	24	Unsecured notes and loans payable to unrelated third parties	•		•		24	
	25	Other liabilities (including federal income tax, payables to rel and other liabilities not included on lines 17-24) Complete P D	art X o			444,294,356	25	492,326,513
	26	Total liabilities. Add lines 17 through 25				467,927,814	26	521,550,439
es-		Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34.						
ž	27	Unrestricted net assets		_	•		27	
<u>छ</u>	28	Temporarily restricted net assets			•		28	
<u> </u>	29	Permanently restricted net assets		•			29	
r Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here 🕨	- ▽	and			
s or	30	Capital stock or trust principal, or current funds				О	30	0
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				0	31	0
ASS	32	Retained earnings, endowment, accumulated income, or other				67,486,439	32	75,101,733
Net 1	33	Total net assets or fund balances				67,486,439	33	75,101,733
Ż	34	Total liabilities and net assets/fund balances				535,414,253	34	596,652,172
		·				<u> </u>		Form 990 (2014)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	₁		35.8	360,571
2	Total expenses (must equal Part IX, column (A), line 25)	2			314,279
3	Revenue less expenses Subtract line 2 from line 1				
		3		7,5	546,292
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		67,4	486,439
5	Net unrealized gains (losses) on investments	_		<u>-</u>	
6	Donated services and use of facilities	5			69,002
Ü	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	'			
Ū	Thorperiod adjustments	8			0
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		75,:	101,733
Par	t XII Financial Statements and Reporting	<u>'</u>			
	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		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	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				
С	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	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493320080905

OMB No 1545-0047

(Form 990 or 990-EZ)

SCHEDULE C

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Political Campaign and Lobbying Activities

Inspection

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

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

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

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

line 35c (Proxy Tax) (see separate instructions), then

◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** CREDIT UNION OF AMERICA Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 0 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 100 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 100 Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter directly delivered to a 0 separate political organization If none. enter-0-(1) Kansas Credit Union PAC 2872 N Ridge Rd Ste 122 100 48-0288307 Wichita, KS 67205

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

Pa	rt II-B Complete if the organiza filed Form 5768 (election	tion is exempt under section 501(c)(3) and has N n under section 501(h)).	TOP			<u> </u>	<u></u>
	West was a second of the secon	many days Days TV a data lad day awaki ay af the labby an	(a	1)		(b)	
ror e activ	•	w, provide in Part IV a detailed description of the lobbying	Yes	No	A	mour	nt
1	legislation, including any attempt to influe through the use of	attempt to influence foreign, national, state or local nce public opinion on a legislative matter or referendum,					
а	Volunteers?				_		
b		sation in expenses reported on lines 1c through 1i)?			1		
C	Media advertisements?						
d	Mailings to members, legislators, or the pu	ublic?					
е	Publications, or published or broadcast st	F					
f	Grants to other organizations for lobbying	purposes?					
g	Direct contact with legislators, their staffs	, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conver	itions, speeches, lectures, or any similar means?					
i	O ther activities?						
j	Total Add lines 1c through 1:						
2a	Did the activities in line 1 cause the organ	iization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incur	red under section 4912					
С	If "Yes," enter the amount of any tax incur	red by organization managers under section 4912					
d	If the filing organization incurred a section	4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organiza 501(c)(6).	tion is exempt under section 501(c)(4), section 5	501(c))(5), (or se	ctio	n
				_		Yes	No
1	Were substantially all (90% or more) dues			L	1		
2	Did the organization make only in-house lo	obbying expenditures of \$2,000 or less?		L	2		
3		bbying and political expenditures from the prior year?			3		
Par		tion is exempt under section 501(c)(4), section 5 a) BOTH Part III-A, lines 1 and 2, are answered " "					
1	Dues, assessments and similar amounts f	rom members	1				
2	Section 162(e) nondeductible lobbying an expenses for which the section 527(f) tax	d political expenditures (do not include amounts of political was paid).					
а	Current year		2a				
b	Carryover from last year		2b				
С	Total		2c				
3	Aggregate amount reported in section 603	33(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	does the organization agree to carryover t	e 2c exceeds the amount on line 3, what portion of the excess o the reasonable estimate of nondeductible lobbying and					
_	political expenditure next year?		4				
5	Taxable amount of lobbying and political e		5				
Pa	art IV Supplemental Information	<u>n</u>					
		line 1 , Part l-B, line 4 , Part l-C , line 5 , Part II-A (affiliated grou , complete this part for any additional information	ıp lıst),	Part II	-A, In	nes 1	and
	Return Reference	Explanation					
Sche		e C, Part I-A, Line 1 - \$100 contribution to the Kansas Credit U ee (PAC)	nion Po	olitical	Actio	n	

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493320080905

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.

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

Open to Public Inspection

Name of the organization CREDIT UNION OF AMERICA		Employer identification number
EXCEPT ONTON OF APPEATOR		48-0477295
Organizations Maintaining Donor Ad organization answered "Yes" to Form 990		inds or Accounts. Complete if the
organization unionoreal record to reministra	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate value of contributions to (during year)		
Aggregate value of grants from (during year)		
Aggregate value at end of year		
Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		or advised Yes No
Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene conferring impermissible private benefit?	lonor advisors in writing that grant funds (can be
art II Conservation Easements. Complete	f the organization answered "Yes" to	Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	n or education) Preservation of an Preservation of a c	historically important land area ertified historic structure ne form of a conservation
easement on the last day of the tax year	Г	Held at the End of the Year
a Total number of conservation easements	-	2a
•	-	
Total acreage restricted by conservation easements		2b
Number of conservation easements on a certified hist	` '	2c
Number of conservation easements included in (c) ac historic structure listed in the National Register	quired after 8/1 //06, and not on a	2d
Number of conservation easements modified, transfer	red, released, extinguished, or terminated	d by the organization during
the tax year 🗕		
Number of states where property subject to conserva	tion easement is located ►	
Does the organization have a written policy regarding enforcement of the conservation easements it holds?		ling of violations, and Yes No
Staff and volunteer hours devoted to monitoring, insper	ecting, and enforcing conservation easem	ents during the year
A mount of expenses incurred in monitoring, inspectin	g, and enforcing conservation easements	during the year
▶ \$		470(1)(4)(0)(1)
Does each conservation easement reported on line 2 (and section $170(h)(4)(B)(II)$?		☐ Yes ☐ No
In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easem	e footnote to the organization's financial	·
THE III Organizations Maintaining Collection Complete if the organization answered "		or Other Similar Assets.
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assessivite, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education, o	or research in furtherance of public
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assessivice, provide the following amounts relating to the	ets held for public exhibition, education, o	
(i) Revenue included in Form 990, Part VIII, line 1		▶ \$
(ii) Assets included in Form 990, Part X		► \$
If the organization received or held works of art, histo following amounts required to be reported under SFAS		r financial gain, provide the
Revenue included in Form 990, Part VIII, line 1		F \$
b Assets included in Form 990, Part X		► \$

Par	••• Organizations Maintaining Co	<u>llections of Art</u>	, His	tori	<u>cal Tr</u>	easu	<u>ires, or Ot</u>	:he	<u>r Similar</u>	Asse	ts (co	<u>ntınued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	neck			_		sıgnıfıcant	use of	ıts	
а	Public exhibition		d	Γ	Loan	orexc	hange progra	ams				
b	Scholarly research		e	Γ	Other	=						
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y furthe	r the o	organızatıon's	sex	empt purpo	ose in		
5	During the year, did the organization solicit								ıılar	_		_
	assets to be sold to raise funds rather than t		·								Yes	l No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answered ————	I ''Y	es" to For	m 990), ——	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	forc	ontribu	tions	or other asse	ets i	not	Г	Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing t	able		_					
							<u> </u>			Amou	ınt	
С	Beginning balance						<u> </u>	1c				
d	Additions during the year						<u> </u>	1.d				
е	Distributions during the year						<u> </u>	1e				
f	Ending balance						L:	1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21,	for e	scrow o	rcust	odıal accoun	t lıa	bility?	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expl	anatı	on has	been p	orovided in Pa	art :	XIII			\sqcap
Pa	rt V Endowment Funds. Complete	f the organization	n ans	wer								
		(a)Current year	(b)) Prior	year	b (c) ⊤	wo years back	(d)	Three years b	ack (e)Four ye	ears back
1a	Beginning of year balance											
b	Contributions											
С	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											
2	Provide the estimated percentage of the cur	rent year end baland	ce (lın	ne 1g	, colum	n (a))	held as					
а	Board designated or quasi-endowment 🕨											
ь	Permanent endowment ▶											
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld agual 100%										
За	Are there endowment funds not in the posses	·	ation	that	oro bolo	danda	dministored	for	th a			
Ja	organization by	ssion of the organiza	ation	tilat	are nero	ı anu c	aummstereu	101	tile		Yes	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)		
b	If "Yes" to 3a(II), are the related organizatio	· ·								3b		
4	Describe in Part XIII the intended uses of th	=								_		
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		the o	rgar	ıızatıor	n ansv	wered 'Yes'	to	Form 990	, Part	IV, lii	ne
	Description of property	10.) Cost or is (invest		(b)Cost or oth		(c) Accumu depreciati		(d) Bo	ok value
	_and			+		0	3,434,9	956		-+		3,434,956
	Buildings					0	9,814,7	-	2.99	0,293		6,824,446
	_easehold improvements		•			0	146,9	\rightarrow	•	6,902		0
	Equipment	· · · ·	-	\vdash		0		-				
						U	9.40.5.7		0.0)3,/23 I		
e	Other					0	9,403,7	0	0,02	53,723 0		0

Part VII Investments—Other Securities. Co	omplete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of va	
(Including name of security) (1)Financial derivatives		Cost or end-of-year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. C	Complete if the organization	n answered 'Yes' to Fo	orm 990, Part IV, line 11c
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	aluation
(a) Description of investment	(b) Book value	Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<u> </u>		
Part IX Other Assets. Complete if the organization (a) Description		D, Part IV, line 11d See	(b) Book value
(.,			(-,
Total. (Column (b) must equal Form 990, Part X, col.(B) line			Ino 110 or 115 C
Part X Other Liabilities. Complete if the org Form 990, Part X, line 25.	janization answered Yes' (.o roiiii 990, Part IV, I	mie 11e or 11r. See
1 (a) Description of liability	(b) Book value		
Federal income taxes			
Member Share Deposits	490,817,195		
Accrued Liability - Deferred Comp Plan	1,505,484		
Accrued Dividends Payable	3,834		
Total (Column (h) must equal Form 900 Part V col (P) line 35 \	402 224 512		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	492,326,513	h	

Part		evenue per Audited Financial Statements Wi ered 'Yes' to Form 990, Part IV, line 12a.	th Revenue per	Return Complete if
1	_	r support per audited financial statements	1	35,384,956
2	· - ·	t not on Form 990, Part VIII, line 12	· · · · -	33,301,330
a	Net unrealized gains (losses)		0	
b	Donated services and use of fa			
c	Recoveries of prior year grants	 		
d			-475,615	
e	Add lines 2a through 2d .	<u>zu</u>		e -475,615
3	· ·			
4		D, Part VIII, line 12, but not on line 1	· · · ·	33,000,371
a		uded on Form 990, Part VIII, line 7b . 4a		
a b	·	4b		
	Add lines 4a and 4b		4	0
C E		4c. (This must equal Form 990, Part I, line 12)		
5 Part		kpenses per Audited Financial Statements W		1
Fait		swered 'Yes' to Form 990, Part IV, line 12a.	Tui Expenses po	ei ketuili. Complete
1		audited financial statements	1	27,838,665
2	Amounts included on line 1 but	not on Form 990, Part IX, line 25		
а	Donated services and use of fa	cilities	О	
b	Prior year adjustments		0	
C	Other losses		0	
d	Other (Describe in Part XIII)		0	
e	Add lines 2a through 2d		2	le 0
3	Subtract line 2e from line 1 .		3	27,838,665
4	Amounts included on Form 990), Part IX, line 25, but not on line 1:		
а	Investment expenses not inclu	ided on Form 990, Part VIII, line 7b 4a	475,614	
b	Other (Describe in Part XIII)	4b	0	
C	Add lines 4a and 4b		4	lc 475,614
5	Total expenses Add lines 3 ar	d 4c. (This must equal Form 990, Part I, line 18)		5 28,314,279
Part	XIII Supplemental Inf	ormation	•	
Part \	/, line 4, Part X, line 2, Part XI, nation	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV lines 2d and 4b, and Part XII, lines 2d and 4b Also com		ovide any additional
	Return Reference ale D, Part X, Line 2	Explanation Schedule D, Part X, Line 2 - The Credit Union is exempt,		
	ıle D, Part XI, Line 2d	state income taxes Certain products and services provinave been deemed by the Internal Revenue Service (IRS released in 2007, to be unrelated to the specific entity's technical advice memorandums the net taxable income for subject to income taxes. Credit Unions have litigated agand have been successful in having courts declare in 20 products sold to members, helping them protect their finincome, contrary to the IRS position in the TAMs. Reven members was also ruled to qualify as exempt purpose into assess taxes, penalties and interest for any years for of management, any liability resulting from taxing author taxable income from the activities potentially deemed to purpose is not expected to have a material effect on the operations. The Credit Union has filed tax returns in the Credit Union evaluated its tax positions and determined December 31, 2014, and 2013. The Credit Union's tax yexamination by federal and state taxing authorities.	ded by select state (i), in technical advice exempt purpose As from these products ainst the IRS position (ii) and 2010 that reading and 2010 that reading from providing income The taxing au which no tax return ities imposing income be unrelated to the Credit Union's finan past for activities it no uncertain tax positions (iii) and beyone the control of the contro	chartered credit unions ce memorandums (TAMs) s presented in the and services would be ons noted in the TAMs evenue from insurance alifies as exempt purpose evestment services to ithorities have the ability was filed In the opinion me taxes on the net Credit Union's exempt icial position or results of thas deemed taxable The sitions exist as of
Jeneul	are D, i are AI, Line Zu	o their operating income ITT risk share and rederal tax re	Talla	

Jenedale 2 (1 31111 33 3) 23 13		r age 3		
Part XIII Supplemental Information	on (continued)			
Return Reference	Explanation			
l				
-				

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493320080905 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization CREDIT UNION OF AMERICA 48-0477295 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance grant cash orassistance or government assistance (book, FMV, appraisal, other)

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) TGIF Teacher Classroom Grants	36	15,029	0		
(2) Scholarships college students	15	8,000	0		
(3) Nursing student scholarships	14	6,729	0		

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.				
Return Reference	Explanation			
	Schedule I, Part I, Line 2 - Amounts for the nursing scholarships were disbursed directly to the nursing school for benefit of the recipient Most TGIF teacher classroom grants are publicly presented and are awarded for a specific purpose detailed in their application, so teacher, parent and student awareness of the grant helps ensure it is used for the intended purpose, but there is no explicit post-award monitoring College scholarships are disbursed directly to the student, supported by a letter of admission or other enrollment documents from the college			

Schedule I (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493320080905

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

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

Open to Public Inspection

Name of the organization CREDIT UNION OF AMERICA

Employer identification number 48-0477295

Pa	rt I	Questions Regarding Compensation	1				
						Yes	No
La				ny of the following to or for a person listed in Form			
			to prov	vide any relevant information regarding these items			
		First-class or charter travel	l –	Housing allowance or residence for personal use			
		Travel for companions	<u> </u>	Payments for business use of personal residence			
	_	Tax idemnification and gross-up payments	<u> </u>	Health or social club dues or initiation fees			
	, L	Discretionary spending account	,	Personal services (e g , maid, chauffeur, chef)			
b		y of the boxes in line 1a are checked, did the org					
,		bursement or provision of all of the expenses de			1b		
Ľ		he organization require substantiation prior to re tors, trustees, officers, including the CEO/Exec		Director, regarding the items checked in line 1a?	2		
3		ate which, if any, of the following the filing organ					
		nization's CEO/Executive Director Check all th by a related organization to establish compens		y Do not check any boxes for methods f the CEO/Executive Director, but explain in Part III			
	Γ	Compensation committee	굣	Written employment contract			
	₽ I	Independent compensation consultant	굣	Compensation survey or study			
	F	Form 990 of other organizations	굣	Approval by the board or compensation committee			
1		ng the year, did any person listed in Form 990, F related organization	Part VII	I , Section A , line $1 extstyle{a}$ with respect to the filing organization			
а	Rece	eive a severance payment or change-of-control	paymen	nt?	4a		No
b	Parti	cipate in, or receive payment from, a supplemer	ntal non	qualified retirement plan?	4b	Yes	<u> </u>
C		cipate in, or receive payment from, an equity-ba			4c		Νo
	If "Y	es" to any of lines 4a-c, list the persons and pro	ovide th	ne applicable amounts for each item in Part III			
	Only	501(c)(3), 501(c)(4), and 501(c)(29) organizat	ions m	ust complete lines 5-9.			
5		ersons listed in Form 990, Part VII, Section A, pensation contingent on the revenues of	line 1a	, did the organization pay or accrue any			
а	The	organization?			5a		
b	Anyı	related organization?			5b		
	If"Y	es," to line 5a or 5b, describe in Part III					
5		ersons listed in Form 990, Part VII, Section A, pensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
а	The	organization?			6a		
b	Anyı	related organization?			6b		
	If"Y	es," to line 6a or 6b, describe in Part III					
7		ersons listed in Form 990, Part VII, Section A , nents not described in lines 5 and 6? If "Yes," d			7		
3		any amounts reported in Form 990, Part VII, p					
	_	ect to the initial contract exception described in irt III	Regula	ations section 53 4958-4(a)(3)? If "Yes," describe			
					8		
9		es" to line 8, did the organization also follow the ion 53 4958-6(c)?	rebutt	able presumption procedure described in Regulations	٩		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title (B) Breakdown		(B) Breakdown of	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 Robert Thurman, CEO	(i) (ii)	292,506 0	51,834 0	2,630 0	126,939 0	11,535 0	485,444 0	0 0
2 Paul Meissner, SVP/CFO	(i) (ii)	148,012	17,618	800	47,085 0	9,553	223,068	0
3 Frank Shoffner, SVP/COO	(i) (ii)	169,132	122,093	540 0	56,657 0	8,925 0	357,347 0	100,000
4 Richard Logan, SVP/CIO	(i) (ii)	118,824	14,402	205	22,716 0	6,465	162,612	0
5 Eileen Phelps, SVP/CSO	(i) (ii)	104,191 0	9,364	1,475 0	21,609	830	137,469	0
6 Lea Ann Gabbert, SVP/CAO	(i) (ii)	101,757 0	1,000	433	18,845 0	6,680	128,715 0	0

Schedule J (Form 990) 2014

Part III Supplemental Information

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

rise complete this part for any addition	The first of the f
Return Reference	Explanation
,	Schedule J, Part I, Line 3 - The Board of Directors engages an independent compensation consultant to perform an annual compensation survey The Board approves CEO compensation annually based on the compensation survey by the consultant, within the terms of a written employment contract and based on pre-established performance targets
	Schedule J, Part I, Line 4 - The following officers participated in a 457F deferred compensation plan Paul Meissner\$16,324 accrual, \$0 payout Frank Shoffner\$20,493 accrual, \$100,000 payout The following officers participated in a long-term incentive plan Robert Thurman\$106,404 accrual, \$0 payout Paul Meissner\$18,528 accrual, \$0 payout Frank Shoffner\$22,389 accrual, \$0 payout Richard Logan\$12,912 accrual, \$0 payout Eileen Phelps\$13,055 accrual, \$0 payout Lea Ann Gabbert\$12,123 accrual, \$0 payout The amount of 457F payout for Frank Shoffner was reported as taxable income on the executive's Form W-2

Schedule J (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493320080905

OMB No 1545-0047

2014

Open to Public Inspection

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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
CREDIT UNION OF AMERICA

Employer identification number
48-0477295

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section A, Line 6	As a state-chartered credit union, we have members because a credit union is a member based organization
Form 990, Part VI, Section A, Line 7a	The membership elects all directors to the Board of Directors with staggered 3 year terms as par of our annual election process
Form 990, Part VI, Section A, Line 7b	The membership has rights, as specified in bylaws and applicable state laws, to review and approve certain types of Board actions or proposals
Form 990, Part VI, Section B, Line 11b	A copy of the Form 990 is distributed to the Board via an online directors document system when the return is completed, and is scheduled for further review at the December 2015 Bo ard Meeting. The Form 990 is prepared by our CFO and an internal senior financial analyst, and is reviewed by the CEO at the time of the return being filed.
Form 990, Part VI, Section B, Line 12c	Directors complete and sign a due diligence questionnaire annually, which includes disclos ure of potential conflicts of interest. All employees, including the CEO and officers, complete an annual conflict of interest disclosure, as well as disclosure of any offers of gifts or financial to seek inappropriate influence. There is a follow-up review by our interinal auditor to ensure all employees submit a completed disclosure. Family member accounts are also documented in the is process, and entered into the primary data system to prevent access to related accounts.
Form 990, Part VI, Section B, Line 15	An external compensation consultant provides updated comparative compensation information annually. This data is used to update midpoint compensation for all job grades. The consultant's information is provided to the executive committee of the Board, which sets CEO compensation in formal meetings for which minutes are kept. The Board approves changes in the percent changes for midpoint compensation for all other positions. The CEO operates within the approved grade and midpoint structure and Board-approved budget in approving compensation for other officers. This process applied to the CEO and all officers for 2014.
Form 990, Part VI, Section C, Line 19	GOVERNING DOCUMENTS AND POLICIES, INCLUDING CONFLICT OF INTEREST POLICY, ARE AVAILABLE FOR INSPECTION AT OUR CORPORATE OFFICE. CERTAIN DOCUMENTS WITH PROPRIETARY INFORMATION, OR CO NTAINING PERSONAL INFORMATION OF MEMBERS, ARE NOT MADE AVAILABLE. FINANCIAL STATEMENTS ARE POSTED IN OUR OFFICE LOBBIES, AND ANNUAL FINANCIAL STATEMENTS ARE DISTRIBUTED AT THE ANNU. AL MEMBERSHIP MEETING. IN ADDITION, THE NCUA WEBSITE POSTS DETAILED FINANCIAL INFORMATION AS PART OF THE QUARTERLY CALL REPORT PROCESS.