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Form 990



Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014

<b>B</b> Check if applicable <input type="checkbox"/> Address change  <input type="checkbox"/> Name change  <input type="checkbox"/> Initial return  <input type="checkbox"/> Final return/terminated  <input type="checkbox"/> Amended return  <input type="checkbox"/> Application pending	<b>C</b> Name of organization BOEING EMPLOYEES' CREDIT UNION		<b>D</b> Employer identification number  91-0219435	
	Doing business as BECU			
	Number and street (or P O box if mail is not delivered to street address) PO Box 97050	Room/suite	E Telephone number  (206) 439-5700	
	City or town, state or province, country, and ZIP or foreign postal code Seattle, WA 98124		<b>G</b> Gross receipts \$ 508,160,606	
	<b>F</b> Name and address of principal officer Katherine Elser 12770 Gateway Dr Tukwila, WA 98168		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)  <b>H(c)</b> Group exemption number ▶	
<b>I</b> Tax-exempt status <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( 14 ) ◀ (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
<b>J</b> Website: ▶ www.becu.org				
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation 1935	<b>M</b> State of legal domicile WA	

Part I	Summary																							
Activities & Governance	<b>1</b> Briefly describe the organization’s mission or most significant activities BECU is a cooperative society organized under Washington law as a nonprofit corporation for the purposes of promoting thrift among its members and creating a source of credit for them at fair and reasonable interest rates BECU is dedicated to the philosophy of "people helping people" and will strive to serve these members by providing superior financial products and services     																							
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets																							
	<table><tr><td><b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .</td><td><b>3</b></td><td>11</td></tr><tr><td><b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .</td><td><b>4</b></td><td>11</td></tr><tr><td><b>5</b> Total number of individuals employed in calendar year 2014 (Part V, line 2a) . . . . .</td><td><b>5</b></td><td>1,491</td></tr><tr><td><b>6</b> Total number of volunteers (estimate if necessary) . . . . .</td><td><b>6</b></td><td>13</td></tr><tr><td><b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .</td><td><b>7a</b></td><td>1,550,275</td></tr><tr><td><b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .</td><td><b>7b</b></td><td>860,288</td></tr></table>	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b>	11	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b>	11	<b>5</b> Total number of individuals employed in calendar year 2014 (Part V, line 2a) . . . . .	<b>5</b>	1,491	<b>6</b> Total number of volunteers (estimate if necessary) . . . . .	<b>6</b>	13	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	<b>7a</b>	1,550,275	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .	<b>7b</b>	860,288					
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b>	11																					
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Revenue	<table><tr><td><b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .</td><td><b>Prior Year</b></td><td><b>Current Year</b></td></tr><tr><td><b>9</b> Program service revenue (Part VIII, line 2g) . . . . .</td><td>0</td><td>0</td></tr><tr><td><b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .</td><td>496,415,637</td><td>471,849,801</td></tr><tr><td><b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td>32,366,772</td><td>35,548,882</td></tr><tr><td><b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .</td><td>229,908</td><td>414,935</td></tr><tr><td><b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . .</td><td>529,012,317</td><td>507,813,618</td></tr></table>	<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	<b>Prior Year</b>	<b>Current Year</b>	<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	0	0	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .	496,415,637	471,849,801	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	32,366,772	35,548,882	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	229,908	414,935	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . .	529,012,317	507,813,618	1,471,791	1,890,332			
	<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	<b>Prior Year</b>	<b>Current Year</b>																					
	<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	0	0																					
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Expenses	<table><tr><td><b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .</td><td>0</td><td>0</td></tr><tr><td><b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</td><td>98,525,907</td><td>104,372,352</td></tr><tr><td><b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .</td><td>0</td><td>0</td></tr><tr><td><b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶0</td><td></td><td></td></tr><tr><td><b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .</td><td>219,579,515</td><td>220,746,808</td></tr><tr><td><b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)</td><td>319,577,213</td><td>327,009,492</td></tr><tr><td><b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .</td><td>209,435,104</td><td>180,804,126</td></tr></table>	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	0	0	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	98,525,907	104,372,352	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	0	0	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶0			<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .	219,579,515	220,746,808	<b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	319,577,213	327,009,492	<b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .	209,435,104	180,804,126	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	0	0																					
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	98,525,907	104,372,352																					
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	0	0																					
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶0																							
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<b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .	209,435,104	180,804,126																						
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16) . . . . .	11,933,480,219	13,052,033,881																					
	<b>21</b> Total liabilities (Part X, line 26) . . . . .	10,793,499,358	11,750,795,047																					
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20 . . . . .	1,139,980,861	1,301,238,834																					

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	Signature of officer		2015-11-13	
	Date			
Paid Preparer Use Only	Tina Wallace VP Accounting/Controller			
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
Firm's name ▶		Firm's EIN ▶		
Firm's address ▶		Phone no		

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . ☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2014)

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☐

BECU is a cooperative society organized under Washington law as a nonprofit corporation for the purposes of promoting thrift among its members and creating a source of credit for them at fair and reasonable rates of interest. BECU is dedicated to the philosophy of "people helping people" and will strive to serve its members by providing superior financial products and services.

If "Yes," describe these new services on Schedule O

If "Yes," describe these changes on Schedule O






4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$
	Total 886,677 members, 87,381 new members for 2014, 121,821 loans originated totaling \$5,101,318,000			

[illegible][illegible]

4e	Total program service expenses	0
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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	Yes
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? If "Yes," complete Schedule C, Part II . . . . .	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III . . . . .	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I . . . . .	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . .	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV . . . . .	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . .	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a	Yes
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . .	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . .	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? 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 	11e	Yes
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f	Yes
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII . . . . .	12a	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	Yes
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . .	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . .	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . . 	21	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .	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	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . .	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? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . . 	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . . 	35b	Yes	
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

1a

Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable

1a

233

1b

Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

1b

0

1c

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1c

Yes

2a

Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return

2a

1,491

2b

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

3b

If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*

3b

Yes

4a

At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

4a

No

4b

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

5b

Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

5b

No

5c

If "Yes," to line 5a or 5b, did the organization file Form 8886-T?

5c

6a

Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?

6a

No

6b

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).

7a

Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?

7a

7b

If "Yes," did the organization notify the donor of the value of the goods or services provided?

7b

7c

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

7c

7d

If "Yes," indicate the number of Forms 8282 filed during the year

7d

7e

Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

7e

7f

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

7f

7g

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?

7g

7h

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

9b

Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?

9b

10

Section 501(c)(7) organizations. Enter

10a

Initiation fees and capital contributions included on Part VIII, line 12

10a

10b

Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

10b

11

Section 501(c)(12) organizations. Enter

11a

Gross income from members or shareholders

11a

11b

Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

11b

12a

Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

12a

12b

If "Yes," enter the amount of tax-exempt interest received or accrued during the year

12b

13

Section 501(c)(29) qualified nonprofit health insurance issuers.

13a

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

13b

Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

13b

13c

Enter the amount of reserves on hand

13c

14a

Did the organization receive any payments for indoor tanning services during the tax year?

14a

No

14b

If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*

14b

Form 990 (2014)

Part VI

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . . . .	11	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent . . . . .	11	
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	Yes
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
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body? . . . . .	8a	Yes
8b	Each committee with authority to act on behalf of the governing body? . . . . .	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates? . . . . .	10a	No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	11a	Yes
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . .		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	12b	Yes
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .	12c	Yes
13	Did the organization have a written whistleblower policy? . . . . .	13	Yes
14	Did the organization have a written document retention and destruction policy? . . . . .	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official . . . . .	15a	Yes
15b	Other officers or key employees of the organization . . . . .	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	16a	Yes
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	16b	No

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶Katherine Elser 12770 Gateway Drive Tukwila, WA 98168 (206) 439-5700

Part VII

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

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

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



## Part VII

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

<b>1b</b>	<b>Sub-Total . . . . .</b>	▼			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A . . . . .</b>	▼			
<b>d</b>	<b>Total (add lines 1b and 1c) . . . . .</b>	▼	10,516,002	0	682,639

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶221

		Yes	No
<b>3</b>	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>3</b>	No
<b>4</b>	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? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>4</b>	Yes
<b>5</b>	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	<b>5</b>	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.

(A) Name and business address	(B) Description of services	(C) Compensation
DNA Brand Mechanics 1932 1st Avenue Suite 711 Seattle, WA 98101	Branding & Advertising	6,680,907
Prime Valuation Services LLC PO Box 190 Hopkins, MN 55343	Residential Property Evaluations	1,258,782
IMG College LLC 540 N Trade St Winston Salem, NC 27101	Sponsorship Marketing	564,098
CU Student Choice Partners LLC 1001 Connecticut Ave NW Suite 1001 Washington, DC 20038	Student Loan Servicing	431,024
Widenet Consulting 11400 SE 6th St Suite 130 Bellevue, WA 98004	Consulting	251,622

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶27

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . . . .	1a0			
	b	Membership dues . . . . .	1b0			
	c	Fundraising events . . . . .	1c0			
	d	Related organizations . . . . .	1d0			
	e	Government grants (contributions)	1e0			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f0			
	g	Noncash contributions included in lines 1a-1f \$	0			
	h	Total. Add lines 1a-1f . . . . .	0			
Program Service Revenue	2a	Loan Interest Income	Business Code			
			522130	334,544,761	334,544,761	0
	b	Fee Income	522130	101,647,031	100,544,321	1,102,710
	c	Broker Income	523000	5,998,051	5,998,051	0
	d	Credit Life Insurance & AD&D Insurance	524298	2,232,536	2,232,536	0
	e					
	f	All other program service revenue		27,427,422	27,325,436	101,986
	g	Total. Add lines 2a-2f . . . . .	471,849,801			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .	35,548,882	0	0	35,548,882
	4	Income from investment of tax-exempt bond proceeds . . . . .	0	0	0	0
	5	Royalties . . . . .	0	0	0	0
	6a	Gross rents	(i) Real	(ii) Personal		
			416,344	0		
			b Less rental expenses	346,988	0	
			c Rental income or (loss)	69,356	0	
	d	Net rental income or (loss) . . . . .	69,356	69,356	0	0
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
			0	0		
			b Less cost or other basis and sales expenses	0	0	
			c Gain or (loss)	0	0	
	d	Net gain or (loss) . . . . .	0	0	0	0
	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c) See Part IV, line 18 . . . . .	a			
	b	Less direct expenses . . . . .	b			
	c	Net income or (loss) from fundraising events . . . . .				
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .	a			
	b	Less direct expenses . . . . .	b			
	c	Net income or (loss) from gaming activities . . . . .				
	10a	Gross sales of inventory, less returns and allowances . . . . .	a			
	b	Less cost of goods sold . . . . .	b			
	c	Net income or (loss) from sales of inventory . . . . .				
	Miscellaneous Revenue		Business Code			
	11a	CUSO Investments	900003	345,579	0	345,579
	b					
	c					
	d	All other revenue . . . . .		0	0	0
	e	Total. Add lines 11a-11d . . . . .	345,579			
	12	Total revenue. See Instructions . . . . .	507,813,618	470,714,461	1,550,275	35,548,882

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)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 . . . . .	1,890,332			
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 . . . . .	11,198,641			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0			
7	Other salaries and wages . . . . .	77,717,045			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	2,328,529			
9	Other employee benefits . . . . .	5,566,092			
10	Payroll taxes . . . . .	7,562,045			
11	Fees for services (non-employees)				
a	Management . . . . .				
b	Legal . . . . .	1,100,303			
c	Accounting . . . . .	1,563,703			
d	Lobbying . . . . .	111,898			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees . . . . .	355,472			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . . .	5,915,701			
12	Advertising and promotion . . . . .	14,852,521			
13	Office expenses . . . . .	14,154,800			
14	Information technology . . . . .	15,751,094			
15	Royalties . . . . .	0			
16	Occupancy . . . . .	13,940,195			
17	Travel . . . . .	1,028,609			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
19	Conferences, conventions, and meetings . . . . .	782,260			
20	Interest . . . . .	45,540,971			
21	Payments to affiliates . . . . .	0			
22	Depreciation, depletion, and amortization . . . . .	13,217,163			
23	Insurance . . . . .	699,226			
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	Provision for Loan Loss	14,214,488			
b	Product Cost & Servicing	66,471,486			
c					
d					
e	All other expenses	11,046,918			
25	Total functional expenses. Add lines 1 through 24e	327,009,492	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

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

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			177,684,706	1	171,343,267
	2	Savings and temporary cash investments			1,023,277,075	2	882,125,202
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net			7,374,730,621	7	8,284,980,534
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			12,578,419	9	14,659,734
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	226,564,455			
	b	Less: accumulated depreciation	10b	156,691,332	55,792,607	10c	69,873,123
	11	Investments—publicly traded securities			2,788,814,271	11	3,112,835,055
	12	Investments—other securities. See Part IV, line 11			25,978,790	12	25,454,569
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			474,623,730	15	490,762,397
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)			11,933,480,219	16	13,052,033,881
Liabilities	17	Accounts payable and accrued expenses			116,212,311	17	121,781,725
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			25,000,000	23	125,525,138
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D			10,652,287,047	25	11,503,488,184
	26	<b>Total liabilities.</b> Add lines 17 through 25			10,793,499,358	26	11,750,795,047
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>						
	27	Unrestricted net assets				27	
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 30 through 34.</b>						
	30	Capital stock or trust principal, or current funds			0	30	0
	31	Paid-in or capital surplus, or land, building or equipment fund			0	31	0
	32	Retained earnings, endowment, accumulated income, or other funds			1,139,980,861	32	1,301,238,834
	33	<b>Total net assets or fund balances</b>			1,139,980,861	33	1,301,238,834
	34	<b>Total liabilities and net assets/fund balances</b>			11,933,480,219	34	13,052,033,881

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	507,813,618
2	Total expenses (must equal Part IX, column (A), line 25)	2	327,009,492
3	Revenue less expenses Subtract line 2 from line 1	3	180,804,126
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,139,980,861
5	Net unrealized gains (losses) on investments	5	16,248,986
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-35,795,139
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,301,238,834

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?		No
3b	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		

Additional Data

Software ID: 14000267

Software Version: v1.00

EIN: 91-0219435

Name: BOEING EMPLOYEES' CREDIT UNION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Michael Sweeney ..... Board of Directors Chairperson	7 ..... 0	X						18,750	0	0
(1) David Yonce ..... Board of Directors Vice Chairperson	6 5 ..... 0	X						15,000	0	0
(2) Brian Abeel ..... Board of Directors Member	6 ..... 0	X						15,000	0	0
(3) Michelle Eten ..... Board of Directors Member & Audit Committee Member	6 5 ..... 0	X						15,000	0	0
(4) Porsche Everson ..... Board of Directors Member	6 ..... 0	X						15,000	0	0
(5) Denis Farmer ..... Board of Directors Member	6 ..... 0	X						13,750	0	0
(6) Robin Krueger ..... Board of Directors Member & Audit Committee Member	6 5 ..... 0	X						12,750	0	0
(7) Bill Longbrake ..... Board of Directors Member	6 ..... 0	X						11,250	0	0
(8) Roger Mauldin ..... Board of Directors Member	6 ..... 0	X						11,250	0	0
(9) Desiree Serr ..... Board of Directors Member	6 ..... 0	X						11,250	0	0
(10) Debra Somberg ..... Board of Directors Member	6 ..... 0	X						11,250	0	0
(11) Jim Wadhwani ..... Board of Directors Member & Audit Committee Member	6 5 ..... 0	X						5,667	0	0
(12) John Cann ..... Sr VP/General Counsel	40 ..... 0	X		X				474,892	0	21,300
(13) Katherine Elser ..... Sr VP Finance/CFO	40 ..... 0	X		X				419,153	0	20,317
(14) John Porter ..... President/CEO	40 ..... 0			X				951,362	0	31,288
(15) Thomas Berquist ..... Sr VP Member Strategies	40 ..... 0			X				563,315	0	24,540
(16) Michael Strand ..... Sr VP Member Operations	40 ..... 0			X				419,098	0	23,056
(17) Anne Shannon ..... Sr VP Human Resources	40 ..... 0			X				359,955	0	20,215
(18) Douglas Marshall ..... Sr VP MCSD	40 ..... 0			X				346,844	0	14,683
(19) Thomas Morgan ..... Sr VP/CIO	40 ..... 0			X				95,191	0	8,263
(20) Weldon Leonardson ..... Sr VP/CIO	0 ..... 0			X				465,878	0	20,584
(21) Grace Semingsen ..... Sr VP Member Solutions	0 ..... 0			X				419,617	0	23,721
(22) Anastasia Wyss-Schoenborn ..... VP Member Solutions	0 ..... 0				X			291,680	0	13,818
(23) Michael Quamma ..... VP Treasury	40 ..... 0				X			284,763	0	22,025
(24) Mark Thomson ..... VP Compliance	40 ..... 0				X			259,533	0	21,042

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(26) Dana Gray ..... VP Small Business	40 ..... 0				X			256,144	0	17,504
(1) Jesse Douglas ..... VP Program Management	40 ..... 0				X			246,081	0	15,170
(2) Melanie Walsh ..... VP SRCC	40 ..... 0				X			243,820	0	23,577
(3) Shawn Mulqueoney ..... VP Acctg/Controller	40 ..... 0				X			240,279	0	18,759
(4) Stephen Black ..... VP Marketing	40 ..... 0				X			238,265	0	15,857
(5) Carolyn Cereghino ..... VP BECU Investment Svcs	40 ..... 0				X			237,609	0	18,341
(6) Carol Friend ..... VP Portfolio Mgmt	40 ..... 0				X			230,134	0	15,937
(7) Kyle Welsh ..... VP Technology Services	40 ..... 0				X			228,929	0	21,501
(8) Boyd Vanderleest ..... VP Lending	40 ..... 0				X			228,865	0	17,300
(9) Gregg Kats ..... VP Administration	40 ..... 0				X			223,752	0	20,811
(10) Sara Moorehead ..... VP Cooperative Affairs	40 ..... 0				X			222,516	0	21,618
(11) Seclinda Davenport ..... VP Trust Services	40 ..... 0				X			221,243	0	18,882
(12) Pamela O'Conner ..... VP Total Rewards	40 ..... 0				X			218,136	0	24,007
(13) Timothy Bates ..... VP Enterprise Risk Mgmt	40 ..... 0				X			214,740	0	20,417
(14) Angela Ursino ..... VP Talent Management	40 ..... 0				X			208,762	0	20,017
(15) Howard Wu ..... VP Digital	40 ..... 0				X			207,809	0	24,662
(16) Robert Stroup ..... VP Member Strategies	40 ..... 0				X			193,250	0	19,738
(17) Robert Gatlin ..... Dir Capital Plan and ALM	40 ..... 0					X		222,293	0	10,605
(18) William Taylor ..... Associate General Counsel	40 ..... 0					X		222,227	0	24,237
(19) Todd Crawford ..... Financial Advisor	40 ..... 0					X		228,078	0	14,618
(20) Jaime Suarez ..... Financial Advisor	40 ..... 0					X		231,420	0	16,751
(21) Michael Rackner ..... Director Investment Services Sales	40 ..... 0					X		244,452	0	17,478

**TY 2014 Reasonable Cause Explanation**

**Name:** BOEING EMPLOYEES' CREDIT UNION

**EIN:** 91-0219435

**Software ID:** 14000267

**Software Version:** v1.00

**Explanation:** Due to staffing changes, extensive amount of information that needs to be prepared, and to coincide the preparation of Form 990 with Form 990-T for which an automatic 6 month extension (until November 15, 2015) has already been automatically granted. Extension 8868 was filed and mailed on 8/12/2015



SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**

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

***www.irs.gov/form990.***

OMB No 1545-0047

2014

Open to Public Inspection

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization BOEING EMPLOYEES' CREDIT UNION	Employer identification number 91-0219435
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ 33,900
3	Volunteer hours	0

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$	
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?		<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV		

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$	33,900
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$	0
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$	33,900
4	Did the filing organization file <b>Form 1120-POL</b> for this year?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV		

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
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See Additional Data Table				

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i.			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912.			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

1	Were substantially all (90% or more) dues received nondeductible by members?	1	Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
Schedule C, Part I-A, Line 1	During 2014, BECU contributed primarily to the election campaigns of various individuals running for Washington State elected positions.

[illegible]

Additional Data

Software ID: 14000267

Software Version: v1.00

EIN: 91-0219435

Name: BOEING EMPLOYEES' CREDIT UNION

Form 990, Schedule C, Part 1-C, Line 5

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's own internal funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
House Democratic Campaign Committee	1000 Aurora Ave N Suite 100 Seattle, WA 98109	916178946	950	0
House Republican Organizational Committe	Po Box 7222 Olympia, WA 98507	916177625	950	0
Senate Republican Campaign Committee	Po Box 11025 Olympia, WA 98508	910987396	950	0
Frends of Karen Keiser	Po Box 13290 Des Moines, WA 981988937	911947669	750	0
People for Zach Hudgins	4512 S 136th St Tukwila, WA 98168	810555017	700	0
Friends of Santos	Po Box 78606 Seattle, WA 98178	911913482	700	0
Citizens for Pam Roach	Po Box 682 Auburn, WA 98071	263590667	950	0
Steve Kirby Campaign	9415 Tacoma Ave S Tacoma, WA 98444	911000906	900	0
Committee to Elect Steve Hobbs	3309 114th Dr Ne Lake Stevens, WA 98258	204733784	1150	0
Citizens for Christopher Hurst	62504 Indian Summer Way E Enumclaw, WA 98022	010841227	800	0
Senate Democratic Campaign Committee	1000 Aurora Ave N Suite 100 Seattle, WA 98109	462614068	950	0
Friends of Sharon Nelson	7318 Sw 258th Pl Vashon, WA 98070	261377785	1450	0
Friends of Jeanne Kohl-Welles	Po Box 9100 Seattle, WA 98109	911559456	700	0
Committee to Elect Tim Sheldon	Po Box G Hoodspport, WA 98548	203465831	1450	0
Committee to Elect Jim Honeyford	Po Box 844 Sunnyside, WA 98944	911561953	800	0
Frends of Larry Springer	700 20th Ave W Kirkland, WA 98033	830382872	900	0
Frends of Tina Orwall	17837 1st Ave S Normandy Park, WA 98148	453602805	800	0
Friends of Cary Condotta	3024 GC Center Rd Suite C Wenatchee, WA 98801	710896890	800	0
Friends for Cindy Ryu	Po Box 33548 Seattle, WA 981330548	202771557	700	0
Committee to Re-Elect Brian Blake	Po Box 1541 Longview, WA 98632	870699800	400	0
Committee to Elect Kevin Parker	Po Box 198 Spokane, WA 99210	260348064	700	0
Friends of David Sawyer	1002 S 94th St Tacoma, WA 98444	453660584	750	0
Frends of Cyrus Habib	929 109th Ave Ne Bellevue, WA 98004	900791775	350	0
Friends of Joe Fain	Po Box 7809 Covington, WA 98042	271654871	1000	0
Citizens for Andy Hill	23515 Ne Novelty Hill Rd Suite B221 170 Redmond, WA 98053	272057163	900	0
Bruce Chandler Campaign	Po Box 1108 Zillah, WA 98953	912066326	-250	0
Committee to Re-elect Jt Wilcox	Po Box 747 McKenna, WA 98558	270758934	850	0
Re-Elect Susan Fagan	Po Box 1471 Pullman, WA 99163	264513295	400	0
Re-Elect Pat Sullivan	26513 168th Pl Se Covington, WA 98042	040367943	1250	0
Frends of Graham Hunt	Po Box 2185 Orting, WA 98360	453773063	700	0

**Form 990, Schedule C, Part 1-C, Line 5**

<b>(a)</b> Name	<b>(b)</b> Address	<b>(c)</b> EIN	<b>(d)</b> Amount paid from filing organization's own internal funds. If none, enter -0-	<b>(e)</b> Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
Friends of Dan Kristiansen	Po Box 2007 Snohomish, WA 98291	272323842	1250	0
Elect Jessyn Farrell	Po Box 20792 Seattle, WA 98102	454799110	400	0
Friends of David Frockt	Po Box 2114 Seattle, WA 98111	271548039	800	0
Friends of Steve O'Ban	Po Box 65335 University Place, WA 98464	271992105	1000	0
Jan Angel for Senate	5184 Granada Pl Se Port Orchard, WA 98367	461415980	1050	0
Marko for Senate	Po Box 821 Mukilteo, WA 98275	260696977	800	0
Re-Elect Steve Berquist	Po Box 2050 Renton, WA 980560050	454489263	400	0
Elect Larry Seaquist	Po Box 821 Gig Harbor, WA 98335	204220154	850	0
Friends of Drew Stokesbary	Po Box 92 Auburn, WA 98071	465287065	800	0
Friends of Monique Trudnowski	3800 Bridgeport Way W Suite A 260 University Place, WA 98466	352492025	500	0
Friends of Joan McBride	Po Box 2707 Redmond, WA 98073	464600895	800	0
FRIENDS OF LILLIAN ORTIZ-SELF	Po Box 581 Mukilteo, WA 98275	463819721	400	0
FRIENDS OF PRAMILA JAYAPAL	Po Box 28505 Seattle, WA 98118	465109458	450	0

SCHEDULE D  
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

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

Name of the organization BOEING EMPLOYEES' CREDIT UNION	Employer identification number 91-0219435
--	--

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► \_\_\_\_\_

4

Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► \_\_\_\_\_

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ \_\_\_\_\_

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X

► \$ \_\_\_\_\_

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

b

Assets included in Form 990, Part X

► \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

- 3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII and complete the following table
- c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	
- 2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance . . . . .					
b Contributions . . . . .					
c Net investment earnings, gains, and losses					
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .					
f Administrative expenses . . . . .					
g End of year balance . . . . .					

- 2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a

Board designated or quasi-endowment
- b

Permanent endowment
- c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations . . . . .

3a(i)

Yes

No

(ii) related organizations . . . . .

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

No

4

Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .	0	14,597,956		14,597,956
b Buildings . . . . .	0	56,979,400	28,553,640	28,425,760
c Leasehold improvements . . . . .	0	28,824,672	20,571,118	8,253,554
d Equipment . . . . .	0	121,118,034	106,761,923	14,356,111
e Other . . . . .	0	5,044,393	804,651	4,239,742
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				69,873,123

Schedule D (Form 990) 2014





**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
Schedule D, Part X, Line 2	The Credit Union is exempt by statute from federal income taxes under the provisions of Section 501 of the Internal Revenue Code of 1954, however, the Credit Union's unrelated business income and subsidiaries are subject to federal income taxes. There were no significant income taxes for the years ended December 31, 2014 or 2013. Accounting principles prescribe a recognition threshold and measurement attribute for the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. The Credit Union had no unrecognized tax positions at December 31, 2014 or 2013. It is the Credit Union's policy to record any penalties or interest arising from federal or state taxes as a component of non interest expense. The Credit Union files exempt organization and unrelated business income tax returns with the federal jurisdiction. The Credit Union is no longer subject to United States federal income tax examination by tax authorities for the years ended before December 31, 2011.

[illegible]

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

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

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public  
Inspection

Name of the organization  
BOEING EMPLOYEES' CREDIT UNION

Employer identification number  
91-0219435

Part I

General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

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

32

3

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

3

**Part III**

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

**Part IV**

**Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
Schedule I, Part I, Line 2	Schedule I, Part I, Line 2 - BECU generally asks each of our non-profit grant or donation recipients to provide periodic updates. Periodically, BECU will conduct on site visits of grant recipients as well. BECU's gift matching guidelines require the donee organization to provide proof of receipt of funds and their tax identification number.

Additional Data

Software ID: 14000267  
Software Version: v1.00  
EIN: 91-0219435  
Name: BOEING EMPLOYEES' CREDIT UNION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Red Cross2025 East St Washington, DC 20006	53-0196605	501 C 3	11,508				Donation/Employee Gift Match

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANTIOCH UNIVERSITY 2326 Sixth Avenue Seattle, WA 98121	31-0536640	501 C 3	9,000				Donation/Employee Gift Match

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BECU Foundation12770 Gateway Drive Tukwila, WA 98168	91-1703337	501 C 3	278,685	28,920	Actual Cost	Donation of consulting services	Cash contributions and non-cash consulting services donated provide administrative operations for the BECU Foundation



Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELLEVUE COLLEGE FOUNDATION3000 Landerholm Circle SE No A101 Bellevue, WA 98007	91-1051671	501 C 3	12,600				Donation/Employee Gift Match

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Camp Korey28901 NE Carnation Farm Rd Carnation, WA 98014	20-3829742	501 C 3	5,100				Donation/Employee Gift Match

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Compass HealthPO Box 3810 MS 49 Everett, WA 98213	91-1180810	501 C 3	20,000				Donation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
El Centro de la Raza2524 16th Avenue South Seattle, WA 98144	91-0899927	501 C 3	20,000				Donation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Habitat for Humanity-KingC 560 Naches Ave SW Suite 110 Renton, WA 98057	91-1342397	501 C 3	50,000				Donation/Employee Gift Match

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Pioneer Human ServicesPO Box 18377 Seattle,WA 98118	91-0791552	501 C 3	20,000				Donation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Washington Homeownership Resource17544 Midvale Avenue N Shoreline, WA 98133	91-1669492	501 C 3	20,000				Donation

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Seattle Children's Hospital PO Box 5371 Seattle,WA 98145	94-3102280	501 C 3	10,000				Donation



Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY SCHOOLS COLLABORATION137 SW 154th Street Burien,WA 98166	20-0139255	501 C 3	10,000				Donation/Employee Gift Match

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EXPRESS ADVANTAGE 1741 4th Ave S Seattle, WA 98134	61-1575044	501 C 3	273,650				Donation/Employee Gift Match

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Express Credit UnionPO BOX 94286Seattle,WA 98124	91-0573334	501 C 14	150,000				Financial Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FORTERRA901 5th Avenue Suite 2200 Seattle, WA 98164	94-3112461	501 C 3	15,000				Donation/Employee Gift Match

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Highline College Foundation PO Box 98000 Misc 99-248 Des Moines, WA 98198	23-7428279	501 C 3	7,500				Need Based Scholarship

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOUSING HOPE5830 Evergreen Way Everett, WA 98203	94-3060709	501 C 3	55,000				Donation/Employee Gift Match

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IMPACT CAPITAL401 Second Ave Suite 301 Seattle,WA 98104	94-3196958	501 C 3	50,000				Community Development Grant - Housing Initiatives

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Junior Achievement1700 Westlake Ave N Suite 400 Seattle, WA 98109	91-0604913	501 C 3	32,500				Donation/Employee Gift Match



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lifelong AIDS Alliance1002 East Seneca St Seattle, WA 98122	91-1215715	501 C 3	30,350				Housing Grant/Employee Gift Match

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARY'S PLACEPO Box 1711 Seattle,WA 98111	27-2087950	501 C 3	10,000				Donation to No Child Sleeps Outside Program

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Museum of Flight9404 East Marginal Way South Seattle, WA 98108	91-0785826	501 C 3	10,000				Donation/Employee Gift Match

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
National Association of State Credit Union Council1655 Fort Myer Dr Ste 650 Arlington, VA 22209	54-1167527	501 C 6	10,000				Donation

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL CREDIT UNION FOUNDATION-2710 Mineral Point Rd Madison,WI 53705	39-1383650	501 C 3	7,500				Donation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northwest Credit Union Association18000 International Blvd Suite 350 SeaTac, WA 98188	91-0460483	501 C 3	100,000				Donation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
One Days WagesPO Box 19535 Seattle,WA 98109	26-2566653	501 C 3	5,260				Donation/Employee Gift Match

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OUTREACH & RESOURCE SERVICES FOR WOMEN VETERANS10002 Aurora Ave N Ste 36-597 Seattle,WA 98133	45-5619578	501 C 3	15,000				Donation



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PINCHOT UNIVERSITY220 2nd Avenue S Suite 400 Seattle, WA 98104	91-2157623	501 C 3	50,000				Donation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REBUILDING TOGETHER SOUTH SOUND1423 East 29th St Tacoma, WA 98404	91-2147601	501 C 3	20,000				Donation/Employee Gift Match

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TABOR1002330 130th Avenue NE Suite 101 Bellevue, WA 98005	91-2013635	501 C 3	5,500				Green Energy Scholarship

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE NORTHWEST BAPTIST FEDERAL CREDIT UNION 1823 E Madison St Courtyard Suite 1604 Seattle,WA  98122	91-6029305	501 C 1	20,000				Donation

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TULIP CO-OP CREDIT UNIONPO BOX 1243 Olympia,WA 98507	42-1607163	501 C 14	55,000				Financial support

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VINE MAPLE PLACEPO Box 1092 Maple Valley,WA 98038	91-2082308	501 C 3	10,000				Donation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Washington Business Week 33305 1st Ave S Suite B-212 Federal Way, WA 98003	91-1048245	501 C 3	10,000				Donation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Worldwide Foundation for Credit Unions5710 Mineral Point Road Madison, WI 53705	39-1383650	501 C 3	15,000				Donation Disaster Relief



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](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
BOEING EMPLOYEES' CREDIT UNION

Employer identification number  
91-0219435

Part I

Questions Regarding Compensation

	Yes	No
<div><div>1a</div><div>Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</div><div><div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input checked="" type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div></div>		
<div><div>b</div><div>If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.</div></div>	Yes	
<div><div>2</div><div>Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</div></div>	Yes	
<div><div>3</div><div>Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</div><div><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div><div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div></div>		
<div><div>4</div><div>During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:</div></div>		
<div><div>a</div><div>Receive a severance payment or change-of-control payment?</div></div>		No
<div><div>b</div><div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div></div>	Yes	
<div><div>c</div><div>Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</div>		No
<div><div></div><div>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</div></div>		
<div><div>5</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</div></div>		
<div><div>a</div><div>The organization?</div></div>		
<div><div>b</div><div>Any related organization?</div></div> <div>If "Yes," to line 5a or 5b, describe in Part III.</div>		
<div><div>6</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</div></div>		
<div><div>a</div><div>The organization?</div></div>		
<div><div>b</div><div>Any related organization?</div></div> <div>If "Yes," to line 6a or 6b, describe in Part III.</div>		
<div><div>7</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</div></div>		
<div><div>8</div><div>Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</div></div>		
<div><div>9</div><div>If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</div></div>		

**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 W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

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, Part I, Line 1a	Travel for companions was paid in certain pre-approved circumstances for the CEO and SVPs. Membership fees for Michael Strand to Rainier Golf & Country Club, membership fees for Weldon Leonardson to Columbia Tower Club and membership fees for Seclinda Davenport to Harbor Club. Payroll taxes were paid on behalf of Weldon Leonardson and Grace Semingsen pertaining to the imputed income on their unqualified defined benefit trustee's supplementary executive retirement plan (SERP) vested benefit balance.
Schedule J, Part I, Line 3	Market compensation data will be gathered for the President's position and the other executive positions by the Senior Vice President of Human Resources as part of the annual compensation analysis. The compensation data for the President's position will be provided to the Compensation Committee for developing a recommendation to the Board of Directors regarding any compensation adjustment. The Compensation Committee may engage third party consultants to assist with the CEO compensation review and recommendations. The executive compensation data will be provided to the President for determining adjustments for the other executive positions. The market data will also be used to determine any changes or adjustments for the executive compensation package. The compensation data will be gathered using a variety of industry survey sources and data segments which are then validated by a third party. BECU's compensation program is administered by the Human Resources Department and is audited by BECU's Audit Services Department.
Schedule J, Part I, Line 4	The following individuals participated in a non-qualified supplemental retirement plan "SERP" in 2014: John Porter, Parker Cann, Weldon Leonardson, Michael Strand, Katherine Elser, Tom Berquist, Grace Semingsen, Anne Shannon, and Doug Marshall.

Additional Data

Software ID: 14000267

Software Version: v1.00

EIN: 91-0219435

Name: BOEING EMPLOYEES' CREDIT UNION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 John Porter, President/CEO	(i) (ii)	571,154 0	366,795 0	13,413 0	8,750 0	22,538 0	982,650 0	0 0
1 Thomas Berquist, Sr VP Member Strategies	(i) (ii)	268,452 0	292,801 0	2,063 0	8,186 0	16,354 0	587,856 0	0
2 John Cann, Sr VP/General Counsel	(i) (ii)	332,452 0	136,500 0	5,940 0	10,032 0	11,268 0	496,192 0	0
3 Katherine Elser, Sr VP Finance/CFO	(i) (ii)	299,308 0	118,440 0	1,405 0	8,250 0	12,067 0	439,470 0	0
4 Michael Strand, Sr VP Member Operations	(i) (ii)	299,308 0	118,440 0	1,350 0	8,750 0	14,306 0	442,154 0	0
5 Anne Shannon, Sr VP Human Resources	(i) (ii)	253,769 0	104,160 0	2,025 0	7,762 0	12,452 0	380,168 0	0
6 Douglas Marshall, Sr VP MCSD	(i) (ii)	268,327 0	74,712 0	3,805 0	2,825 0	11,858 0	361,527 0	0
7 Thomas Morgan, Sr VP/CIO	(i) (ii)	46,154 0	48,441 0	595 0	0 0	8,263 0	103,453 0	0
8 Weldon Leonardson, Sr VP/CIO	(i) (ii)	281,250 0	118,941 0	65,687 0	8,555 0	12,029 0	486,462 0	0
9 Grace Semingsen, Sr VP Member Solutions	(i) (ii)	254,808 0	108,441 0	56,367 0	7,792 0	15,929 0	443,337 0	0
10 Anastasia Wyss-Schoenborn, VP Member Solutions	(i) (ii)	100,842 0	65,970 0	124,868 0	5,163 0	8,655 0	305,498 0	0
11 Michael Quamma, VP Treasury	(i) (ii)	231,308 0	52,104 0	1,351 0	3,587 0	18,438 0	306,788 0	0
12 Mark Thomson, VP Compliance	(i) (ii)	207,692 0	48,800 0	3,041 0	7,695 0	13,347 0	280,575 0	0
13 Dana Gray, VP Small Business	(i) (ii)	204,038 0	50,472 0	1,634 0	4,875 0	12,629 0	273,648 0	0
14 Jesse Douglas, VP Program Management	(i) (ii)	193,978 0	47,889 0	4,215 0	6,158 0	9,012 0	261,252 0	0
15 Melanie Walsh, VP SRCC	(i) (ii)	197,390 0	45,784 0	647 0	7,295 0	16,281 0	267,397 0	0
16 Shawn Mulqueeney, VP Acctg/Controller	(i) (ii)	193,894 0	45,140 0	1,245 0	5,320 0	13,438 0	259,037 0	0
17 Stephen Black, VP Marketing	(i) (ii)	190,295 0	46,980 0	991 0	4,390 0	11,467 0	254,123 0	0
18 Carolyn Cereghino, VP BECU Investment Svcs	(i) (ii)	189,138 0	47,046 0	1,425 0	6,886 0	11,455 0	255,950 0	0
19 Carol Friend, VP Portfolio Mgmt	(i) (ii)	182,773 0	44,705 0	2,656 0	5,483 0	10,454 0	246,071 0	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21 Kyle Welsh, VP Technology Services	(i) 182,906 (ii) 0	45,428 0	596 0	5,811 0	15,690 0	250,431 0	0
1 Boyd Vanderleest, VP Lending	(i) 184,909 (ii) 0	42,954 0	1,002 0	6,615 0	10,686 0	246,166 0	0
2 Gregg Kats, VP Administration	(i) 180,702 (ii) 0	41,486 0	1,563 0	3,125 0	17,686 0	244,562 0	0
3 Sara Moorehead, VP Cooperative Affairs	(i) 185,538 (ii) 0	34,290 0	2,688 0	5,138 0	16,481 0	244,135 0	0
4 Seclinda Davenport, VP Trust Services	(i) 165,629 (ii) 0	54,714 0	899 0	4,324 0	14,557 0	240,123 0	0
5 Pamela O'Conner, VP Total Rewards	(i) 174,711 (ii) 0	40,776 0	2,649 0	5,241 0	18,765 0	242,142 0	0
6 Timothy Bates, VP Enterprise Risk Mgmt	(i) 185,192 (ii) 0	28,466 0	1,081 0	5,342 0	15,075 0	235,156 0	0
7 Angela Ursino, VP Talent Management	(i) 169,998 (ii) 0	37,838 0	926 0	6,235 0	13,782 0	228,779 0	0
8 Howard Wu, VP Digital	(i) 167,377 (ii) 0	39,695 0	737 0	5,345 0	19,317 0	232,471 0	0
9 Robert Stroup, VP Member Strategies	(i) 156,502 (ii) 0	35,595 0	1,153 0	5,763 0	13,975 0	212,988 0	0
10 Robert Gatlin, Dir Capital Plan and ALM	(i) 91,346 (ii) 0	130,576 0	372 0	1,575 0	9,030 0	232,899 0	0
11 William Taylor, Associate General Counsel	(i) 193,380 (ii) 0	26,178 0	2,669 0	5,801 0	18,436 0	246,464 0	0
12 Todd Crawford, Financial Advisor	(i) 95,810 (ii) 0	131,704 0	565 0	6,817 0	7,801 0	242,697 0	0
13 Jaime Suarez, Financial Advisor	(i) 58,444 (ii) 0	169,981 0	2,995 0	6,844 0	9,907 0	248,171 0	0
14 Michael Rackner, Director Investment Services Sales	(i) 131,370 (ii) 0	112,310 0	772 0	6,834 0	10,644 0	261,930 0	0
15 Michael Sweeney, Board of Directors Chairperson	(i) 18,750 (ii) 0	0 0	0 0	0 0	0 0	18,750 0	0
16 David Yonce, Board of Directors Vice Chairperson	(i) 15,000 (ii) 0	0 0	0 0	0 0	0 0	15,000 0	0
17 Brian Abeel, Board of Directors Member	(i) 15,000 (ii) 0	0 0	0 0	0 0	0 0	15,000 0	0
18 Michelle Eten, Board of Directors Member & Audit Committee Member	(i) 15,000 (ii) 0	0 0	0 0	0 0	0 0	15,000 0	0
19 Porsche Everson, Board of Directors Member	(i) 15,000 (ii) 0	0 0	0 0	0 0	0 0	15,000 0	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
41 Denis Farmer, Board of Directors Member	(i)	13,750	0	0	0	0	13,750	0
	(ii)	0	0	0	0	0	0	
1 Robin Krueger, Board of Directors Member & Audit Committee Member	(i)	12,750	0	0	0	0	12,750	0
	(ii)	0	0	0	0	0	0	
2 Bill Longbrake, Board of Directors Member	(i)	11,250	0	0	0	0	11,250	0
	(ii)	0	0	0	0	0	0	
3 Roger Mauldin, Board of Directors Member	(i)	11,250	0	0	0	0	11,250	0
	(ii)	0	0	0	0	0	0	
4 Desiree Serr, Board of Directors Member	(i)	11,250	0	0	0	0	11,250	0
	(ii)	0	0	0	0	0	0	
5 Debra Somberg, Board of Directors Member	(i)	11,250	0	0	0	0	11,250	0
	(ii)	0	0	0	0	0	0	
6 Jim Wadhwani, Board of Directors Member & Audit Committee Member	(i)	5,667	0	0	0	0	5,667	0
	(ii)	0	0	0	0	0	0	

Schedule L  
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2014

Open to Public Inspection

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ▶ Attach to Form 990 or Form 990-EZ.

▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization  
BOEING EMPLOYEES' CREDIT UNION

Employer identification number  
91-0219435

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b				
1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?
				YesNo

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$

Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27.				
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

**Part IV Business Transactions Involving Interested Persons.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) CO-OP Financial Services	BECU CEO Porter Benson is Board Member	5,629,696	ATM Remote Services Fees		No
(2) Member Loyalty Group	BECU Officer Grace Semingsen is Board Chairperson	133,453	Customer Loyalty Metrics		No
(3) Credit Union Student Choice	BECU Officer Tom Berquist is Board Member	431,024	Student loan origination & management		No
(4) Northwest Credit Union Alliance	BECU Officer Grace Semingsen is Board Member	160,788	Net ATM interchange expense		No

**Part V Supplemental Information**  
Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.  
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization BOEING EMPLOYEES' CREDIT UNION	Employer identification number  91-0219435
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990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part I, Line 1	
Form 990, Part V, Line 3b	BECU has filed IRS Form 8868 requesting an automatic 6 month extension to file the 2014 990-T. The extended due date to file the 2014 990-T is November 15, 2015.
Form 990, Part VI, Section A, Line 4	The Articles of Incorporation were amended to limit Director liability and provide for the indemnification of Directors and other persons, as detailed in the Bylaws. The Bylaws were amended to reduce the size of the Board of Directors from 12 to 11 members and reduce the size of the Audit Committee from 6 to 5 members.
Form 990, Part VI, Section A, Line 6	BECU is a cooperative society organized under Washington law as a nonprofit corporation for the purposes of promoting thrift among its members and creating a source of credit for them at fair and reasonable rates of interest. Membership at BECU is limited to those persons listed in the Field of Membership Appendix to the Bylaws. At all meetings each member with one or more fully paid shares will have one vote subject to certain conditions.
Form 990, Part VI, Section A, Line 7a	BECU is a cooperative society organized under Washington law as a nonprofit corporation for the purposes of promoting thrift among its members and creating a source of credit for them at fair and reasonable rates of interest. Membership at BECU is limited to those persons listed in the Field of Membership Appendix to the Bylaws. At all meetings each member with one or more fully paid shares will have one vote subject to certain conditions.
Form 990, Part VI, Section B, Line 11b	CFO and Controller review Form 990 prior to filing. A copy of the final version of the Form 990 is distributed to each board member before it is filed for informational purposes.
Form 990, Part VI, Section B, Line 12c	The Board along with all employees affirms their adherence to BECU's conflict of interest requirements in writing on a yearly basis (called "Annual Code of Ethics Affirmation" form). Audit Services and Security Risk monitor for ethics violations through anonymous hot lines and emails. The Audit Committee issues a yearly "whistleblower" letter to all employees encouraging them to report any fraud or abuse by employees or Board Members. Also, along with the yearly re-affirmation of our Code of Ethics, there is a required ethics refresher course. The Code of Ethics policy outlines who and how conflicts are determined and requirements for disclosure if there is an actual or perceived conflict.
Form 990, Part VI, Section B, Line 15	BECU's executive compensation process includes the following: Annual market analysis which benchmarks each executive position with similar positions in national and regional surveys. The data for the President/CEO position is provided to the Compensation Committee of the Board of Directors for adjustment recommendation and approval to the Board of Directors. The data for senior executive positions is provided to the President/CEO for any recommended adjustments. The President/CEO determines annual salary adjustments for each executive by considering responsibilities of the position, individual's experience, performance, career progress and development within the executive salary range. Market analysis is performed each year. BECU's compensation program is administered by the Human Resources Department and is audited by BECU's Audit Services Department.
Form 990, Part VI, Section C, Line 19	BECU's Bylaws, Corporate Governance Overview and financial reports are posted and available to the public on the becu.org website. BECU's financial data is also available to the public via the NCUA website.
Form 990, Part XI, Line 9	Other Comprehensive Income Pension & SERP benefit plans

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
BOEING EMPLOYEES' CREDIT UNION

Related Organizations and Unrelated Partnerships

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

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

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

91-0219435

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) BECU Foundation 12770 Gateway Drive  Tukwila, WA 98168 91-1703337	Scholarships	WA	501(c)(3)	9 PF	N/A		

Part III

Identification of Related Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) Charitable Lead Unitrust  12770 Gateway Drive Tukwila, WA 98168	Charitable to NCUF	WA	Boeing Employees' Credit Union	T				Yes	

Part V

Transactions With Related Organizations

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

Yes

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

Yes

1m

No

1n

Yes

1o

Yes

1p

No

1q

No

1r

No

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) BECU Foundation	b	307,605	Actual amount

Schedule R (Form 990) 2014

**Part VI** **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.  
Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

**Part VII**   **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
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