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DLN: 93493204008435

Form 990

Department of the Treasury Internal Revenue Service

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

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

 $\blacktriangleright$  Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047

2014

Open to Public Inspection

	rthe 3	2014 ca	lendar year, or tax year beginning 01-01-2014 , and ending 12-31-20	n14			
		pplicable	C Name of organization	717	D Empl	oyer ide	ntification number
_	ress ch		FAMILY SECURITY CREDIT UNION		63-0	75745	3
	me char		Doing business as				
•	ial retur	rn	Number and street (or P O box if mail is not delivered to street address) Room/	/suite	E Teleph	none num	ber
┌ Fin	aı urn/tern	nınated	2204 FAMILY SECURITY PLACE SW		(256	) 340-2	2000
_	ended i	return pending	City or town, state or province, country, and ZIP or foreign postal code DECATUR, AL 35603		<b>G</b> Gross	receipts	\$ 31,501,874
			F Name and address of principal officer	H(a	) Is this a grou	p return	for
			SHANE NOBBLEY 2204 FAMILY SECURITY PLACE SW		subordinates	?	┌ Yes ┌ No
			DECATUR,AL 35603	H(b	Are all subord	dinates	┌ Yes ┌ No
	x-exem	ıpt status	501(c)(3)		included? If "No," attac	h a lıst	(see instructions)
	ebsite	: <b>:►</b> WV	WW MYFSCU COM	H(c	Group exemp	tion nu	mher ▶
K For	n of ora	ı anızatıor	Corporation Trust Association Other ►	<u> </u>	ear of formation 1		State of legal domicile AL
	rt I		nmary		ear or formation 1	.933	state of legal dofficile. AL
			lescribe the organization's mission or most significant activities				
	] ]	ro pro	VIDE THRIFT OPPORTUNITIES AND LOW COST LOANS TO MEM	BERS			
ĕ	-						
Governance	-	^hock t	his box 🛌 if the organization discontinued its operations or dispose	d of more	than 25% of it	s not as	cote
805 5		SHECK C	ms box Fig. If the organization discontinued its operations of disposer	a or more	: tilali 23 /0 01 it	. Het as	
<b>x</b> 5			of voting members of the governing body (Part VI, line 1a) $$ . $$ .			3	7
Activities &			of independent voting members of the governing body (Part VI, line 1			4	7
C <b>t</b> IN			Imber of Individuals employed in calendar year 2014 (Part V, line 2a) Imber of volunteers (estimate if necessary)			6	235
₹			related business revenue from Part VIII, column (C), line 12			7a	10,417
			elated business taxable income from Form 990-T, line 34			7b	-22,324
					Prior Year		Current Year
ou.	8		ibutions and grants (Part VIII, line 1h)			0	0
Rayenue	9	_	am service revenue (Part VIII, line 2g)		12,563		11,992,550
Ě	10 11		tment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	.  -	2,672 11,925		2,638,917
	12	Total	revenue—add lines 8 through 11 (must equal Part VIII, column (A), I				
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		27,162	,123	27,484,533
	14		its paid to or for members (Part IX, column (A), line 4)			0	0
	15		es, other compensation, employee benefits (Part IX, column (A), lines		7,964	279	8,159,146
Expenses	16-	5-10	<i>,</i>		7,501	0	0,133,110
₹	16a		ssional fundraising fees (Part IX, column (A), line 11e)	·  -			0
Д	b			•			10.501.610
	17 18		expenses (Part IX, column (A), lines 11a-11d, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		14,211 22,175		13,531,612 21,690,758
	19		nue less expenses Subtract line 18 from line 12		4,986		5,793,775
Net Assets or Fund Balances				_	eginning of Curro		End of Year
SS e Bafa	20	Total	assets (Part X, line 16)		513,471	,795	532,539,779
end Grad	21		liabilities (Part X, line 26)		450,443		462,071,116
	22 1111		ssets or fund balances Subtract line 21 from line 20		63,027	,864	70,468,663
my k	nowled arer ha	ge and is any k	ature of officer				
ner	<b>=</b>		NE NOBBLEY CEO e or print name and title				
		1,	Print/Type preparer's name Preparer's signature	Date	Check If	PTIN	222
Paid		h	CYNTHIA A HUDSON CPA  CYNTHIA A HUDSON CPA  Firm's name  BARFIELD MURPHY SHANK & SMITH LLC	<u> </u>	self-employed		
Preparer			Firm's address ► 1121 RIVERCHASE OFFICE RD		Phone no (20		

BIRMINGHAM, AL 35244

✓ Yes ☐ No

Form	n 990 (2014)				Page 2
Par		ent of Program Service A Schedule O contains a response	ccomplishments or note to any line in this Part III		
1	Briefly describe	the organization's mission			
<u>TO I</u>	PROVIDE THRIFT	OPPORTUNITIES AND LOW C	OST LOANS TO MEMBERS		
2	the prior Form 99		ogram services during the year wi		┌ Yes ┌ No
3	services?		significant changes in how it cond		┌ Yes ┌ No
4	Describe the org		omplishments for each of its three inizations are required to report th program service reported		
4a	(Code 71,633 MEMBERS S	) (Expenses \$ SERVED TO PROMOTE THRIFT OPPORTU	including grants of \$ JNITIES AND LOW COST LOANS	) (Revenue \$	)
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	· -	services (Describe in Schedule			
_	(Expenses \$		grants of \$	) (Revenue \$	)
4e	lotal program s	service expenses 🕨			Form <b>990</b> (2014)

### Part IV Checklist of Required Schedules

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2$	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>99</b> 0	(2014)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u> </u>	<u></u>
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 19,109  Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
<b>4</b> a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
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?	5c 6a		No
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).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a response or note to any line in this Part VI		
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<u> </u>	ection A. Governing Body and Management			
			Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	even	ue Cod Yes	e.) <b>No</b>
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a	Did the organization have local chapters, branches, or affiliates?		Yes	
10a b	Did the organization have local chapters, branches, or affiliates?	10a	<b>Yes</b> Yes	
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes	
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available Check all that apply
  - Own website Another's website V Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records 20 ►SHANE NOBBLEY CEO

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	checl (, unle n office ustee	ss er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Formor	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) ERNESTINE MCDONALD BOARD CHAIRMAN	1 00	х						1,220	0	0
(2) JAMES JEFFREYS BOARD TREASURER	1 00	х						705	0	0
(3) AUBREY BEASLEY BOARD MEMBER	1 00	х						1,035	0	0
(4) ALBERT BUSH BOARD SECRETARY	1 00	х						1,165	0	0
(5) HAROLD LEE BOARD MEMBER	1 00	х						2,625	0	0
(6) JAMES MCLIN BOARD MEMBER	1 00	х						2,675	0	0
(7) TOMMIE SMITH  BOARD VICE-CHAIRMAN	1 00	х						2,635	0	0
(8) M SHANE NOBBLEY PRESIDENT/CEO	40 00			х				267,190	0	21,198
(9) DEBRA MCCAGHREN VP FINANCE & OFFICE OPS	40 00			х				171,460	О	9,759
(10) J COLE SHARP  VP LENDING & BRANCH OPS	40 00			Х				166,540	0	12,589
(11) ZACHARY HOWELL  VP MARKETING & ADMIN	40 00			х				147,452	0	15,030
(12) SHAWN METZ	40 00			Х				127,970	0	13,997
VP COMPUTER INFO SYS										

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

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						( <b>D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	. ~	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total				
C	Total from continuation sheets to Part VII, Section A	۲			
d	Total (add lines 1b and 1c)	►	892,672	0	72,573
				•	<u> </u>

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►5

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

### **Section B. Independent Contractors**

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

(B)	(C)
Description of services	Compensation
PHONE SERVICE/COMPUTER LINE	402,781
SOFTWARE PROVIDER	309,421
COMPUTER SERVICES	264,133
CONSULTING SERVICES	212,312
ADVERTISING/MARKETING	192,151
SERVICES	
) who received more than	
	Description of services  PHONE SERVICE/COMPUTER LINE  SOFTWARE PROVIDER  COMPUTER SERVICES  CONSULTING SERVICES

Part VIII Statement of Revenue								
		Check If Sched	ule O contains a respoi	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	ıes <b>1b</b>					
, E	С	Fundraising ev	ents <b>1c</b>					
ifts, ar A	d	Related organiz	zations 1d					
⊒ ⊒	e	Government grant	s (contributions) <b>1e</b>					
ons Sir	f	All other contribution	ons, gifts, grants, and <b>1f</b>					
outi her	•	sımılar amounts no	ot included above					
Ē	g	Noncash contributi 1a-1f \$	ons included in lines					
ë G	h	<b>Total.</b> Add lines	s 1 a - 1 f	· · · · •				
<u> </u>				Business Code				
Program Serwce Revenue	2a	LOAN INTEREST IN	ICOME	522130	11,992,550	11,992,550		
8	Ь							
MCe	C							
Š	d e		_					
ran	f	All other progra	am service revenue					
<b>્રે</b>				_				
	g 3		s 2a-2f		11,992,550			
		and other sımıl	aramounts)		2,633,347			2,633,347
	4		stment of tax-exempt bond	· · · · · ·	147,945			147,945
	5	Royalties .	(ı) Real	(II) Personal	147,543			147,943
	6a	Gross rents	(i) iteal	(II) I ersonal				
	ь	Less rental expenses						
	С	Rental income or (loss)						
	d	• •	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	from sales of	3,988,911	34,000				
		assets other than inventory						
	Ь	Less cost or other basis and	3,977,941	39,400				
	С	sales expenses Gaın or (loss)	10,970	-5,400				
	d	Net gaın or (los	ss)		5,570			5,570
	8a	Gross income f events (not inc						
e n		\$						
등		of contributions See Part IV, lir	s reported on line 1c) ne 18					
Вe		,	а					
Other Revenue			penses <b>b</b>					
₹	C Qa		(loss) from fundraising from gaming activities	events 🛌				
	Ju		ne 19					
	١.		a .					
	C		penses <b>b</b> (loss) from gamıng actı	vities				
		Gross sales of	ınventory, less					
		returns and allo	owances . a					
	ь	Less costofa	oods sold <b>b</b>					
			(loss) from sales of inv	entory 🛌				
		Miscellaneou		Business Code		F		
			PRIVILEGE FEES	522130	5,099,592	5,099,592 3,438,554		
	Ь	OTHER ACCO FEES	UNT & LOAN	522130	3,438,554	3,438,554		
	С	INTERCHANG	E ACCOUNT	522130	3,183,554	3,183,554		
	d	CHARGES All other reven	ue		983,421	973,004	10,417	
	e		s 11a-11d	🕨			,	
	12		See Instructions .	.  -	12,705,121			
				🟲	27,484,533	24,687,254	10,417	2,786,862

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)	Section 501(c)(3) and 501(c)(	l) organizations must complete	all columns All other organization	zations must complete column (A )
---	-------------------------------	--------------------------------	------------------------------------	-----------------------------------

	Check if Schedule O contains a response or note to any line in this	Part IX		<u> </u>	<u> </u>
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				-
5	Compensation of current officers, directors, trustees, and key employees	965,245			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,653,617			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	1,036,623			
10	Payroll taxes	503,661			
11	Fees for services (non-employees)				
а	Management				
ь	Legal	54,312			
c	Accounting	143,000			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	908,992			
12	Advertising and promotion	399,694			
13	Office expenses	1,550,064			
14	Information technology				
15	Royalties				
16	Occupancy	1,348,106			
17	Travel	122,142			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	143,724			
20	Interest	3,275,495			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,029,006			
23	Insurance	186,101			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	BAD DEBT	1,435,760			
b	CHECK & LOAN SERVICING	1,322,082			
c	ATM EXPENSE	1,193,135			
d	MISCELLANEOUS	103,236			
e	All other expenses	316,763			
25	Total functional expenses. Add lines 1 through 24e	21,690,758			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Fall	τχ	Check if Schedule O contains a response or note to any line in	this P	art X			
					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			9,166,693	1	9,392,944
	2	Savings and temporary cash investments			62,766,881	2	72,800,064
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete P Schedule L	art II	of		5	
its	6	Loans and other receivables from other disqualified persons (a section $4958(f)(1)$ ), persons described in section $4958(c)(3)$ employers and sponsoring organizations of section $501(c)(9)$ beneficiary organizations (see instructions) Complete Part II	(B), ar volunt	nd contributing cary employees'		6	
Assets	7	Notes and loans receivable, net			270,762,478	7	292,601,541
₹	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			1,658,565	9	1,773,044
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	 10a	28,359,912	.,,,		.,
	ь	Less accumulated depreciation	10b	8,360,549	19,261,812	10c	19,999,363
	11	Investments—publicly traded securities			272,627	11	310,974
	12	Investments—other securities See Part IV, line 11			135,368,237	12	123,410,314
	13	Investments—program-related See Part IV, line 11			406,165	13	425,697
	14	Intangible assets			·	14	<u> </u>
	15	Other assets See Part IV, line 11			13,808,337	15	11,825,838
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			513,471,795	16	532,539,779
	17	Accounts payable and accrued expenses			1,487,741	17	1,572,516
	18	Grants payable	1,151,111	18	.,,		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Sch			21		
lities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqual					
Liabiliti		persons Complete Part II of Schedule L				22	
ï	23	Secured mortgages and notes payable to unrelated third partie				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	ted th	ıırd partıes,			
		D			448,956,190	25	460,498,600
	26	<b>Total liabilities.</b> Add lines 17 through 25			450,443,931	26	462,071,116
ces		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	an	d complete			
<u>lan</u>	27	Unrestricted net assets				27	
8	28	Temporarily restricted net assets				28	
Ξ	29	Permanently restricted net assets				29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	nere 🕨	and			
Š	30	Capital stock or trust principal, or current funds			О	30	0
Ř	31	Paid-in or capital surplus, or land, building or equipment fund			0	31	0
Assets	32	Retained earnings, endowment, accumulated income, or other		63,027,864	32	70,468,663	
Net	33	Total net assets or fund balances			63,027,864	33	70,468,663
Z	34	Total liabilities and net assets/fund balances			513,471,795	34	532,539,779
		·			, ,		

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		27,4	484,533
2	Total expenses (must equal Part IX, column (A), line 25)	2		21.0	690,758
3	Revenue less expenses Subtract line 2 from line 1	3			793,775
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
5	Net unrealized gains (losses) on investments	5		-	027,864 145,850
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-4	498,826
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		70,4	468,663
Par	t XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response or note to any line in this Part XII				. 🔽
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	ו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	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	arate			
	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 oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e <b>2c</b>		
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ie	3a		No
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		

DLN: 93493204008435

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

Information about Schedule D (Form 990) and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public Inspection

	the organization CURITY CREDIT UNION					Emple	yer iden	tificati	on numbe	er
TIET SE	SONITI CREDIT ONION				63-0757453					
rt I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990			Other Simi	ilar Fur	nds o	r Acco	unts.	Comple	te ıf th
		(a) Dor	norac	dvised funds		(	<b>b)</b> Funds	and ot	heraccou	unts
Tota	al number at end of year									
Aggı	regate value of contributions to (during year)									
A ggı	regate value of grants from (during year)									
A ggı	regate value at end of year									
	the organization inform all donors and donor advisors are the organization's property, subject to the or					radvis	ed		┌ Yes	┌ No
use	the organization inform all grantees, donors, and do d only for charitable purposes and not for the benef ferring impermissible private benefit?						purpose		┌ Yes	□No
	Conservation Easements. Complete if	the organizat	tion :	answered "	Yes" to	Form	990 Pa	art IV		,
	pose(s) of conservation easements held by the org	<u> </u>			103 10	101111	<i>55</i> 0, 16	11 ( 1 V ,	IIIC 7.	
	Preservation of land for public use (e g , recreation				n of an h	ıstorıc	ally impo	ortant l	and area	
	Protection of natural habitat		,	Preservatio						
	Preservation of open space									
Con	nplete lines 2a through 2d if the organization held a ement on the last day of the tax year	qualified cons	ervat	ıon contrıbut	ion in the	e form	of a cons	ervatio	on	
							Held a	t the E	nd of the	Year
Tota	al number of conservation easements					2a				
Tota	al acreage restricted by conservation easements					2b				
Nun	nber of conservation easements on a certified histo	oric structure in	clude	ed in (a)		2c				
	nber of conservation easements included in (c) acq oric structure listed in the National Register	juired after 8/17	7/06,	and not on a		2d				
Nun	- nber of conservation easements modified, transferr	ed, released, ex	ktıngı	ushed, or ter	rmınated	by the	organiza	atıon dı	ırıng	
	tax year 🛌		5	,		,	J		J	
	·									
Nun	nber of states where property subject to conservati	ion easement is	loca	ted <b>&gt;</b>		_				
	s the organization have a written policy regarding to preement of the conservation easements it holds?	the periodic moi	nıtorı	ng, inspectio	on, handlı	ng of v	/iolations	, and	┌ Yes	┌ N
Staf ►	ff and volunteer hours devoted to monitoring, inspe	cting, and enfor	cing	conservatior	n easeme	ents du	iring the	year		
Amo	ount of expenses incurred in monitoring, inspecting	, and enforcing	cons	ervation eas	ements	during	the year			
						,	•			
Doe	es each conservation easement reported on line 2(o section 170(h)(4)(B)(ii)?	d) above satisfy	the	requirements	s of secti	on 17	)(h)(4)(E	5)(1)	┌ Yes	□ N
	ert XIII, describe how the organization reports cor	aconvation oaco	mont	c in its rove	nuo and a	avnand	o staton	nont ar	•	,
bala	ance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the								
***	Organizations Maintaining Collection Complete if the organization answered "Y					r Oth	er Sim	ilar As	ssets.	
work	ne organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide, in Part XIII, the text of the footnote t	ts held for publi	ıc exl	nibition, educ	cation, or	resea	rch ın fuı			
work	ne organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide the following amounts relating to thes	ts held for publi								lıc
(i) <sub> </sub>	Revenue included in Form 990, Part VIII, line 1						<b>►</b> \$_			
(ii)	Assets included in Form 990, Part X									
Ifth	ne organization received or held works of art, historowing amounts required to be reported under SFAS					financ				
Rev	enue included in Form 990, Part VIII, line 1						<b>►</b> \$			
Ass	ets included in Form 990, Part X						<b>►</b> \$			

Part	Organizations Maintaining Colle	ctions of Art,	His	tori	<u>cal T</u>	reası	ures, or Ot	he	r Similar As	sets (d	continued)
3	Using the organization's acquisition, accession, collection items (check all that apply)	, and other record	ds, ch	neck			_		significant use	e of its	
а	Public exhibition		d	Γ	Loan	orexc	change progra	ams			
b	Scholarly research		e	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's colle Part XIII	ctions and explai	n hov	w the	y furth	er the	organızatıon'	s ex	empt purpose	ın	
5	During the year, did the organization solicit or re								ılar	<b></b>	<b>-</b>
Dar	assets to be sold to raise funds rather than to b  t IV Escrow and Custodial Arrangem		_						oc" to Form (	☐ Yes	No
Pal	Part IV, line 9, or reported an amou						ii aliswelet	1 1	es to roilli	<del>33</del> 0,	
1a	Is the organization an agent, trustee, custodian included on Form 990, Part X?						or other asse	ets r	not	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the	follov	wing t	able						
									1A	mount	
C	Beginning balance							1c			
d	Additions during the year						<u> </u>	1d			
е	Distributions during the year						_	1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Form	990, Part X, line	21,	for e	scrow	orcust	todıal accoun	t lıa	bility?	☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIII	Check here if the	expl	anatı	on has	been	provided in P	art )	KIII		Г
Pa	t V Endowment Funds. Complete if the										
1_		(a)Current year	(b	<b>)</b> Prior	year	b (c)⊺	Two years back	(d)	Three years back	(e)Four	years back
1a	Beginning of year balance	+				<u> </u>					
b	Net investment earnings, gains, and losses										
С	wet investment earnings, gams, and losses										
d	Grants or scholarships					<u> </u>					
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the current	t year end balanc	e (lır	ne 1 g	, colun	nn (a))	held as				
а	Board designated or quasi-endowment	,	`	J	'	. ,,					
ь	Permanent endowment ▶										
c	Temporarily restricted endowment ►										
_	The percentages in lines 2a, 2b, and 2c should	equal 100%									
За	Are there endowment funds not in the possession	on of the organiza	ition	that	are hel	danda	admınıstered	for	the		
	organization by									Yes	No
	(i) unrelated organizations		•	•		•		٠	3a	• •	
b	(ii) related organizations									(ii)   	<del>                                     </del>
4	Describe in Part XIII the intended uses of the o	· ·				•		•	3		
Par	t VI Land, Buildings, and Equipment					n ans	wered 'Yes'	to	Form 990, Pa	art IV,	line
	11a. See Form 990, Part X, line 10.			1 .			l #20				
	Description of property				Cost o		( <b>b)</b> Cost or oth basis (other		(c) Accumulated depreciation	1 (d) B	Book value
1a	and						7,975,	840		1	7,975,840
b	Buildings						15,394,	278	4,386,02	27	11,008,251
c	Leasehold improvements										
d I	Equipment						4,989,	794	3,974,52	22	1,015,272
	Other										
Tota	. Add lines 1a through 1e <i>(Column (d) must equa</i>	al Form 990, Part X	, colu	ımn (	B), line	10(c).	)	•	🛌		19,999,363
							_		Schedule I	D (Form	990) 2014

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
(3)Other (A) GOVERNMENT AGENCY SECURITIES	123,410,314	С
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>123,410,314</b>	
Part VIII Investments—Program Related. C		answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>F</b>	
Part IX Other Assets. Complete if the organization (a) Desc		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
Form 990, Part X, line 25.		Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability Federal income taxes	(b) Book value	
SHARE DEPOSITS	460,498,600	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>▶</b> 460,498,600	
2. Liability for uncertain tax positions. In Part XIII. provide		

Par		<b>evenue per Audited Financial Stat</b> vered 'Yes' to Form 990, Part IV, line 1		is with Revenue	рег к	<b>eturn</b> Complete i
L		er support per audited financial statements			1	
	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses)	on investments	2a			
b	Donated services and use of f	acılıtıes	2b			
С	Recoveries of prior year grant	s	2c			
t	Other (Describe in Part XIII )		2d			
•	Add lines <b>2a</b> through <b>2d</b> .				2e	
	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
3	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII )		4b			
2	Add lines <b>4a</b> and <b>4b</b>				4c	
	Total revenue Add lines <b>3</b> and	d <b>4c.</b> (This must equal Form 990, Part I, line	12).		5	
art		xpenses per Audited Financial Sta		nts With Expense	s per	Return. Comple
		swered 'Yes' to Form 990, Part IV, line			<del></del>	T
	·	raudited financial statements			1	
		it not on Form 990, Part IX, line 25	1 -	I		
1		acılıtıes	2a			
)	· -		2b			
0			2c			
d	Other (Describe in Part XIII)		2d			
9	<u>-</u>				2e	
					3	
		0, Part IX, line 25, but not on line 1:		ı		
3	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a			
)	Other (Describe in Part XIII)		4b			
2					4c	
		nd <b>4c.</b> (This must equal Form 990, Part I, lin	e 18 )		5	
	Supplemental Inf					
art		Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and				de any addıtıonal
	Return Reference	Explanation				

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2014

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

DLN: 93493204008435

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

**Compensation Information** For certain Officers, Directors, Trustees, Key Employees, and Highest

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

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

Open to Public Inspection

Name of the organization FAMILY SECURITY CREDIT UNION **Employer identification number** 

63-0757453

Pai	t I Questions Regarding Compensatio	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	$\sqcap$	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses do			1b		
2	Did the organization require substantiation prior to idirectors, trustees, officers, including the CEO/Exe					
	andecors, crustees, onicers, melading the GES/EXC	cutive D	meetor, regarding the items effected in line 14	2		
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all the used by a related organization to establish compens	nat apply	•			
		Γ	Written employment contract			
	Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	nt?	4a		No
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	tions mu	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of					
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of $$	, lıne 1a	, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of	•	• • • • • • • • • • • • • • • • • • • •	7		
8	Were any amounts reported in Form 990, Part VII, I	oaid or a	occured 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		
9	If "Yes" to line 8, did the organization also follow the section 53 $4958-6(c)$ ?	e rebutta	able presumption procedure described in Regulations	9		

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

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

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

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation in
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 M SHANE NOBBLEY, PRESIDENT/CEO	(i) (ii)	267,190 0	0	0	13,456 0	7,742 0	288,388	0 0
2 DEBRA MCCAGHREN, VP FINANCE & OFFICE OPS	(i) (ii)	171,460 0	0	0	8,536 0	1,223	181,219 0	0
3 J COLE SHARP, VP LENDING & BRANCH OPS	(i) (ii)	166,540 0	0	0	8,344 0	4,245 0	179,129 0	0
4 ZACHARY HOWELL, VP MARKETING & ADMIN	(i) (ii)	147,452 0	0	0	7,595 0	7,435 0	162,482 0	0

Schedule J (Form 990) 2014

### Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2014

DLN: 93493204008435

OMB No 1545-0047

Open to Public Inspection

### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

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

Name of the organization FAMILY SECURITY CREDIT UNION Employer identification number 63-0757453

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	<u>'</u>
FORM 990, PART VI, SECTION A, LINE 7A	A NOMINATING COMMITTEE MAKES RECOMMENDATIONS FOR AVAILABLE BOARD MEMBER POSITIONS AT THE A NNUAL MEETING MEMBERS CAN ALSO BE NOMINATED BY PETITION MEMBERS THEN VOTE BY BALLOT WHEN MORE THAN ONE NOMINEE IS SEEKING ELECTION
FORM 990, PART VI, SECTION A, LINE 8B	THE CREDIT UNION DOES NOT HAVE COMMITTEES WITH THE RESPONSIBILITY TO ACT ON BEHALF OF THE GOVERNING BODY
FORM 990, PART VI, SECTION B, LINE 11	UPON COMPLETION OF FAMILY SECURITY CREDIT UNION'S FORM 990, THE RETURN IS DISTRIBUTED TO T HE BOARD FOR REVIEW THE BOARD MEMBERS REVIEW THE TAX RETURN AND ARE FREE TO ASK ANY QUEST IONS OR ENGAGE IN DISCUSSION REGARDING ANY TOPIC COVERED IN THE RETURN ONCE THE GOVERNING BODY HAS REVIEWED THE FORM 990, THE RETURN IS FILED WITH THE INTERNAL REVENUE SERVICE
FORM 990, PART VI, SECTION B, LINE 12C	CREDIT UNION STAFF REVIEW AND SIGN A WRITTEN CONFLICT OF INTEREST POLICY WHEN HIRED THIS POLICY IS MONITORED BY THE CREDIT UNION IT IS THE RESPONSIBILITY OF STAFF OR DIRECTORS TO IMMEDIATELY NOTIFY THE CREDIT UNION MANAGERS OF ANY POTENTIAL CONFLICT OF INTEREST
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION FOR THE CEO AND VICE PRESIDENTS IS REVIEWED ON A YEARLY BASIS THE CEO REVIEW S THE VICE PRESIDENTS' SALARY AND THE EXECUTIVE COMMITTEE REVIEWS THE CEO'S SALARY DURING THE REVIEWS, THE CEO AND EXECUTIVE COMMITTEE TAKE INTO ACCOUNT THE TYPE AND AMOUNT OF WOR K PERFORMED BY THE EMPLOYEE WHILE TAKING INTO ACCOUNT THE CREDIT UNION'S CURRENT FINANCIAL STATUS AND BUDGET BOTH THE CEO AND EXECUTIVE COMMITTEE USE THE NATIONAL PEER GROUP SALAR Y GUIDES PROVIDED BY CUNA AS AN INDEPENDENT SALARY GUIDE
FORM 990, PART VI, SECTION C, LINE 19	FAMILY SECURITY CREDIT UNION MAKES AVAILABLE ITS FINANCIAL STATEMENTS VIA THE NCUA WEBSITE WHICH CAN BE FOUND AT WWW NCUA GOV OTHER DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST
FORM 990, PART XI, LINE 9	NET CHANGE IN OTHER COMPREHENSIVE INCOME/LOSS -498,826
FORM 990, PART XII, LINE 2	THE CREDIT UNION HAS SEPTEMBER 30 YEAR END AUDITED FINANCIAL STATEMENTS PREPARED IN ACCORD ANCE WITH GAAP BY AN INDEPENDENT CPA ON A YEARLY BASIS, THE ALABAMA CREDIT UNION ADMINIST RATION EXAMINES THE FINANCIAL STATEMENTS THE NATIONAL CREDIT UNION ADMINISTRATION WILL PE RIODICALLY PERFORM REVIEWS OF THE CREDIT UNION'S FINANCIAL STATEMENTS
SECTION 1 263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION	FAMILY SECURITY CREDIT UNION 2204 FAMILY SECURITY PLACE, SW DECATUR, AL 35603 EMPLOYER IDE NTIFICATION NUMBER 63-0757453 FOR THE YEAR ENDING DECEMBER 31, 2014 FAMILY SECURITY CREDI T UNION IS MAKING THE DE MINIMIS SAFE HARBOR ELECTION UNDER REG SEC 1 263(A)-1 (F)
SECTION 1 263(A)-3(N) ELECTION	FAMILY SECURITY CREDIT UNION 2204 FAMILY SECURITY PLACE, SW DECATUR, AL 35603 EMPLOYER IDE  NTIFICATION NUMBER 63-0757453 FOR THE YEAR ENDING DECEMBER 31, 2014 FAMILY SECURITY CREDI  T UNION IS MAKING THE ELECTION TO CAPITALIZE REPAIR AND MAINTENANCE COSTS UNDER REG SEC  1 263(A)-3(N)

## **3115**

(Rev December 2009)
Department of the Treasury
Internal Revenue Service

### **Application for Change in Accounting Method**

OMB No 1545-0152

Internal Revenue S						
	me of parent corporation if a consolic	dated group) (see instructions)		Identification number (se		
Family Security Credit Union			63-0757453  Principal business activity code number (see instructions)			
				Timolpar basiness activity	522130	in dottono)
Number, street,	and room or suite no If a P O box, s	ee the instructions		Tax year of change begins		01/01/2014
2204 Family	Security Place, SW			Tax year of change ends (N	MM/DD/YYYY)	12/31/2014
City or town, sta	te, and ZIP code			Name of contact person (se	ee instructions)	
Decatur, AL	. 35603			Cynthia A. Hudson,	СРА	
Name of applica	nt(s) (if different than filer) and identifi	cation number(s) (see instructions)			·	s telephone number
					205-98	32-5500
	nt is a member of a consolid			-1 / · · t - · · - t - · · - t - · ·		▶ ∐
required), ch	, Power of Attorney and Dec	claration of Representative,	is attache	a (see instructions for	wnen Form 2848	3 IS
	ox to indicate the type of a	nnlicant		hook the engrepriete	hov to indicate	the type
☐ Individua		Cooperative (Sec 138		Theck the appropriate of accounting method		
☐ Corporat		Partnership	- 1 L	see instructions)	onango monig i	oquootou.
= :	d foreign corporation	S corporation		Depreciation or Amo	ortization	
(Sec 957		Insurance co (Sec 81		· ☐ Financial Products a		Activities of
□ 10/50 со	poration (Sec 904(d)(2)(E))	☐ Insurance co (Sec 83	31)	Financial Institutions	3	
Qualified	personal service	Other (specify) ►		☐ Other (specify) ►		
-	on (Sec 448(d)(2))					
✓ Exempt c	rganization Enter Code sect	ion ► 501(c)(14)				
	be eligible for approval of the reque					
	er's requested change in method of		nformation r	equested on this Form 311	15 (ıncludıng ıts ın	istructions), as
•	her information that is not spec rer must attach all applicable		requested	I throughout this form		
			requesteu	t unoughout uns form.		
	<b>Iformation For Automation</b> The applicable designated auto	<u> </u>	nange num	her for the requested as	itomatic change	Enter Vas Na
	· · ·	_	-	-	_	
-	only one designated automatic accounting method change number, except as provided for in guidance published by the IRS If the requested change has no designated automatic accounting method change number, check "Other," and provide					· <del>-</del>
both a	description of the change and	citation of the IRS guidance	providing t	the automatic change S	ee instructions	
► (a) (	Change No <b>184,186,187</b>	(b) Other Descriptio	on ►			
	ny of the scope limitations d	escribed in section 4 02 of	Rev Pro	c 2008-52 cause auto	omatic consent t	to be
	ulable for the applicant's requ	<u>-</u>		•		
	lete Part II below and then Pa		A through	E of this form (if applic	able).	
	formation For All Reques					Yes No
	r will the applicant cease to			to which the requeste	d change relate	
	nate its existence, in the tax y					✓
	s," the applicant is not eligibl	<u> </u>		• • •		
	the applicant (or any present	_	•		_	
	able tax year(s)) have any Fe o," go to line 5	derai income tax return(s) u	ınder exar	mination (see instructio	ns)?	<b>√</b>
	method of accounting the a	oplicant le roquoeting to ch	ango an is	seue (with respect to e	ther the applica	nt or
	resent or former consolidate		-	·	• •	
	(ı) under consideration or (ıı)				,	<i>"</i>
		Signature (see	Instructio	ins)		
	of perjury, I declare that I have exam					
	ontains all the relevant facts relating nich preparer has any knowledge	to the application, and it is true, c	correct, and t	complete Declaration of prep	parer (other than ap)	plicant) is based on all
	Filer			Preparer (other t	han filer/applic	ant)
				O		
	Signature and date			Signature of individual prep A. Hudson, CPA	paring the application	n and date
	Name and title (print or ty	ne)		и А. ПUUSON, СРА Name of individual preparin	a the application (n	rint or type)
	Hame and title (print or ty	<b>P~</b> (		i, Murphy, Shank & Si		3, 3,00/
			Partiell	a, widipity, Stialik & St		

Form 3115 (Rev 12-2009) Part II Information For All Requests (continued) Yes No 4c Is the method of accounting the applicant is requesting to change an issue pending (with respect to either the applicant or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) for any tax year under examination (see instructions)? d Is the request to change the method of accounting being filed under the procedures requiring that the operating division director consent to the filing of the request (see instructions)? If "Yes," attach the consent statement from the director e Is the request to change the method of accounting being filed under the 90-day or 120-day window period? If "Yes," check the box for the applicable window period and attach the required statement (see instructions) ☐ 90 day Date examination ended ▶ ☐ 120 day f If you answered "Yes" to line 4a, enter the name and telephone number of the examining agent and the tax year(s) under examination Telephone number ▶ Name ▶ g Has a copy of this Form 3115 been provided to the examining agent identified on line 4f? 5a Does the applicant (or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) have any Federal income tax return(s) before Appeals and/or a Federal court? Appeals officer and/or counsel for the government, If "Yes," enter the name of the (check the box) telephone number, and the tax year(s) before Appeals and/or a Federal court Telephone number ▶ Tax year(s) ▶ b Has a copy of this Form 3115 been provided to the Appeals officer and/or counsel for the government identified on line 5a? c Is the method of accounting the applicant is requesting to change an issue under consideration by Appeals and/or a Federal court (for either the applicant or any present or former consolidated group in which the applicant was a 1 member for the tax year(s) the applicant was a member) (see instructions)? If "Yes," attach an explanation If the applicant answered "Yes" to line 4a and/or 5a with respect to any present or former consolidated group, attach a statement that provides each parent corporation's (a) name, (b) identification number, (c) address, and (d) tax year(s) during which the applicant was a member that is under examination, before an Appeals office, and/or before a Federal court If, for federal income tax purposes, the applicant is either an entity (including a limited liability company) treated as a partnership or an S corporation, is it requesting a change from a method of accounting that is an issue under consideration in an examination, before Appeals, or before a Federal court, with respect to a Federal income tax return of a partner, member, or shareholder of that entity? ✓ If "Yes," the applicant is **not** eligible to make the change 8a Does the applicable revenue procedure (advance consent or automatic consent) state that the applicant does not 1 receive audit protection for the requested change (see instructions)? **b** If "Yes," attach an explanation 9a Has the applicant, its predecessor, or a related party requested or made (under either an automatic change procedure or a procedure requiring advance consent) a change in method of accounting within the past 5 years ✓ (including the year of the requested change)? b If "Yes," for each trade or business, attach a description of each requested change in method of accounting (including the tax year of change) and state whether the applicant received consent c If any application was withdrawn, not perfected, or denied, or if a Consent Agreement granting a change was not signed and returned to the IRS, or the change was not made or not made in the requested year of change, attach an explanation 10a Does the applicant, its predecessor, or a related party currently have pending any request (including any concurrently filed request) for a private letter ruling, change in method of accounting, or technical advice? 1 b If "Yes," for each request attach a statement providing the name(s) of the taxpayer, identification number(s), the type of request (private letter ruling, change in method of accounting, or technical advice), and the specific issue(s) in the request(s) Is the applicant requesting to change its **overall** method of accounting? 11 If "Yes," check the appropriate boxes below to indicate the applicant's present and proposed methods of

☐ Accrual

Accrual

accounting Also, complete Schedule A on page 4 of this form

☐ Cash

☐ Cash

Present method:

Proposed method:

Hybrid (attach description)

Hybrid (attach description)

Form 31	15 (Rev	12-2009)						Р	age
Part		Information For	All Reques	sts (continued)				Yes	No
12 a b c	accou comp The it The a The a	unting and also challete description for em(s) being change pplicant's present in pplicant's propose	anging to a s reach of the ed method for th d method for	special method of acc	counting for one ed nged	or (ii) is changing its ove e or more items, attach			
13	activi 1 446 provid overa accou Will th	ty code for each I -1(d), describe will ded by each trade i Il method of accou unting method as p	f the applicand the the reach or business and ing for each art of this appoint of account.	nt has more than one trade or business is and any other types of trade or business, a blication or a separate and be used for the agency of th	e trade or busin accounted for activities engaged and which trade application.	usiness(es), and the princess as defined in Regu separately, the goods ged in that generate gro or business is requesting and records and financi	lations section s and services ss income, the g to change its		✓
		," attach an explan		a de lierie					
15a	reorg		or liquidation	n) during the proposed		which section 381(a) a ange determined withou			
b 16	the m distrib the cl	nethods of account oution or transfer a nange(s) requested	ing used by nd the methor in this applica	the parties to the sec od(s) that would be re ation	tion 381(a) tran equired by secti	plication, attach a staten saction immediately befo on 381(c)(4) or (c)(5) abs IRS proposes an advers	ore the date of ent consent to	<b>√</b>	
17	If the of ac inven chang	applicant is changi counting for any tories subject to se ge	ng to either t property sub	he overall cash metho Ject to section 263A	d, an overall acc	crual method, or is changed to some contract subject to some 3 tax years preceding	ging its method ection 460, or		
	\$			\$		\$			
Part	Ш	Information For	Advance (	Consent Request				Yes	No
18			_		•	e, revenue ruling, notice	, regulation, or		
	If "Y∈			natic change request? cribing why the applic		ng its request under ad	vance consent		
19	detail situat (statu discu	ed and complete of some and that demonsters, regulations, publication of the contraination.	description of nstrates that ablished ruling y authorities	f the facts that expla the applicant is autho gs, court cases, etc) s or a statement that no	ins how the law rized to use the supporting the p contrary author	•	the applicant's de all authority		
20				d to the proposed cha		tions)			
21 22	If the	applicant is a molidated group use	ember of a other the proposed	reasons for the propo consolidated group f method of accounting	or the year of	change, do all other m ng changed?	embers of the		
23a		," attach an explan		ed to this application (	eoo inetriletione	) ▶ \$			
						tion or certification (see in	nstructions)		
Part	IV	Section 481(a)	Adjustment		•		,	Yes	No
24	ımpler		nange in metho	od of accounting on a cu		published guidance require than a section 481(a) adjust			
25	Enter incomused compaphic	the section 481(a ne • \$	adjustment 0.00 A section 481 omponent If of the name,	Indicate whether the trach a summary of the (a) adjustment If it more than one appli	e computation a is based on m cant is applying , principal busin	s an increase (+) or a cand an explanation of the ore than one compone for the method change ess activity code (see inse	e methodology nt, show the e on the same		

Form 3	115 (Rev 12-2009)	F	age <b>4</b>
Par	Section 481(a) Adjustment (continued)	Yes	No
26	If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to take the entire amount of the adjustment into account in the year of change?		✓
27	Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group, a consolidated group, a controlled group, or other related parties?  If "Yes," attach an explanation		
Sche	edule A—Change in Overall Method of Accounting (If Schedule A applies, Part I below must be complete	ted.)	
Pai	rt   Change in Overall Method (see instructions)		
1	Enter the following amounts as of the close of the tax year preceding the year of change. If none, state "None" Also statement providing a breakdown of the amounts entered on lines 1a through 1g	o, atta	ch a
		mount	
а	Income accrued but not received (such as accounts receivable)		
b	Income received or reported before it was earned (such as advanced payments) Attach a description of the income and the legal basis for the proposed method		
С	Expenses accrued but not paid (such as accounts payable)		
d	Prepaid expenses previously deducted		
е	Supplies on hand previously deducted and/or not previously reported		
f	Inventory on hand previously deducted and/or not previously reported Complete Schedule D, Part II		
g	Other amounts (specify) Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment ▶		
h	<b>Net section 481(a) adjustment</b> (Combine lines 1a–1g) Indicate whether the adjustment is an increase (+) or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV,		
	line 25		
2	Is the applicant also requesting the recurring item exception under section 461(h)(3)?	_	No
3	Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applic the close of the tax year preceding the year of change. Also attach a statement specifying the accounting method preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules submitted Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in 1a through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, attach explaining the differences.	used ted wit Part I,	when th the lines

#### Change to the Cash Method For Advance Consent Request (see instructions)

Applicants requesting a change to the cash method must attach the following information.

- A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials and supplies used in carrying out the business
- An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulations

### Schedule B - Change to the Deferral Method for Advance Payments (see instructions)

- If the applicant is requesting to change to the Deferral Method for advance payments described in section 5 02 of Rev. Proc. 2004-34, 2004-1 C B 991, attach the following information:
- a A statement explaining how the advance payments meet the definition in section 4 01 of Rev Proc 2004-34
- If the applicant is filing under the automatic change procedures of Rev Proc 2008-52, the information required by section 8 02(3)(a)-(c) of Rev Proc 2004-34
- c If the applicant is filing under the advance consent provisions of Rev Proc 97-27, the information required by section 8 03(2)(a)-(f) of Rev Proc 2004-34
- If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 1 451-5(b)(1)(II), attach the following
- a A statement explaining how the advance payments meet the definition in Regulations section 1 451-5(a)(1)
- b A statement explaining what portions of the advance payments, if any, are attributable to services, whether such services are integral to the provisions of goods or items, and whether any portions of the advance payments that are attributable to non-integral services are less than five percent of the total contract prices. See Regulations sections 1 451-5(a)(2)(i) and (3)
- c A statement explaining that the advance payments will be included in income no later than when included in gross receipts for purposes of the applicant's financial reports See Regulations section 1 451-5(b)(1)(ii)
- d A statement explaining whether the inventoriable goods exception of Regulations section 1 451-5(c) applies and if so, when substantial advance payments will be received under the contracts, and how the exception will limit the deferral of income

Form 3115 (Rev 12-2009) Page **5** 

### Schedule C-Changes Within the LIFO Inventory Method (see instructions)

#### Part I General LIFO Information

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all **Forms 970,** Application To Use LIFO Inventory Method, filed to adopt or expand the use of the LIFO method.

- 1 Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items
- a Valuing inventory (e.g., unit method or dollar-value method)
- **b** Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, vehicle-pool method, etc.)
- c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc.)
- d Determining the current-year cost of goods in the ending inventory (i.e., most recent acquisitions, earliest acquisitions during the current year, average cost of current-year acquisitions, or other permitted method)
- 2 If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation.
- 3 If the proposed change is not requested for all the LIFO inventory, attach a statement specifying the inventory to which the change is and is not applicable
- 4 If the proposed change is not requested for all of the LIFO pools, attach a statement specifying the LIFO pool(s) to which the change is applicable
- 5 Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, identify which inventory items are valued under each method.
- 6 If changing to the IPIC method, attach a completed Form 970

#### Part II Change in Pooling Inventories

- 1 If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use
- 2 If the applicant is proposing to use natural business unit (NBU) pools or requesting to change the number of NBU pools, attach the following information (to the extent not already provided) in sufficient detail to show that each proposed NBU was determined under Regulations section 1 472-8(b)(1) and (2):
- a A description of the types of products produced by the applicant. If possible, attach a brochure
- **b** A description of the types of processes and raw materials used to produce the products in each proposed pool
- c If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, state the reasons for the separate facilities, the location of each facility, and a description of the products each facility produces
- **d** A description of the natural business divisions adopted by the taxpayer State whether separate cost centers are maintained and if separate profit and loss statements are prepared
- e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool
- f A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool.
- g A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing
- 3 If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar. See Regulations section 1 472-8(b)(3)
- 4 If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1 472-8(c)

Form 3115 (Rev 12-2009)

Schedule D-Change in the Treatment of Long-Term Contracts Under Section 460, Inventories, or Other Section 263A Assets (see instructions) Change in Reporting Income From Long-Term Contracts (Also complete Part III on pages 7 and 8.) To the extent not already provided, attach a description of the applicant's present and proposed methods for reporting income and expenses from long-term contracts. Also, attach a representative actual contract (without any deletion) for the requested change If the applicant is a construction contractor, attach a detailed description of its construction activities Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see instructions)? ☐ Yes □ No ☐ Yes b If "Yes," do all the contracts qualify for the exception under section 460(e) (see instructions)? ☐ No If line 2b is "No," attach an explanation If line 2b is "Yes," is the applicant requesting to use the percentage-of-completion method using cost-tocost under Regulations section 1 460-4(b)? ☐ Yes □ No If line 2c is "No," is the applicant requesting to use the exempt-contract percentage-of-completion method under Regulations section 1 460-4(c)(2)? ☐ Yes □ No If line 2d is "Yes," attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor. If line 2d is "No," attach an explanation of what method the applicant is using and the authority for its use Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)? ☐ Yes □ No If "Yes," attach an explanation of the applicant's present and proposed method(s) of accounting for longterm manufacturing contracts c Attach a description of the applicant's manufacturing activities, including any required installation of manufactured goods To determine a contract's completion factor using the percentage-of-completion method Will the applicant use the cost-to-cost method in Regulations section 1 460-4(b)? ☐ Yes □ No If line 4a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and □ No Regulations section 1 460-5(c))? ☐ Yes Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts or Federal long-term contracts Change in Valuing Inventories Including Cost Allocation Changes (Also complete Part III on pages 7 and 8) Part II Attach a description of the inventory goods being changed 2 Attach a description of the inventory goods (if any) NOT being changed ☐ Yes □ No Is the applicant subject to section 263A? If "No," go to line 4a Is the applicant's present inventory valuation method in compliance with section 263A (see instructions)? □ No If "No," attach a detailed explanation Yes Inventory Not Inventory Being Changed Being Changed 4a Check the appropriate boxes below Present method Proposed method Present method Identification methods Specific identification FIFO . LIFO . Other (attach explanation) Valuation methods Cost . Cost or market, whichever is lower Retail cost . Retail, lower of cost or market Other (attach explanation) **b** Enter the value at the end of the tax year preceding the year of change If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the following information (see instructions) a Copies of Form(s) 970 filed to adopt or expand the use of the method

- **b** Only for applicants requesting advance consent. A statement describing whether the applicant is changing to the method required by Regulations section 1 472-6(a) or (b), or whether the applicant is proposing a different method
- c Only for applicants requesting an automatic change. The statement required by section 22 01(5) of the Appendix of Rev Proc. 2008-52 (or its successor)

Form 3115 (Rev. 12-2009)

Part III Method of Cost Allocation (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 (see instructions)).

#### Section A-Allocation and Capitalization Methods

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following

- 1 The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method)
- 2 The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method)
- 3 The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the US ratio, or other reasonable allocation method)

#### Section B - Direct and Indirect Costs Required To Be Allocated

Check the appropriate boxes showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460 Mark "N/A" in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked.

		Present method	Proposed method
1	Direct material		
2	Direct labor		
3	Indirect labor		
4	Officers' compensation (not including selling activities)		
5	Pension and other related costs		
6	Employee benefits		
7	Indirect materials and supplies		
8	Purchasing costs		
9	Handling, processing, assembly, and repackaging costs		
10	Offsite storage and warehousing costs		
11	Depreciation, amortization, and cost recovery allowance for equipment and facilities		
	placed in service and not temporarily idle		
12	Depletion		
13	Rent		
14	Taxes other than state, local, and foreign income taxes		
15	Insurance		
16	Utilities		
17	Maintenance and repairs that relate to a production, resale, or long-term contract activity		
18	Engineering and design costs (not including section 174 research and experimental		
	expenses)		
19	Rework labor, scrap, and spoilage		
20	Tools and equipment		
21	Quality control and inspection		
22	Bidding expenses incurred in the solicitation of contracts awarded to the applicant		
23	Licensing and franchise costs		
24	Capitalizable service costs (including mixed service costs)		
25	Administrative costs (not including any costs of selling or any return on capital)		
26	Research and experimental expenses attributable to long-term contracts		
27	Interest		
28	Other costs (Attach a list of these costs)		

Form 3115 (Rev 12-2009) Page 8 Part III Method of Cost Allocation (see instructions) (continued) Section C-Other Costs Not Required To Be Allocated (Complete Section C only if the applicant is requesting to change its method for these costs) Proposed method Present method Marketing, selling, advertising, and distribution expenses 2 Research and experimental expenses not included in Section B, line 26 3 Bidding expenses not included in Section B, line 22 4 General and administrative costs not included in Section B 5 Income taxes 6 Cost of strikes . 7 Warranty and product liability costs 8 Section 179 costs 9 On-site storage. 10 Depreciation, amortization, and cost recovery allowance not included in Section B. 11 Other costs (Attach a list of these costs) Schedule E—Change in Depreciation or Amortization (see instructions) Applicants requesting approval to change their method of accounting for depreciation or amortization complete this section Applicants must provide this information for each item or class of property for which a change is requested Note. See the List of Automatic Accounting Method Changes in the instructions for information regarding automatic changes under sections 56, 167, 168, 197, 1400l, 1400L, or former section 168. Do not file Form 3115 with respect to certain late elections and election revocations (see instructions). ☐ Yes ✓ No Is depreciation for the property determined under Regulations section 1 167(a)-11 (CLADR)? If "Yes," the only changes permitted are under Regulations section 1 167(a)-11(c)(1)(iii) Is any of the depreciation or amortization required to be capitalized under any Code section (e.g., section 263A)? ☐ Yes ✓ No If "Yes," enter the applicable section ▶ \_\_\_\_\_ Has a depreciation, amortization, or expense election been made for the property (e.g., the election under ✓ No sections 168(f)(1), 179, or 179C)? ☐ Yes If "Yes," state the election made ▶ 4a To the extent not already provided, attach a statement describing the property being changed include in the description the type of property, the year the property was placed in service, and the property's use in the applicant's trade or business or income-producing activity ☐ Yes □ No b If the property is residential rental property, did the applicant live in the property before renting it? ✓ No ☐ Yes c Is the property public utility property? To the extent not already provided in the applicant's description of its present method, attach a statement explaining how the property is treated under the applicant's present method (e.g., depreciable property, inventory property, supplies under Regulations section 1 162-3, nondepreciable section 263(a) property, property deductible as a current expense, etc.) If the property is not currently treated as depreciable or amortizable property, attach a statement of the facts supporting the proposed change to depreciate or amortize the property If the property is currently treated and/or will be treated as depreciable or amortizable property, provide the following information for both the present (if applicable) and proposed methods

- a The Code section under which the property is or will be depreciated or amortized (e.g., section 168(g))
- b The applicable asset class from Rev Proc 87-56, 1987-2 C B 674, for each asset depreciated under section 168 (MACRS) or under section 1400L, the applicable asset class from Rev Proc 83-35, 1983-1 C B 745, for each asset depreciated under former section 168 (ACRS), an explanation why no asset class is identified for each asset for which an asset class has not been identified by the applicant
- c The facts to support the asset class for the proposed method
- d The depreciation or amortization method of the property, including the applicable Code section (e.g., 200% declining balance method under section 168(b)(1))
- e The useful life, recovery period, or amortization period of the property
- f The applicable convention of the property
- **g** A statement of whether or not the additional first-year special depreciation allowance (for example, as provided by section 168(k), 168(l), 168(m), 168(n), 1400L(b), or 1400N(d)) was or will be claimed for the property. If not, also provide an explanation as to why no special depreciation allowance was or will be claimed.

Attachment to Form 3115

Repair and Maintenance Costs (Auto. Change #184)
Materials and Supplies (Auto. Change #186 or #187)
Filed Pursuant to Section 10.11 of Appendix of Rev. Proc. 2011-14
as modified by Rev. Proc. 2014-16
Tax Year Ended December 31, 2014

### Page 3, Part II, Line 12a, Item Being Changed

The Applicant is requesting a change in method of accounting under section 10.11 of the Appendix of Rev. Proc. 2011-14, as modified by Rev. Proc. 2014-16, to change its method of accounting to currently deduct incidental repair and maintenance costs specified below that were improperly capitalized.

The types of tangible property to which this method change request relates include, but are not limited to, the following:

- Real property/leasehold improvements
- Land improvements
- Equipment
- Furniture and fixtures
- Computers and components
- Software

The types of repair and maintenance costs to which this change applies are described below and are hereinafter collectively referred to as "repair and maintenance costs." Typical examples of such costs include, but are not limited to, the following:

- Roof repair
- Wall repair and maintenance
- Window/door repair
- Carpet repair and maintenance
- Electrical/plumbing repair
- HVAC repair
- Computer and components repair
- Equipment repair and maintenance
- Furniture and fixtures refinishing and recovering

These amounts are deductible under Reg. section 1.162-4, if the amounts are not otherwise required to be capitalized. Expenditures that meet any of the capitalization requirements under Reg. section 1.263(a)-3 (relating to betterments, restorations, adaptation, etc.) will continue to be capitalized under section 263(a) and are not included in this method change request.

The Applicant is requesting a change in method of accounting under section 10.11 of the Appendix of Rev. Proc. 2011-14, as modified by Rev. Proc. 2014-16, to change its method of accounting to capitalize repair and maintenance costs specified below as amounts paid to improve property that was previously deducted.

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Repair and Maintenance Costs (Auto. Change #184)
Materials and Supplies (Auto. Change #186 or #187)
Filed Pursuant to Section 10.11 of Appendix of Rev. Proc. 2011-14
as modified by Rev. Proc. 2014-16
Tax Year Ended December 31, 2014

The types of tangible property to which this method change request relates include, but are not limited to, the following:

- Real property/leasehold improvements
- Land improvements
- Equipment
- Furniture and fixtures
- Computers and components
- Software

The types of repair and maintenance costs to which this change applies are described below and are hereinafter collectively referred to as "capital expenditures." Typical examples of such costs include, but are not limited to, the following:

- Roof repair
- Wall repair and maintenance
- Window/door repair
- Carpet repair and maintenance
- Electrical/plumbing repair
- HVAC repair
- Computer and components repair
- Equipment repair and maintenance
- Furniture and fixtures refinishing and recovering

These amounts are capitalized under Reg. section 1.263(a)-3, if the amounts are not otherwise required to be deducted. Expenditures that meet any of the capitalization requirements under Reg. section 1.263(a)-3 (relating to betterments, restorations, adaptation, etc.) will continue to be capitalized under section 263(a) and are not included in this method change request. Expenditures paid for the repair or maintenance of rotable or temporary spare parts for which the optional method of accounting for spare parts is used are not included in this method change request.

The Applicant is requesting a change in method of accounting under section 10.11 of the Appendix of Rev. Proc. 2011-14, as modified by Rev. Proc. 2014-16, to change its method of accounting in identifying the unit of property and in identifying the building structure or building systems.

The types of property to which this method change request relates include, but are not limited to, the following:

- Equipment
- Furniture and fixtures
- Computers and components
- Software

### Attachment to Form 3115

Repair and Maintenance Costs (Auto. Change #184)
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- Building structure
- Land improvements
- HVAC
- Plumbing systems
- Electrical systems
- Elevators
- Escalators
- Fire protection/alarm systems
- Security systems
- Gas distribution systems

The unit of property for these property types is identified under Reg. section 1.263(a)-3(e).

The Applicant is requesting a change in method of accounting under section 10.11 of the Appendix of Rev. Proc. 2011-14, as modified by Rev. Proc. 2014-16, to change its method of accounting to deduct non-incidental material and supply costs when used or consumed in operations.

The types of non-incidental material and supply costs to which this change applies are described below and are hereinafter collectively referred to as "material and supply costs." Typical examples of such costs include, but are not limited to, the following:

#### Office supplies

These amounts are deductible under Reg. section 1.162-3, if the amounts are not otherwise required to be capitalized. Expenditures for which the election to capitalize and depreciate certain materials and supplies under Reg. section 1.162-3(d) (relating to rotable spare parts, temporary spare parts, or standby emergency spare parts) is made will continue to be capitalized and are not included in this method change request. Expenditures for which the optional method of accounting for rotable and temporary spare parts under Reg. section 1.162-3(e) is used are not included in this method change request.

The Applicant has elected the de minimis safe harbor under Reg. section 1.263(a)-1(f). Expenditures paid for materials and supplies to which the de minimis safe harbor is applied are not treated as amounts paid for materials and supplies for this method change request.

The Applicant is requesting a change in method of accounting under section 10.11 of the Appendix of Rev. Proc. 2011-14, as modified by Rev. Proc. 2014-16, to change its method of accounting to deduct incidental material and supply costs in taxable year amounts are paid.

The types of incidental material and supply costs to which this change applies are described below and are hereinafter collectively referred to as "material and supply costs." Typical examples of such costs include, but are not limited to, the following:

Office supplies

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Repair and Maintenance Costs (Auto. Change #184)

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These amounts are deductible under Reg. section 1.162-3, if the amounts are not otherwise required to be capitalized.

### Page 3, Part II, Line 12b, Present Method of Accounting

Under the present method of accounting, the Applicant capitalizes and depreciates these expenditures over a period of 3, 5, 10, 15 or 39 years, using the mid-month or half-year convention and straight-line or 200 percent declining balance method, as applicable.

Under the present method of accounting, the Applicant currently deducts these capital expenditures.

Under the present method of accounting, the Applicant's unit of property for the building structure consists the original purchase/construction costs and any subsequent improvements.

Under the present method of accounting, the Applicant has deducted materials and supplies hat do not fall under the category of inventory in the year paid.

### Page 3, Part II, Line 12c, Proposed Method of Accounting

Under the proposed method of accounting, the Applicant will change the method of accounting to deduct amounts paid or incurred for repair and maintenance in accordance with Reg. section 1.162-4. Reg. section 1.162-4(a) provides that a taxpayer may deduct amounts paid for repairs and maintenance to tangible property if the amounts paid are not otherwise required to be capitalized.

Under the proposed method of accounting, the Applicant will change the method of accounting to deduct amounts paid or incurred for routine maintenance in accordance with Reg. section 1.162-4. Reg. section 1.162-4(i) provides that amounts paid for routine maintenance to tangible property is deemed not to improve the unit of property.

Under the proposed method of accounting, the Applicant will change the method of accounting to capitalize amounts paid or incurred for repair and maintenance in accordance with Reg. section 1.263(a)-3. Reg. section 1.263(a)-3 provides that a taxpayer may capitalize amounts paid for repairs and maintenance to tangible property as amounts paid to improve property if expenditures are not otherwise required to be deducted.

Under the proposed method of accounting, the Applicant will change the unit of property for all real property to the building system components. For personal property the Applicant will change the unity of property determination based on functional interdependence and/or discrete and major functions unless industry specific guidance is published.

Attachment to Form 3115

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Under the proposed method of accounting, the Applicant will change the method of accounting to deduct non-incidental materials and supplies when first used or consumed in the applicant's operations

Under the proposed method of accounting, the Applicant will change the method of accounting to deduct incidental materials and supplies in the taxable year in which amount is paid.

### Page 3, Part II, Line 12d, Present Overall Method

The Applicant's present overall method of accounting is an accrual method.

### Page 3, Part II, Line 13, Description of Trade(s) or Business(es)

The Applicant is engaged in the trade or business of a credit union.

The Applicant's principal business activity code is 522130.

### Page 3, Part II, Line 14, Books and Records and Financial Statements

The Applicant's books and records and financial statements will be maintained using Generally Accepted Accounting Principles.

### Page 3, Part II, Line 16, Conference of Right

The Applicant requests a conference of right at the IRS National Office if the IRS proposes to rule adversely on this accounting method change. For these purposes, adversely is defined to include granting the method change on terms and conditions other than those requested by the Applicant.

#### Page 8, Schedule E, lines 4a, 5, 6 and 7

See responses above under Page 3, Part II lines 12a, 12b, 12c and 12d.

#### **Request for Faxed Documents**

The Applicant requests that a copy of any document related to this request (e.g., a request for additional information or the letter ruling) for change in method of accounting be provided to the Applicant via fax (fax numbers provided below).

Applicant's Fax Number: (256) 340-2051, Attn: Shane Nobbley

#### Attachment to Form 3115

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### IF APPLICANT IS CHANGING TO DEDUCT REPAIR & MAINTENANCE, INSERT:

The adjustment represents repair and maintenance expenditures previously capitalized as of December 31, 2013, less accumulated depreciation deducted through December 31, 2013, and is a decrease to taxable income. The adjustment will be computed relying on analysis of actual documentation.

5 Year Property		-/+	
10 Year Property		-/+	
15 Year Property		-/+	
39 Year Property		-/+	
Subtotal	-	/-	-
		•	
10 Year Property		-/+	
39 Year Property		-/+	
Subtotal	-	/-	-
Less: §263A Adjustment		-/-	
Total	-	/4	0.00

no adjustment identified

### Attachment to Form 3115

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### IF APPLICANT IS CHANGING TO CAPITALIZE REPAIR & MAINTENANCE, INSERT:

The adjustment represents repair and maintenance expenditures previously deducted as of December 31, 2013, less proposed accumulated depreciation deducted through December 31, 2013, and is an increase to taxable income. The adjustment will be computed relying on analysis of actual documentation.

5 Year Property		-/+	
10 Year Property		-/+	
15 Year Property		-/+	
39 Year Property		-/+	
Subtotal	•	/+	-
10 Year Property		-/+	
39 Year Property		-/+	
Subtotal	•	/+	-
Plus: §263A Adjustment		-/+	
Total	-	/+	0.00

no adjustment identified

### Attachment to Form 3115

Repair and Maintenance Costs (Auto. Change #184)
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### IF APPLICANT IS CHANGING TO DEDUCT NON-INCIDENTAL OR INCIDENTAL MATERIALS & SUPPLIES, INSERT:

The adjustment represents material and supply expenditures previously capitalized as of December 31, 2013, less accumulated depreciation deducted through December 31, 2013, and is a decrease to taxable income. The adjustment will be computed relying on analysis of actual documentation.

5 Year Property		-/+	
10 Year Property		-/+	
15 Year Property		-/+	
39 Year Property		-/+	
Subtotal	•	/+	•
10 Year Property		-/+	
39 Year Property		-/+	
Subtotal	•	/+	•
Less: §263A Adjustment		-/+	
Total	-	/+	0.00

no adjustment identified