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# Form 990

SCANNED JUN 08

# Return of Organization Exempt From Income Tax

OMB No 1545-0047

2014

Open to Public

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.

Department of the Treasury Internal Revenue Service Inspection ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2014 calendar year, or tax year beginning 01/01 Check if applicable: C Name of organization Skyward Credit Union D Employer identification number Doing business as 48-6107341 Address change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number  $\square$ Name change Initial return Four Cessna Boulevard 316-517-6578 City or town, state or province, country, and ZIP or foreign postal code Final return/terminate Wichita, KS, 67215-1423 G Gross receipts \$ Amended return 10,823,392 H(a) Is this a group return for subordinates? Yes No F Name and address of principal officer Lawrence Damm Application pending Four Cessna Blvd, Wichita, KS 67215 H(b) Are all subordinates included? Yes No If "No," attach a list, (see instructions) √ 501(c) ( 14 ) 
√ (insert no ) 
√ 4947(a)(1) or 
√ 527 Tax-exempt status www.skywardcu.com H(c) Group exemption number ▶ Website: ▶ Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation M State of legal domicile 1941 KS Part I Summary Briefly describe the organization's mission or most significant activities. Provide cooperative financial services to members Activities & Governance Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . . . Number of independent voting members of the governing body (Part VI, line 1b) 4 7 5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 36 Total number of volunteers (estimate if necessary) . . . . . . 6 15 Total unrelated business revenue from Part VIII, column (C), line 12 7a 7a 28,304 Net unrelated business taxable income from Form 990-T, line 34 7b Current Year Contributions and grants (Part VIII, line 1h) . R 9 Program service revenue (Part VIII, line 2g) 7,255,839 7,077,476 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 10 3,713,572 3,608,058 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e). 11 61,592 79,460 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 11,031,003 10,764,994 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) ..... n 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX; column (A); lines 5-10) 2,170,218 2,371,620 Professional fundraising fees (Part IX, column (A), line 11e) . . . . 16a O 0 Total fundraising expenses (Part IX, column (D), line 25) ► 10 (A) Other expenses (Part IX, column (A), lines 11a=11d,-11f-24e)- ' :, U.I. 17 5,342,080 5,033,822 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 7,512,298 7,405,442 Revenue less expenses. Subtract line 18 from line 12 19 3,518,705 3,359,552 End of Year **Beginning of Current Year** 20 Total assets (Part X, line 16) 221,637,578 238,898,168 21 Total liabilities (Part X, line 26) . . . . 197,797,885 200,375,707 22 Net assets or fund balances. Subtract line 21 from line 20 23,839,693 38,522,461 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Date Here Lawrence Damm, President Type or print name and title Print/Type preparer's name Preparer's signature Paid Check I if self-employed Preparer Firm's name Firm's EIN ▶ **Use Only** 

Yes No

May the IRS discuss this return with the preparer shown above? (see instructions)

Firm's address ▶

Phone no

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		✓
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I </i>	3	1	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<b>-</b>
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		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		<b>√</b>
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	1	
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
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	1	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	1	
12 a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> .  Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>	11f	✓	
	Schedule D, Parts XI and XII	12a	<b>/</b>	
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<b>✓</b>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<del>├</del> ──	<b>√</b>
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<b> </b>	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<b>▼</b>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)			
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	17		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		1
	If "Yes," complete Schedule G, Part III	19	<del> </del>	1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u> </u>	1

Form 99	0 (2014)		F	age 4
Part	V Checklist of Required Schedules (continued)			
24	Did the experiencian valuat mare than \$5,000 of grants or other equations to any demostic expension or		Yes	No
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? If "Yes," complete Schedule I, Parts I and II	21		✓
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		<b>✓</b>
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</i> "Yes," <i>complete Schedule J</i>	23	✓	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 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	24d 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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 "Yes," complete Schedule L, Part II	26		1
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		1
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):			7.1
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 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		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	1	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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	<b>Section 501(c)(3) organizations.</b> 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,			,
38	Part VI	37		\
	13: Note: All Form 330 filets are required to complete Schedule O	38	<b>.</b> ✓	

Part				
	Check if Schedule O contains a response or note to any line in this Part V	<del></del>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		•	5. 1 (
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		,'	L ,
·	reportable gaming (gambling) winnings to prize winners?	1c	Ž	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	<u> </u>	<u> </u>	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 36	.		,
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	<i>\(\bar{\chi}\)</i>	1
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<b>√</b>	
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	<	
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		<b>✓</b>
b	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).	. 1		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		- j -
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	,		
а	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 7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	/B		
·	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	, <del>, , ,</del>	_	<u> </u>
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	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the			_
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a b	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b	_	
10	Section 501(c)(7) organizations. Enter:	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			-
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		•	
11	Section 501(c)(12) organizations. Enter:	1		
а	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		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a		<b></b> -
а	Note. See the instructions for additional information the organization must report on Schedule O.	134		<b>_</b>
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b>√</b>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		
		Forr	n <b>99</b> 0	(2014)

Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
<u>C4</u> :	Check if Schedule O contains a response or note to any line in this Part VI	• •	<u></u>	<u> </u>
Secu	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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 Schoolule O.	2 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	1512	x,*
b 2	committee, explain in Schedule O.  Enter the number of voting members included in line 1a, above, who are independent .  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		<b>√</b>
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	✓	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6 7a	Did the organization have members or stockholders?	7a	<b>√</b> ✓	
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		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		,	
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
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		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
40-	Diddhaaraan ah ay baya la ad ah arbay bayan baya	40-	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a	<b>✓</b>	<u> </u>
~	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	✓	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<b>✓</b>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	· ·		- 1
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a 12b	<b>√</b>	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	✓	
13	Did the organization have a written whistleblower policy?	13	1	
14	Did the organization have a written document retention and destruction policy?	14	✓	
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	✓	
b	Other officers or key employees of the organization	15b	✓_	
16-	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	_	<b>√</b> .
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		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	า 501(	c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	·		, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	•	
	NEWSTREE FOREST LIGHT A CHARLES AND A CHARLE			

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Form	990	(201	4١

Part VII	Compensation of Officers, Directors,	Trustees,	Key Employees,	Highest	Compensated	<b>Employees</b>	, and
	Independent Contractors						

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

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

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

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

Check this box if neither the organization	on nor any relate	a orga T	anız			ompe	nsa	ited any currer	ιι οπicer, airectoi	r, or trustee.
(A) Name and Title	(B) Average hours per	box,	unles	Pos leck is pe	rson	e than o is both or/trust	an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individua or directi	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Darrell Elkinton	2									
Chairman	0	✓	<u> </u>		L			0	0	
Holly Dixon	1									
Board member	0	✓						0	0	
Philip Chronister	1									
Board Member	0	✓		L	<u> </u>		<u> </u>	0	0	
Wanda Scott	1									-
Board Member	0	✓						0	0	_
Misty Randall	1									
Board Member	0	✓						0	0	
Russell C Johnson	1									
Board Member	0	✓						. 0	0	
Kathy Hutchins	1									
Board Member	0	✓					<u> </u>	0	0	
Lawrence Damm	48						ĺ			
President	0			✓		✓		174,610	0	11,36
Dean Peter	48				}					
Vice President	0			✓		✓		107,725	0	3,93
Kevin Wilmoth	48									
Vice President	0			✓		1		108,443	0	7,03
Daniel Hayden	48									
Compliance Specialist	0		<u></u>	L	<u>L</u>	✓		80,698	0	1,97
Lisa Reed	48	]						•		
Branch Supervisor	0			-	_	✓	_	63,523	0	2,16
		1		ŀ						

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yees	s, aı	nd F	lighe	st C	ompensated E	mployees (	contin	ued)		
					•	C)								
	(A)	(B)	l (do n	ot ch		ition	e than o	one	(D)	(E)		(	F)	
Name and title		Average	box,	unles	s pe	rson	is both	n an	Reportable	Reportab			nated	
		hours per week (list any		r =		т —	or/trus	<del></del>	compensation from	compensation related			unt of her	
		hours for	Individual trustee or director	Insti	Officer	Key employee	흙축	Former	the	organizatio		•	ensatio	n
		related organizations	red L	ğ	Ĕ	<u>a</u>	loye st	ner	organization (W-2/1099-MISC)	(W-2/1099-N	AISC)		n the lization	
		below dotted	9 =	<u>na</u>		ĕ	<sup>®</sup> §		,			and r	elated	
		line)	ste	Institutional trustee		8	Pen				Ì	organ	zations	S
			Φ	tee			Highest compensated employee							
			-	<u> </u>		-	<u> </u>	-			$\longrightarrow$			
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1b	Sub-total		· .					<b>&gt;</b>	534,999		0		20	6,465
С	Total from continuation sheets to Part	VII, Sectio	n A					▶						
d	Total (add lines 1b and 1c)	<u> </u>						<b>&gt;</b>	534,999		0		20	6,465
2	Total number of individuals (including bu	t not limited	d to th	nose	e list	ted	abov	e) w	ho received m	ore than \$1	00,00	0 of		
	reportable compensation from the organ	ızation ► 3	1											
													Yes	No
3	Did the organization list any former of							emp	oloyee, or high	est compe	nsate	d   📜		, - · ·
	employee on line 1a? If "Yes," complete							-				3	,	✓
4	For any individual listed on line 1a, is the												1	# 3 - 1
	organization and related organizations	greater th	an \$	150,	,000	)? [	f "Ye	s, "	complete Sch	edule J fo	r suci	h j		. メイヤ
	individual			•		• •	•	•				4	<b>√</b>	
5	Did any person listed on line 1a receive of									ation or inc	Subivit		<b>100</b>	• ( - )
	for services rendered to the organization	? IT "Yes, "C	comp	ete	SCI	neal	uie J	or s	sucn person	<del></del>	• •	5		_✓
	on B. Independent Contractors													
1	Complete this table for your five highest													
	compensation from the organization. Re	port compe	nsau	ו ווכ	or u	ne c	alenc	aar y	year ending wit	II OF WILLIII	trie or	gariizado	n S ta	ıx
	year.							_						
	(A) Name and business add	dress							(B) Description of s	ervices		(C) Compens	ation	
								-			· · · · · ·			
							:	$\vdash$	<u> </u>		<del></del>			
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								T						
2	Total number of independent contractor	ors (includi	ng bi	ut n	ot	lımı	ted to	o th	nose listed abo	ove) who				
	received more than \$100,000 of compen								0	,		-		

Part	VIII	Statement of Reve		nonno or noto to	any lina in thia	Dort VIII		
]		Check if Schedule C	o contains a res	porise or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ıts	1a	Federated campaigns	s 1a					
irar	b	Membership dues .			l			
s, G	С	Fundraising events .	1c		†			
Siff. lar /	d	Related organizations	s 1d					
ini,	e	Government grants (cor	ntributions) 1e		1			
tior sr S	f	All other contributions, g			1			
ibr The		and similar amounts not inc	cluded above 1f		1			
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions include	· · ·		1			
	h	Total. Add lines 1a-1	<u>f</u>		0			
Ę				Business Code				
š	2a	Interest on Loans		522130	4,801,754	4,801,754	0	0
ě	b	Fee Income		522130	2,247,418	2,247,418	0	0
- કે	С	Extended Warr Rev &	ATM Surcharges	522130	28,304	0	28,304	0
Se	d		••••					
ram	е							
Program Service Revenue	†	All other program ser			0	0	0	0
	<u>g</u> 3	Total. Add lines 2a–2 Investment income			7,077,476			
	3	and other similar amo			2 507 072	2 607 072		
	4	Income from investmen			3,607,072	3,607,072	0	0
	5	Royalties	•	-	0	0	0	0
	•	noyanies	(i) Real	(ii) Personal	<u> </u>			<u> </u>
	6a	Gross rents	<u> </u>	···				
	Ь	Less: rental expenses						•
	c	Rental income or (loss)	0	0				
	ď	Net rental income or					-	
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	0	59,384				
	b	Less: cost or other basis						
		and sales expenses .	O	58,398				
	С	Gain or (loss)	0	986				
	d	Net gain or (loss) .		▶	986	986	0	0
/enne	8a	Gross income from fu events (not including \$	undraising					
Other Reve		of contributions reported See Part IV, line 18 .	ed on line 1c).					
돭	b	Less: direct expenses	s <b>b</b>		1			,
	С	Net income or (loss) f	from fundraising	events . 🕨				
	9a	Gross income from ga			1			
		See Part IV, line 19 .	_		į			
	b	Less: direct expenses			1			
	C	Net income or (loss) f	-	vities				
	10a							
	1	returns and allowance	-					
	b	Less: cost of goods s						
	_ <u>c</u>	Net income or (loss) f			· ·-			
	4.0	Miscellaneous F		Business Code				
	11a	UBIT Refund from price	or years	522130	79,460	79,460	0	0
	b							
	4	All other revenue						
	d	All other revenue . Total. Add lines 11a-		▶	70.460	0	0	0
	12	Total revenue. See ii			79,460	10.736.600	29 204	

# Form 990 (2014)

	n 501(c)(3) and 501(c)(4) organizations must com	plete all columns. Al	l other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respons				· · · · · · · · · · · · · · · · · · ·
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			,
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0		-	
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	390,778			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages	1,244,544		-	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	218,909			<del>.</del>
9	Other employee benefits	372,416		· · · · ·	
10	Payroll taxes	144.973		-	
11	Fees for services (non-employees):	144,373			· ·
		57 001			
a	Management	57,681			<del></del>
b	Legal	116,589			
С	Accounting	36,000			
d	Lobbying			<del></del>	<del></del>
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.)	94,557	<del></del>		- · · · · · · · · · · · · · · · · · · ·
12	Advertising and promotion	209,989			
13	Office expenses	151,813	<u></u>		
14	Information technology	266,998			
15	Royalties				
16	Occupancy	96,428			
17	Travel	3,794			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	54,334			
20	Interest	1,655			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	251,203			
23	Insurance	48,050			
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 to Members	2,151,815			
b	Shared Branch Expenses	333,457			
С	Debit Card, ATM & Checking Services Exp	538,195			
d	Loan Processing Expenses	528,835			
е	All other expenses	92,429			
25	Total functional expenses. Add lines 1 through 24e	7,405,442	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    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 Cash—non-interest-bearing . . . . . . . . 1,194,207 1 1,943,456 2 2 Savings and temporary cash investments . . . 10,338,078 11,091,175 3 3 4 Accounts receivable, net 1,189,911 4 1,136,420 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 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 7 84.260,008 91,686,421 8 8 Inventories for sale or use . . . . . 9 Prepaid expenses and deferred charges 204,873 9 226,539 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 4,312,496 10b Less: accumulated depreciation . . . . 1,716,559 10c 2,218,496 2,094,000 11 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 . 122.605.372 12 130,496,436 13 Investments—program-related. See Part IV, line 11. 13 14 14 15 Other assets. See Part IV. line 11 . . . . . . . 128,570 15 223,721 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 221,637,578 238,898,168 17 Accounts payable and accrued expenses . . . . . . 17 1,383,065 1,251,874 18 Grants payable . . . . . . . . 18 19 Deferred revenue . . . . . . . . 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . . 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 Unsecured notes and loans payable to unrelated third parties 24 1,217,916 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 195,196,904 199.123.833 25 26 Total liabilities. Add lines 17 through 25 26 197,797,885 200,375,707 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 Unrestricted net assets . . . . . Temporarily restricted net assets . . . . . . . . . 28 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 📝 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . . . . . . . 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 0 0 32 Retained earnings, endowment, accumulated income, or other funds . 23,839,693 32 38,522,461 33 23,839,693 33 38,522,461

Total liabilities and net assets/fund balances . . . .

221,637,578

orm	990	(2014)	

Page 12

Theck if Schedule O contains a response or note to any line in this Part XI  1 Total revenue (must equal Part VIII, column (A), line 12).	Part	XI Reconciliation of Net Assets				
1 Total revenue (must equal Part VIII, column (A), line 12).		Check if Schedule O contains a response or note to any line in this Part XI				<b>V</b>
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 3,3,359,552 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses at less line 2 from line 1 Revenue less expenses at less line 2 from line 1 from 1 from line 1 from 1 from line 1 from 1	1	Total revenue (must equal Part VIII, column (A), line 12)				
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).  4	2	Total expenses (must equal Part IX, column (A), line 25)	2			
Net unrealized gains (losses) on investments  Donated services and use of facilities  Prior period adjustments  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances are end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  Accounting method used to prepare the Form 990:  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Accounting method used to prepare the Form 990:  Accounting from a prior year or checked "Other," explain in Schedule O.  Accounting method used to prepare the Form 990:  Accounting method us	3	Revenue less expenses. Subtract line 2 from line 1	3		3,35	9,552
Donated services and use of facilities 6 0 0 1 1 Investment expenses 7 7 0 0 8 Prior period adjustments 9 7 0 0 8 Prior period adjustments 9 0 Other changes in net assets or fund balances (explain in Schedule O) 9 0 0 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 38,522,461	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		23,83	9,693
7   Investment expenses   7   8   9   00   8   Prior period adjustments   8   0   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))   38,522,461      Part XII   Financial Statements and Reporting   Check if Schedule O contains a response or note to any line in this Part XII	5	Net unrealized gains (losses) on investments	5		11,32	3,216
Other changes in net assets or fund balances (explain in Schedule O).  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (8)).  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  Accounting method used to prepare the Form 990:  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis. Consolidated basis, or both:  Separate basis Consolidated basis, or both:  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis, or both:	6			***		0
9 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 38,522,461  Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  1 Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	-		<u> </u>			0
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))						0
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	_		9			0
Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  1	10					
Check if Schedule O contains a response or note to any line in this Part XII		33, column (B))	10		38,52	2,461
Accounting method used to prepare the Form 990:  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.  3b	Part					
Accounting method used to prepare the Form 990:  Accrual  Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?		Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?					Yes	No
Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?	1			- 1	١.	
Were the organization's financial statements compiled or reviewed by an independent accountant?			olain ir	וי	- :	
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  □ Separate basis □ Consolidated basis □ Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  □ Separate basis □ Consolidated basis □ Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?.  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	0-					
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Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			nied o			1
b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.  3b		·			,	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?.  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.  3b	_				<b></b> ,-	
separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.  3b	D				_	<del> </del> -
Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		· ·	u on a	1		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		•			-	,
of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	_		ereiah	,		<u>-</u> 1
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	·					
Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		·			<b>-</b>	<del>                                     </del>
the Single Audit Act and OMB Circular A-133?			piuii ii	`   ^		ı
the Single Audit Act and OMB Circular A-133?	3a		forth ii	,		
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.						1
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	b	· ·	rao the			<del>                                     </del>
				For	n <b>99</b> 0	(2014)

# SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► 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.

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

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

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

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

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

- , ,	ee separate ilistructions), u				
	ction 501(c)(4), (5), or (6) orga of organization	anizations. Complete Part III.		Employer iden	tification number
	ard Credit Union			' '	48-6107341
Part		e organization is exempt und	ter section 501(c		
1		the organization's direct and indir			n gamzadon.
2	•		•	_	100
3	•			•	
·	Voluntoor riodio			• • • • • • • • •	0
Part	Complete if the	e organization is exempt und	der section 501(	c)(3).	<del> </del>
1		excise tax incurred by the organiz			
2		excise tax incurred by organization			
3		ed a section 4955 tax, did it file Fo			Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part	IV.			<del></del>
Part		e organization is exempt und			(c)(3).
1	Enter the amount direct	ly expended by the filing organ	zation for section	527 exempt function	
				<i></i> <b>&gt;</b> \$	100
2		filing organization's funds contri	•		
		ivities			0
3		expenditures. Add lines 1 and 2			
				-	100
4		n file <b>Form 1120-POL</b> for this yea			
5		ses and employer identification nu			
		ents. For each organization listed			
		ontributions received that were pr			
	as a separate segregated	fund or a political action commit	Tee (PAC). If addition	nai space is needed, provi	ide information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter -0-	contributions received and promptly and directly
					delivered to a separate
			1		political organization If none, enter -0-
Kansas Credit Union		2544 N Maize Court	<del>- </del>		·
(1) Legislative Action		Wichita, KS, 67205	48-0288307	100	0
	ommittee	Wichita, K3, 67203			
(2)					
(3)					
			+		
(4)		<b> </b>			
<i>(5)</i>	<del></del> .		<u> </u>	-	
(5)			7		
(6)					
(6)			7		

۵۵	a	۵	2

,,,,,,	,, 0	3111 330 31 330 CE) 2314					- rage =			
Part	II-A	Complete if the organizate section 501(h)).	ion is exempt u	nder section 50	01(c)(3) and file	d Form 5768 (ele	ction under			
A C	heck	► ☐ if the filing organization name, address, EIN, exp					oup member's			
вС	heck	▶ ☐ if the filing organization	checked box A a	and "limited conf	trol" provisions a	apply.				
			bbying Expendite			(a) Filing	(b) Affiliated			
		(The term "expenditures"	means amounts	paid or incurred.	)	organization's totals	group totals			
1a	Tota	al lobbying expenditures to influer	ce public opinion	(grass roots lobby	ving)					
b	Tota	al lobbying expenditures to influer	ce a legislative bo	dy (direct lobbying	g)					
С	Tota	al lobbying expenditures (add line:	s 1a and 1b) .							
d	Oth	er exempt purpose expenditures								
е		al exempt purpose expenditures (a		·						
f		bying nontaxable amount. Ente	er the amount fr	om the following	g table in both					
	If the	e amount on line 1e, column (a) or (b	is: The lobbying	nontaxable amoun	t is:					
	Not o	over \$500,000	20% of the an	ount on line 1e.						
	Over	\$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000					
	Over	\$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000					
	Over	\$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000		, ,			
	Over	\$17,000,000	\$1,000,000.			7	:			
9		ssroots nontaxable amount (enter	-							
h		tract line 1g from line 1a. If zero o								
i		stract line 1f from line 1c. If zero o	,				· · · · · · · · · · · · · · · · · · ·			
j		nere is an amount other than ze			_		☐ Yes ☐ No			
	repo	orting section 4911 tax for this ye								
	4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period									
		Lobby	ing Expenditures	During 4-Year A	veraging Period	1 1				
	C	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) Total			
2a	Lob	bying nontaxable amount								
b		obying ceiling amount 0% of line 2a, column (e))	35 1							
С	Tota	al lobbying expenditures								
d	Gra	ssroots nontaxable amount								
е		ssroots ceiling amount 0% of line 2d, column (e))								
f	Gra	ssroots lobbying expenditures								
						Schedule C (Form	n 990 or 990-EZ) 2014			

		(election under section 501(h)).			<del>,</del>		
		Yes," response to lines 1a through 1i below, provide in Part IV a detailed of the lobbying activity.	Yes	No	<del> </del>	(b) Amoun	+
	·		ļ		<u> </u>		
1		the year, did the filing organization attempt to influence foreign, national, state or local			-		
		tion, including any attempt to influence public opinion on a legislative matter or ndum, through the use of:		•	*		
a		reers?	ļ		-		
b		taff or management (include compensation in expenses reported on lines 1c through 1i)?	<u> </u>		<del> </del> -		
C		advertisements?	<u> </u>		<b>├</b>		
d		gs to members, legislators, or the public?	<u> </u>		<b></b>		
e		ations, or published or broadcast statements?	<u> </u>	<u> </u>	├		
f		s to other organizations for lobbying purposes?	<u> </u>		├		
9		contact with legislators, their staffs, government officials, or a legislative body?			├		
h :		s, demonstrations, seminars, conventions, speeches, lectures, or any similar means? activities?		<b></b>	├─-		
!			<u> </u>		$\vdash$		
J		Add lines 1c through 1i			<u> </u>		
2a		e activities in line 1 cause the organization to be not described in section 501(c)(3)?	-		<b>-</b>		
b		s," enter the amount of any tax incurred under section 4912		}	<u> </u>		
d		filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			<u> </u>		
Part		Complete if the organization is exempt under section 501(c)(4), section 501(c)	1/5)	Or se	ction		
T GIT		501(c)(6).	,,(J), (	JI 36	CLIO	•	
						Yes	No
1	Were	substantially all (90% or more) dues received nondeductible by members?			1		1
2		e organization make only in-house lobbying expenditures of \$2,000 or less?			2		1
3		e organization agree to carry over lobbying and political expenditures from the prior year? .			3	$\rightarrow$	<del>                                     </del>
Part	III-B	Complete if the organization is exempt under section 501(c)(4), section 501(c)					
		501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O					3. is
		answered "Yes."	• •			,	,
1	Dues,	assessments and similar amounts from members		1			_
2		on 162(e) nondeductible lobbying and political expenditures (do not include amounts	s of			-	
	politic	cal expenses for which the section 527(f) tax was paid).					
а	Curre	nt year		2a	1		
b	Carry	over from last year		2b			
С	Total			2c			
3	Aggre	gate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.		3			
4	If not	ces were sent and the amount on line 2c exceeds the amount on line 3, what portion of	the				
	exces	s does the organization agree to carryover to the reasonable estimate of nondeductible lobb	yıng				
		olitical expenditure next year?		4	i		
5		le amount of lobbying and political expenditures (see instructions)		5			
Par		Supplemental Information					-
		lescriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	up lis	t); Pa	rt II-A	, lines	1 and
2 (see	ınstruc	tions); and Part II-B, line 1. Also, complete this part for any additional information.					
Sche	lule C, I	Part I-A, Line 1 - Donation to Political Action Committee					
			<b></b>		·		
							<b></b>
			<b></b>		<b></b> -		
			<b></b>		<b>-</b> -		
			<b></b>				

# SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

# **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.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

**Skyward Credit Union** Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . . . . . 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year . . . . . 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area ☐ Preservation of a certified historic structure ☐ Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 변화한 Held at the End of the Tax Year easement on the last day of the tax year. Total number of conservation easements . . . . . . . . 2a Total acreage restricted by conservation easements . . . . . . . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 ☐ Yes ☐ No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included in Form 990, Part VIII, line 1 . . . . . . . . . . . . . . . . . . Assets included in Form 990, Part X .

Part	III Organizations Maintaining	Collections	of Art, His	torical 1	reasures,	or Ot	her Similar A	ssets (con	tinued)
3	Using the organization's acquisition, collection items (check all that apply):		d other reco	rds, chec	k any of the	e follov	ving that are a	significant i	use of its
а	☐ Public exhibition		d	☐ Loan	or exchang	e progi	rams		
b	☐ Scholarly research								
С	☐ Preservation for future generations								
4	Provide a description of the organization of t	tion's collection	ns and expl	aın how t	hey further	the org	anızatıon's exe	mpt purpos	e in Part
5	During the year, did the organization								
	assets to be sold to raise funds rather		intained as	part of the	e organizatı	on's co	llection?	Yes	□ No
Part	Complete if the organization 990, Part X, line 21.	answered "Y					•		orm
1a	Is the organization an agent, trustee included on Form 990, Part X?			_					. ✓ No
b	If "Yes," explain the arrangement in P	art XIII and cor	nplete the fo	ollowing to	able:				_
			•	·			/	Amount	
С	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount			-				•	
	If "Yes," explain the arrangement in P	art XIII. Check	here if the e	xplanatio	n has been	provide	ed in Part XIII .		
Pari		anawarad "\	/oo" to For	~ 000 E	ort IV lina	10			
	Complete if the organization	(a) Current yea		or year	(c) Two year		(d) Three years bac	ck (e) Four y	ears hack
1a	Beginning of year balance	(a) carrent year			(6) 1.110 your	- Duon	(a) mad yourd but	(0).00.9	
b	Contributions							+	
c	Net investment earnings, gains, and losses			-					
d	Grants or scholarships								
е	Other expenditures for facilities and programs						•		
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of t			ce (line 1g	, column (a	)) held a	as:		
а	Board designated or quasi-endowme	nt ▶	%						
b	Permanent endowment ▶								
С	Temporarily restricted endowment		%						
0-	The percentages in lines 2a, 2b, and 2				الملمط مسمام			L-	
3a	Are there endowment funds not in th organization by:	e possession o	or the organ	ization th	at are neid	and ad	ministered for t	_	/   NI-
	-								es No
	(i) unrelated organizations (ii) related organizations							3a(i) 3a(ii)	<del></del>
b	If "Yes" to 3a(ii), are the related organ							3b	<del></del>
4	Describe in Part XIII the intended uses					• •			
Part									
	Complete if the organization		es" to For	m 990, F	Part IV, line	11a. S	See Form 990	Part X, Iin	e 10.
	Description of property	1	or other basis estment)		or other basis other)		Accumulated epreciation	(d) Book	value
1a	Land	.	O	1	0		-		0
b	Buildings		0		2,575,176		984,567		1,590,609
С	Leasehold improvements				196,271		89,387		106,884
d	Equipment		0	ļ <u> </u>	1,541,049		1,144,542		396,507
<u>e</u>	Other	<u>·</u>	0		0		0		0
Total.	Add lines 1a through 1e. (Column (d) r	nust equal Fori	m 990, Part	X, columi	n (B), line 10	)c.)	▶	;	2,094,000

Schedule D (Fo	m 990) 2014 '	·			Page
Part VII	Investments—Other Securities				
	Complete if the organization answ	wered "Yes" to Forr	n 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book value		thod of valuation d-of-year market value
(1) Financial	derivatives		C	Cost	
(2) Closely-h	neld equity interests	[	C	Cost	
(3) Other Fe	deral Gov't Agency Securities - Available	e for Sale	125,756,692	End-of-Year Mark	et Value
(A) Federa	al Gov't Agency Securities - Hold to Matu	rity	3,624	Cost	·
	Share Insurance Fund		1,918,890	Cost	
	ment in Credit Union Service Organization	ons	563,534	Cost	
	ince Policy		2,253,696	Cost	
(E)					
(F)	•••••				
(G)					
(H)					
	b) must equal Form 990, Part X, col. (B) line 12.)	•	130,496,436	5	<del></del>
Part VIII	Investments—Program Related		000 D+ IV I	- 11 - 0 5	000 D-4V L 40
	Complete if the organization ansi	wered "Yes" to Forr		T	· · · · · · · · · · · · · · · · · · ·
	(a) Description of investment		(b) Book value		ethod of valuation <sup>.</sup> d-of-year market value
(1)			<del></del>		
(2)	·				
(3)					
(4)					
(5)					
(6)					
_(7)					
(8)					
(9)		_			
Total. (Column (	b) must equal Form 990, Part X, col. (B) line 13.) ▶	_			
Part IX	Other Assets.				
	Complete if the organization ans		m 990, Part IV, lin	e 11d. See Form	
_	(a	a) Description			(b) Book value
_(1)					
(2)					
(3)					
_(4)		<del></del>			
(5)					
_(6)					
_(7)					
_(8)					
(9)	15 000 5 17				
	mn (b) must equal Form 990, Part X, co	oi. (B) line 15.)	<u> </u>	<u> ▶</u>	ļ
Part X	Other Liabilities.  Complete if the organization ansiline 25.	wered "Yes" to Form	m 990, Part IV, lın	e 11e or 11f. Se	e Form 990, Part X,
1.	(a) Description of liability	(b) Book value			
(1) Federal ır	ncome taxes		0		
(2) Member	Share and Certificate Deposits	199,12	3,833		
(3)		1.20,7,5	. · · · · · ·		
(4)					
(5)	-				
(6)					
(7)					
(8)					

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

199,123,833

(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25 ) ▶

Part		er Return.	•
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	T .	
1	Total revenue, gains, and other support per audited financial statements	1	10,764,994
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
a	Net unrealized gains (losses) on investments	0 565	
b		——————————————————————————————————————	
C		0	
d	,	0	•
е 3	Add lines 2a through 2d	2e 3	0 10,764,994
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		10,764,994
	Investment expenses not included on Form 990, Part VIII, line 7b 4a	0	
a b	Other (Describe in Part XIII.)	0 *	
C	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		10,764,994
Part			
T GIT	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	poi i iota.	•••
1	Total expenses and losses per audited financial statements	. 11	7,405,442
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	4.7	7,703,442
- а	Donated services and use of facilities	0	
b	Prior year adjustments	0 -	
c	Other losses	0 -	
d	Other (Describe in Part XIII.)	0	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	. 3	7,405,442
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	0	
b	Other (Describe in Part XIII.)	0 = 1	
С	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	7,405,442
Part			
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and		
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additiona	ınformatıo	n.
Sched	dule D, Part X, Line 2 - The credit union is exempt by statute from most federal, state and local income tax	es under p	rovisions of the
Intern	al Revenue Code and state tax laws. However, the credit union is liable for tax on certain products and s	ervices suc	h as car
warra	nties and non-member ATM surcharges which have been deemed by the IRS to be unrelated to the credit	union's ex	empt purpose.
	et taxable income from these products/services is subject to income tax under the Unrelated Business Ir		
regula	ations. The credit union has filed form 990-T for these items. The credit union management accepts recer	t court dec	isions involving
credit	unions and the IRS, and has determined that the credit union has limited income derived from non-exem	pt sources.	·
			~
	••••••		
	***************************************		

# **SCHEDULE J** (Form 990)

Compensation Information

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

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

► Attach to Form 990.

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

OMB No 1545-0047 2014

Open to Public Inspection

Name of the organization **Skyward Credit Union** 

Department of the Treasury Internal Revenue Service

Employer identification number

48-6107341

Part	Questions Regarding Compensation			
12	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form	<u> </u>	Yes	No
ıa	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	,	-	
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees	ļ		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)		,	
	☐ Discretionary Spending account ☐ Personal Services (e.g., maid, chadnear, cher)			
h	If any of the house on line to are absolved, did the argonization follows a written nation regarding narrows		·+	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	46		
	ехріант.	1b	-	<del> </del>
_	Del de la companya de			J
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	_		
	ldf. , . ,	2		-
_				
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		-	!
		-		'
	✓ Compensation committee			'
	☐ Independent compensation consultant ☐ Compensation survey or study		-	}
	Form 990 of other organizations Approval by the board or compensation committee	÷.1	7	ł
	Down the control of the filling	- '	* -	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		<b>/</b>
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		<b>✓</b>
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		<b>✓</b>
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			ļ
	Only posting 504/-1/0) 504/-1/4) and 504/-1/00) arguminations much complete lines 5.0		-	
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.  For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			1
5	compensation contingent on the revenues of:			
	•	-	-	-
a	The organization?	5a		<del> </del>
b	Any related organization?	5b		
	If "Yes" to line 5a or 5b, describe in Part III.	,		
^	For parents listed in Form 000, Bort VIII. Section A. line 15, did the argenization new or secrets and			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
_		6-		}
a	The organization?	6a		<del> </del>
b	Any related organization?	6b		<del> </del>
	If "Yes" to line 6a or 6b, describe in Part III.			
~	For a survey listed in Form 200 Part VIII Control A line to did the experience arounds any new fixed			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed	_		
_	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		├─
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			-
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe	_		
	ın Part III	8		<b>├</b>
_	16 WY-27 to line O did the appropriate plan follows the selection assessment as a second of the selection of			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	_		
	Regulations section 53.4958-6(c)?	9	l	i i

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)-(ii) 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.

NOTE: THE SUIT OF COLUMNS (B) (1) THE SUIT OF COLUMNS (B) COLUMNS (C) COLUMNS (C) COLUMNS (C) COLUMNS	200	וווווווווווווווווווווווווווווווווווווו	st equal the total and	S (SSS III) I S III)		1	, , , , , ,	
		(b) Breakdown o	r w-z ang/or 1099-iviik	oc compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	in column (B) reported as deferred in prior Form 990
Lawrence Damm, President	8	158,710	15,900	0	0		174,610	0
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15	<b>E</b>							
	<b>E</b>							
16	$\equiv$							

Schedule J (Form 990) 2014

For	
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.	
Schedule J, Part I, Line 3 • The Executive Committee of the Board of Directors serves as the Compensation Committee and determines the compensation of the CEO.	
*	
Schedule J Form 980) 2014	

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

# 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.

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service

► 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. **Open to Public** Inspection

Name of the organization	Employer identification number					
Skyward Credit Union	48-6107341					
Form 990, Part VI, Section A, Line 4 - Organization executed a legal name change in 1st quarter of 201						
Union to Skyward Credit Union. Bylaws were also updated to reflect the name change. The name char	ige was officially approved by both					
the Kansas Department of Credit Unions and the National Credit Union Association by March 31, 2015						
Form 990, Part VI, Section A, Line 6 - Organization serves members who hold membership share acco	unts with the credit union					
Form 990, Part VI, Section A, Line 7a - Each member has the privilege of one vote to elect members to	the Board of Directors.					
Form 990, Part VI, Section B, Line 11b - The President and CFO complete and review the 990 prior to s						
'presented to' and 'reviewed by' the Board of Directors at a regular monthly meeting of the Board of Di	irectors.					
Form 990, Part VI, Section B, Line 12c - The organization is subject to oversight by a volunteer Superv	isony Committee, as well as having					
	isory committee, as well as maving					
an on-staff Compliance Specialist.						
Form 990, Part VI, Section B, Line 15 - The Executive Committee of the Board of Directors reviews and	approves the compensation of the					
CEO and key management employees of the organization.						
CEO and key management employees of the organization.						
Form 990, Part VI, Section C, Line 17 - None						
Form 900. Part VI. Section C. Line 19. Individuals may make written request by mail, a mail, or in parson to the organization and well be						
Form 990, Part VI, Section C, Line 19 - Individuals may make written request by mail, e-mail, or in person to the organization and will be						
allowed to inspect referenced information. A copy will be provided for a nominal fee. Financial information is also available to the public						
through www.ncua.gov on Form 5300. Also, Financial Statements are posted in the public lobbies of our branch facilities.						
Form 990, Part XI, Line 5 - Equals Net Change in Unrealized Gain (Loss) on Available for Sale Investments						
Tomil 330, Part XI, Line 3 - Equals her change in one canzed dam (Lo33) on Available for Sale investing	ento					
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# SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2014.
Open to Public Inspection

OMB No. 1545-0047

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

48-6107341

(g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2014 (f)
Direct controlling
entity ŝ Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Yes (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total income Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. (d) Exempt Code section (c)
Legal domicile (state
or foreign country) Cat No. 50135Y (c)
Legal domicile (state
or foreign country) (b) Pnmary activity (b) Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) Name, address, and EIN (if applicable) of disregarded entity (a)
Name, address, and EIN of related organization (2) Skyward Credit Union Part I Part II Ξ Ξ 9 2 ₹ ල Ð. ල <u>છ</u> 9 €

(i) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2014 (k) Percentage Ñ ownership > Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Yes Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. (j) General or managing partner? ž (h) Percentage ownership 20% Yes (i)
Code V—UBI
amount in box 20
of Schedule K-1
(Form 1065) (g) Share of end-of-year assets (h)
Disproportionate
allocations? ž Share of total income Yes (g) Share of end-ofyear assets (e)
Type of entity
(C corp, S corp, or trust) (f) Share of total income Ç (d)
Direct controlling
entity (e)
Predominant
income (related,
unrelated,
excluded from tax under sections 512-514) Š (c)
Legal domicile
(state or foreign country) (d) Direct controlling **X**S (b) Primary activity Financial services (c) Legal domicile (state or foreign country) Primary activity (a) Name, address, and EIN of related organization 2433 W 31st St S, Wichita, KS 67217 (1) Wichita CUSO Inc (48-1239026) Name, address, and EIN of related organization (2) Part III Part IV **₹** Ε ල E Ξ 8 9 9 ₹ 9 9 ල

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

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					(9)
					(5)
					(4)
					(6)
					(2)
					(1)
volved	mount in	(d) Method of determining amount involved	(c) Amount involved	(b) Transaction type (a–s)	(a) Name of related organization
olds.	thresh	ships and transaction	uding covered relation	implete this line, inc	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.
>	15				s Other transfer of cash or property from related organization(s)
	Ę.	· · ·	•		r Other transfer of cash or property to related organization(s)
		· · · · · · · · · · · · · · · · · · ·			
<b>&gt;</b>  `	요 ;				p Reimbursement paid to related organization(s) for expenses
養養	-Ç-				
					o Sharing of paid employees with related organization(s)
>	무				
>	ᄪ				
>	=				l Performance of services or membership or fundraising solicitations for related organization(s)
	<u>}</u> }¥				k Lease of facilities, equipment, or other assets from related organization(s)
<b>医</b>	西等				
>	= =				i Lease of facilities, equipment, or other assets to related organization(s)
<b>&gt;</b>	<u>ا</u> چا;				n Purchase of assets from related organization(s)
<u>\</u>	2 -	-L • • •			gard of assets for elared of gallization (s)
>	10	· · · · · · · · · · · · · · · · · · ·			
<u>`</u>					f Dividends from related organization(s)
A TAN	7 -				
	9				
>	19			•	<b>d</b> Loans or loan guarantees to or for related organization(s)
>	10				c Gift, grant, or capital contribution from related organization(s)
<i>&gt;</i>	1b				<b>b</b> Gift, grant, or capital contribution to related organization(s)
>	1a				a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
, 1 2		II-IV?	nizations listed in Parts	or more related orga	1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
Yes No	٣				Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) (b) (c) (d) (d) (d) (d) (d) (e) Name, address, and ElN of entity Promary activity Legal dominant Are all in	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share of		(h) Disproportional	(i) Code V—UBI	(j) General or	(k) Percentage
		(state or foreign country)	income (related, unrelated, excluded	section 501(c)(3)	total income	end-of-year assets	allocations?	amount in box 20 of Schedule K-1	managing partner?	ownership
		/f	from tax under	organizations?				(Form 1065)		
			sections 312-314)	Yes No			Yes No		Yes No	
(1)	1									
(2)										
(6)										
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(16)										
								Sche	dule R (For	Schedule R (Form 990) 2014

chedule R (	(Form 990) 2014	Page <b>5</b>
Part VII	Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions).	
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and backed by the full faith and credit of the United States Government Your savings federally insured to at least \$250,000

National Credit Union Administration, a U.S. Government Agency

# Skyward Federal Credit Union

of the United States Government, as provided are federally insured to at least \$250,000 and backed by the full faith and credit in the Federal Credit Union Act

National Credit Union Administration

March 3, 1976

Issue Date

Insurance Certificate #

Hereby Certifies that each member's shares in