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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2016

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

Open to Public

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service Inspection ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2016 calendar year, or tax year beginning C Name of organization Abbey Credit Union Inc D Employer Identification number Check if applicable 31-0329725 Address change Doing business as Number and street (or P O. box if mail is not delivered to street address) Room/suite E Telephone number Name change 937-898-7800 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminate Vandalia, OH 45377 Amended return G Gross receipts \$ F Name and address of principal officer. Dean Pielemeier H(a) Is this a group return for subordinates? Yes No Application pending 800 Falls Creek Drive, Vandalia, OH 45377 H/b) Are all subordinates included? Tyes No. If "No," attach a list, (see instructions) 501(c)(3) Tax-exempt status www abbeycu com Website: ▶ H(c) Group exemption number ▶ ОН Form of organization Corporation Trust M State of legal domicile Association ☐ Other ► L Year of formation: Part I Summary Briefly describe the organization's mission or most significant activities: See Schedule O Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 3 Number of voting members of the governing body (Part VI, line 1a). Number of independent voting members of the governing body (Part VI, line 1b) 9 Activities & 4 24 5 Q 6 6 18.752 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 7b Net unrelated business taxable income from Form 990-T line 34 Current Year 8 Contributions and grants (Part VIII, line 1h) 12 OGDEN 3.796.023 4.004.805 9 Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 35 Earth 7d) C.E. CF.N.T.E.R.

Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11c). 373,753 403,205 10 11 4,408,010 4,169,776 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 453,484 432,989 14 Benefits paid to or for members (Part IX, column (A), line 4) 1.092.613 1,266,593 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 2.439.561 2,466,689 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 4,166,270 3,985,658 18 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) 241,740 184,118 19 Revenue less expenses. Subtract line 18 from line 12 End of Year Beginning of Current Year 86,615,880 88,558,917 Total assets (Part X, line 16) 81,511,266 79,756,919 21 Total liabilities (Part X, line 26) . 6.858,961 7,047,651 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjuny Teclare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is than officer) is based on all information of which preparer has any knowledge. true, correct, and comp Sign Here Type or print name and title Date Print/Type preparer's name Preparer's signature Paid Check I If self-employed **Preparer** Firm's EIN ▶ Use Only 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.

Form 99	90 (2016) Page 2
Part	
1	Check if Schedule O contains a response or note to any line in this Part III
4	SEE SCHEDULE O
	•••••••••••••••••••••••••••••••••••••••
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	If "Yes," describe these changes on Schedule O.
•	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others
	the total expenses, and revenue, if any, for each program service reported.
4-	(O-d-)
4a	(Code:) (Expenses \$ including grants of \$) (Revenue \$) LENDING - ABBEY PROVIDES PERSONAL, VEHICLE, MORTGAGE, AND CREDIT CARD LOANS TO ITS MEMBERS.

4b	(Code:) (Expenses \$ Including grants of \$) (Revenue \$)
	FINANCIAL SERVICES - ABBEY PROVIDES CHECKING ACCOUNTS, SAVINGS ACCOUNTS, MONEY MARKET ACCOUNTS,
	CERTIFICATE OF DEPOSITS, AND IRA'S ABBEY ALSO OFFERS ATM/DEBIT CARD SERVICES, WIRE TRANSFER SERVICES, MOBILE BANKING, AND INSURANCE RELATED PRODUCTS TO ITS MEMBERS
	•
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶

Part	IV Checklist of Required Schedules			-3
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		,
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		~
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		,
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		,
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		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
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		,
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		v
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	~	
	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		~
	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		,
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X 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.	11e	V	V
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		,
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		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
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		v
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		,
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		~
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		~
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		•
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		~

Part	Checklist of Required Schedules (continued)			
			Yes	No
_	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
22	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	21		<i>'</i>
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? If "Yes," complete Schedule J	22	~	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		~
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26	٧	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		~
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		~
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		> >
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		~
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		>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		٧
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
37	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
••	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		•
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38		,

Form **990** (2016)

Part				
<u> </u>	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1175	·	163	140
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1175 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 110 0		; }	
b	Did the organization comply with backup withholding rules for reportable payments to vendors and		. [
·	reportable gaming (gambling) winnings to prize winners?	1c		
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 24			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	~	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	/	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			l
	account)?	4a		~
b	If "Yes," enter the name of the foreign country: ▶			l
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	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	\longrightarrow	-
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		.	
	gifts were not tax deductible?	6b		
7_	Organizations that may receive deductible contributions under section 170(c).		i l	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	- <u>-</u>	j	
	and services provided to the payor?	7a 7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	70		
C	required to file Form 8282?	7c	.	
d	If "Yes," indicate the number of Forms 8282 filed during the year	'		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		. 1	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter:			ĺ
a	Gross income from members or shareholders			
Ь	against amounts due or received from them.)			
100	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		\Box	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ĺ
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	-	
a	Note. See the instructions for additional information the organization must report on Schedule O.			
ь	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			1
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		
				_

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S Check if Schedule O contains a response or note to any line in this Part VI	ee ins	tructi	ions.
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 9			1 1
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		~
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		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		~
6	Did the organization have members or stockholders?	6	_	
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	1	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	/	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	~	
b	Each committee with authority to act on behalf of the governing body?	8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		,
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co)
40-	Delth and the base base base base base base of the bas	40-	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		
110	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	~	ļ
11a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Ha	-	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	~	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		~
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		~
13	Did the organization have a written whistleblower policy?	13	1	
14	Did the organization have a written document retention and destruction policy?	14	1	
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?	J		
а	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	15b	1	ļ
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 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		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		<u>L.</u>
	on C. Disclosure		_	
17 18	List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	i 501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of integral statements available to the public during the tax year.			y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and recognized person plean PIELEMEIER, 800 FALLS CREEK DRIVE, VANDALIA, OH 45377, 937-898-7800	cords	: >	

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	ensa	ated any currer	t officer, director	, or trustee
				(C) sition	•				
(A) Name and Title	(B) Average hours per	(do not check more than on box, unless person is both a officer and a director/truste			n an	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other		
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) DONALD HOWELL	1									
CHAIRMAN	0	1				Ì		Ĭ	1	
(2) NANCY WOOD	1		 					 -		
VICE CHAIRMAN	0	,								
(3) STEVEN WILMOTH	1				一					
TREASURER	0	1	1					İ		
(4) MICHELE BLAKE	1									- '
SECRETARY	0	•				İ				
(5) GARY BREWSAUGH	1									· · · · · ·
BOARD MEMBER	0	~					ł			
(6) CHERYL SAUNDERS	1									
BOARD MEMBER	0	•				ļ]	
(7) HEATHER SCAGGS-RICHARDSON	1									
BOARD MEMBER	0	'								
(8) MICHAEL THEIN	1									
BOARD MEMBER	0	~								
(9) BRADLEY VATH	1									
BOARD MEMBER	0	1								
(10) DEAN PIELEMEIER	40									
PRESIDENT/CEO	0			~				131378		13097
(11) MELISSA GORDON	40									
VP OF LENDING	0			~				77481		3879
(12) TERI PUTHOFF	40									
VP OF FINANCE	0			~				15936		1793
(13) BLANCA ORTIZ	40									
VP OF COMMUNITY BUSINESS DEVELOPMT	0	:		~				41827		4409
(14)										
	T			١ .			1	1		

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title		(C) Position (do not check more than of box, unless person is both officer and a director/trust					an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other		of
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org ar	npensa from th ganizat nd relat janizat	ne tion ted
(15)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)								-					
(22)													•
(23)													
(24)	•••••		<u>.</u>										
(25)													
1b	Sub-total	VII, Sectio	n A					>	266622				23178
d	Total (add lines 1b and 1c)	t not limited						▶ e) w	ho received m	ore than \$100,0	00 of		23178
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc	tor, o	or tr	uste	ee, ıvıdı	key e	emp	oloyee, or high	est compensat	ed 3	Ye	es No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150,	000	? /:	f "Ye	s, "	complete Sch	pensation from the dule of the	he ch		
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co	ompe	nsat	tion	fro	m any	/ un	related organiz	ation or individu	Jal		
Section	on B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Repyear.	compensat port compe	ed inc nsatio	depo on fo	end or th	ent ne c	contr alend	acto lar y	ors that receive rear ending wit	ed more than \$1 h or within the c	00,000 organiza	of ition's	s tax
	(A) Name and business add	Iress							(B) Description of s	ervices	(ompe	C) ensatio	on
				_									
2	Total number of independent contractor							th	ose listed ab	ove) who		1	

Part	VIII	Statement of Revenue						
		Check if Schedule O contains	a res	ponse or note to				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns	1a				,	
Srai our	b	Membership dues	1b					
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events	1c					
ntributions, Gifts I Other Similar /	d	Related organizations	1d	_				
	е	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants,				1		, ,
		and similar amounts not included above	1f					
a d	g	Noncash contributions included in lines 1a						
	h	Total. Add lines 1a-1f	• •	Business Code				
Ž	2a	Interest on Loans		522100	2,847,076	2,847,076		
ě	b	Fees, charges, other		522100	1,149,325	1,149,325		
<u>8</u>	c	Non-member ATM income		525990	2404	1,117,020	2404	
ē	ď	Office rent income		525990	6000		6000	
E	e							
Program Service Revenue	f	All other program service revenu	ıe .					
P	g	Total. Add lines 2a-2f		•	4,004,805			
	3	Investment income (including	divid	ends, interest,				
		•		•	403,205	403,205		
	4	Income from investment of tax-exe	mpt b	ond proceeds ►				
	5	Royalties	<u> </u>					
	_	(i) Real		(II) Personal				
	6a	Gross rents				İ		
	b	Less rental expenses				į		
	C	Rental income or (loss) Net rental income or (loss)						
	d 7a	Gross amount from sales of (i) Securit		(ii) Other				
	10	assets other than inventory		() Cario				
	ь	Less. cost or other basis						
	_	and sales expenses .				i		
	С	Gain or (loss)						
	d			•				
		. ,						
venue	8a	Gross income from fundraising events (not including \$						
Other Rev		of contributions reported on line 1						
he		See Part IV, line 18		<u> </u>				
ō		Less: direct expenses Net income or (loss) from fundra						
		Gross income from gaming activi	_	events . ▶				
	34	See Part IV, line 19				İ		
	h	Less: direct expenses						
		Net income or (loss) from gamin						
		Gross sales of inventory,						
		returns and allowances	. а					
	b	Less: cost of goods sold	. b			-		
		Net income or (loss) from sales						
		Miscellaneous Revenue		Business Code				
	11a							
	b							
	С							
	d	All other revenue						<u> </u>
	е	Total. Add lines 11a-11d						
	12	Total revenue. See instructions	· ·	<u>.</u> ▶	4,408,010	4,399,606	8,404	

Part IX Statement of Functional Expenses

Check if Schedule C contains a response or note to any line in this Part IX 69, 98, and 10b of Part VIII. 1 Ginst and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 21 3 Grants and other assistance to foreign modifications, foreign organizations,	Section	on 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	ll other organizatio	ns must complete co	olumn (A).
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. 1 Grants and other assistance to domestic organizations and domestic governents. See Part IV, line 2 : 2 Grants and other assistance to domestic individuals. See Part IV, line 2 : 3 Grants and other assistance to foreign organizations, foreign governents and foreign individuals. See Part IV, line 2 : 4 Benefits paid to or for members 5 Compensation of cument officers, directors, trustees, and key employees 6 Compensation of cument officers, directors, trustees, and key employees 7 Other salaries and orable (100 to 100 t		Check if Schedule O contains a respon	se or note to any lin	e in this Part IX		
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 22 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, line 15 and 10 4 Benefits paid to or for members 5 Compensation of cument officiers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(18)) and persons described in section 4958(f)(18) and persons described in section 4958(f)(18) and persons described in section 4958(f)(18) and persons described in section 4958(f)(18) and persons described in section 4958(f)(18) and persons described in section 4958(f)(18) and section 4016 and 4930) employer contributions (include section 4016) and 4930) employer contributions and persons described in section 4916 and 4930) employer contributions and persons described in section 4916 and 4930) employer contributions and an appear of the section 4916 and 4930 employer contributions and the section 4916 and 4930 employer contributions and the section 4916 and 4930 employer contributions and the section 4916 and 4930 employer contributions and the section 4916 and 4930 employer contributions and the section 4916 and 4930 employer contributions and the section 4916 and 4930 employer contributions and the section 4916 and		ot include amounts reported on lines 6b, 7b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
2 Grants and other assistance to domestic individuals. See Part IV, line 12 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16. 4 Benefits paid to or for members	1					
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 6 Compensation not included above, to disqualified persons (as defined under section 4958(c)(S)(B) 7 Other salaries and wages 8 Penson plan accrusis and contributions (include section 4058(c)(S)(B) 9 Other employee benefits 10 Payroll taxes 74.172 11 Fees for services (non-employees): a Management b Legal c Accounting 3 5,450 Other uniterasing services. See Part IV, line 17 f Investment management fees Other will first if geometes of Scholum (A) amount, list line 11 geometes 2019 for line 25, column (A) amount, list line 11 geometes 2019 for line 25, column (A) amount, list line 11 geometes 2019 for line 25, column (A) amount, list line 11 geometes 2019 for line 25, column (A) amount, list line 11 geometes 2019 for line 25, column (A) amount, list line 11 geometes 2019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount, list line 12 geometes 3019 for line 25, column (A) amount,		- · · · · · · · · · · · · · · · · · · ·			<u>L</u>	
organizations, foreign governments, and foreign individuals. See Part IV, line 15 am 16 i. 4 Benefits paid to or for members	2					
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(f)) and persons described in section 4958(f)(f)) and persons described in section 4958(f)(f)) and persons described in section 4958(f)(f)(f) and contributions (include section 401f) and contributions (include section 401f) and contributions (include section 401f) and dollar (incl	3	organizations, foreign governments, and foreign				
6 Compensation not included above, to disqualified persons (as defined under section 4858(f)(1) and persons (as defined under section 4858(f)(1) and persons described in section 4958(s)(3)(8) 7 Other salaries and wages 8 Penson plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 145,961 10 Paryroll taxes 174,172 11 Fees for services (non-employees): a Management Legal 1 Lobbying 1 L		Compensation of current officers, directors,	432,989			
persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(8) 7 Other salaries and wages		trustees, and key employees	360,505			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits	6	persons (as defined under section 4958(f)(1)) and				
section 401(k) and 403(b) employer contributions) 9 Other employee benefits	7	Other salaries and wages	665,468			
9 Other employee benefits	8		20 487			
10 Payroll taxes	9	· •				
11 Fees for services (non-employees): a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 251,219 Advertising and promotion 144,421 13 Office expenses 159,094 Information technology 15 Royalties						
a Management b Legal . Accounting	11					
b Legal	а					
d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees g Other. (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 251,219 261,219 27 281,219 281,	b					
e Professional fundraising services. See Part IV, line 17 f Investment management fees	С	Accounting	35,450			
f Investment management fees g Other. (If line 11 g amount exceeds 10% of line 25, column (A) amount, list line 11 g expenses on Schedule O.) 251,219 24 Advertising and promotion	d					
9 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) 251,219	е					
(A) amount, list line 11g expenses on Schedule O.) 251,219 24 Advertusing and promotion						<u> </u>
12 Advertising and promotion	g					
13 Office expenses	40	-				
14 Information technology						
15 Royalties			159,094	· · · · · · · · · · · · · · · · · · ·		
16 Occupancy						
Travel			85.043	· 		
Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings						
19 Conferences, conventions, and meetings 20 Interest		Payments of travel or entertainment expenses				
Interest	19	· •				
Payments to affiliates		· · · · · · · · · · · · · · · · · · ·		· -		
Depreciation, depletion, and amortization		the state of the s		· -		
23 Insurance		· · · · · · · · · · · · · · · · · · ·	96,863			
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 601,084 b LOAN SERVICING EXP 382,778 c CARD PROCESSING 459,828 d 459,828 d 235,611 25 Total functional expenses. Add lines 1 through 24e 4,166,270 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	23	· · · · · · · · · · · · · · · · · · ·				
line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a PROVISION FOR LOAN LOSS b LOAN SERVICING EXP c CARD PROCESSING d 459,828 d e All other expenses 235,611 25 Total functional expenses. Add lines 1 through 24e organization reported in column (B) joint costs from a combined educational campaign and	24	Other expenses. Itemize expenses not covered				
(A) amount, list line 24e expenses on Schedule O.) a PROVISION FOR LOAN LOSS 601,084 b LOAN SERVICING EXP 382,778 c CARD PROCESSING 459,828 d e All other expenses 235,611 25 Total functional expenses. Add lines 1 through 24e 4,166,270 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and						
a PROVISION FOR LOAN LOSS b LOAN SERVICING EXP c CARD PROCESSING d 459,828 d 235,611 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and					*	·]
b LOAN SERVICING EXP c CARD PROCESSING d e All other expenses Total functional expenses. Add lines 1 through 24e 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and		· ·				
c CARD PROCESSING 459,828 d 235,611 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and						
d e All other expenses 235,611 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	_				<u> </u>	<u> </u>
e All other expenses 235,611 25 Total functional expenses. Add lines 1 through 24e 4,166,270 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and		CARD PROCESSING	459,828			
Total functional expenses. Add lines 1 through 24e 4,166,270 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and			225 411			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and						
organization reported in column (B) joint costs from a combined educational campaign and			4,100,270			
following SOP 98-2 (ASC 958-720)	20	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here	ļ			

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year Savings and temporary cash investments Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Loans and other receivables from other disqualified persons (as defined under section ĸ 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 Assets Inventories for sale or use Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 10c Investments—publicly traded securities Investments - other securities. See Part IV, line 11 . . . Investments—program-related. See Part IV, line 11..... Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) . . . Accounts payable and accrued expenses Escrow or custodial account liability. Complete Part IV of Schedule D . Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties . . . Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X Total liabilities. Add lines 17 through 25 . Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund . . . Retained earnings, endowment, accumulated income, or other funds .

Total liabilities and net assets/fund balances

. 0	50 (2010)	Page 1∠
Par	t 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)	4,408,010
2	Total expenses (must equal Part IX, column (A), line 25)	4,166,270
3	Revenue less expenses. Subtract line 2 from line 1	241,740
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4	6,858,961
5	Net unrealized gains (losses) on investments	(53,050)
6	Donated services and use of facilities	
7	Investment expenses	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain in Schedule O)	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	
	33, column (B))	7,047,651
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: Cash Accrual Other	第二次 图 图 图
	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?	2a 🗸
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	120 CA 666
	reviewed on a separate basis, consolidated basis, or both:	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	
b	Were the organization's financial statements audited by an independent accountant?	2b 🗸
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	· 京门大水 3.31
	separate basis, consolidated basis, or both:	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c
	If the organization changed either its oversight process or selection process during the tax year, explain in	TA SE LAY
	Schedule O.	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	
	the Single Audit Act and OMB Circular A-133?	3a
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b

Form **990** (2016)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Name o	f the or	ganization		Employer identification number
ABBE	Y CRE	DIT UNION INC		31-0329725
Par	t I	Organizations Maintaining Donor Adv Complete if the organization answered		
			(a) Donor advised funds	(b) Funds and other accounts
1	Total	number at end of year		
2	Aggre	egate value of contributions to (during year)		
3	Aggre	egate value of grants from (during year) .		
4	Aggre	egate value at end of year		
5		he organization inform all donors and donors are the organization's property, subject to the		
6	only 1	he organization inform all grantees, donors, a for charitable purposes and not for the bene erring impermissible private benefit?	and donor advisors in writing that gra- fit of the donor or donor advisor, or f	for any other purpose
Par		Conservation Easements.		
		Complete if the organization answered		•
1		ose(s) of conservation easements held by the		
		reservation of land for public use (e.g., recrea		
		rotection of natural habitat	☐ Preservation o	of a certified historic structure
_		reservation of open space	ald a sublified assessmentian contribution	on in the form of a conceniation
2		plete lines 2a through 2d if the organization he	eid a quaimed conservation contribution	
		ment on the last day of the tax year.		144.47.288
а		number of conservation easements		
b		acreage restricted by conservation easemen		
C		ber of conservation easements on a certified		
d		ber of conservation easements included in rick structure listed in the National Register.	(c) acquired after 6/17/00, and not	2d
3		ber of conservation easements modified, tran		
·	tax y		oronica, roroacoa, oxungaronea, er ten	g
4		ber of states where property subject to conse	ervation easement is located >	
5	Does	the organization have a written policy re	garding the periodic monitoring, ins	
6		and volunteer hours devoted to monitoring, inspec		-
	•	•		
7	Amou	unt of expenses incurred in monitoring, inspecting	ng, handling of violations, and enforcing	conservation easements during the yea
	▶\$,		
8	Does	each conservation easement reported on line	2(d) above satisfy the requirements of	f section 170(h)(4)(B)(ı)
	and s	section 170(h)(4)(B)(ıı)?		· · · · · · · · · · Yes 🗌 N
9	In Pa	rt XIII, describe how the organization reports	conservation easements in its revenue	e and expense statement, and
		nce sheet, and include, if applicable, the text of		nancial statements that describes the
	orgar	nization's accounting for conservation easeme	ents.	
Part		Organizations Maintaining Collection	s of Art, Historical Treasures, o	r Other Similar Assets.
		Complete if the organization answered		
1a	If the	organization elected, as permitted under SF	FAS 116 (ASC 958), not to report in its	s revenue statement and balance she
	work	s of art, historical treasures, or other similar	r assets held for public exhibition, ed	ducation, or research in furtherance
		c service, provide, in Part XIII, the text of the t		
b	work	e organization elected, as permitted under S s of art, historical treasures, or other similal c service, provide the following amounts relat	r assets held for public exhibition, e	revenue statement and balance she ducation, or research in furtherance
	(i) R	evenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) As	ssets included in Form 990, Part X		> \$
2	If the	e organization received or held works of art ving amounts required to be reported under S	, historical treasures, or other simila	ır assets for financial gain, provide th
а		nue included on Form 990, Part VIII, line 1 .		
b	Asse	ts included in Form 990, Part X		

Schadula	D (Form	990) 2016	

Page 2

Par	Organizations Maintaining	Collections of	Art, His	storical	Treasures	, or O	ther Similar As	ssets (co	ontin	ued)
3	Using the organization's acquisition, collection items (check all that apply)	accession, and o								
а	Public exhibition		d	☐ Loai	n or exchan	ge prog	rams			
þ	Scholarly research		e	Oth					•	
С	Preservation for future generation	s		_						
4	Provide a description of the organiza		and exp	lain how	they further	the or	anization's exe	mpt purp	ose ir	n Part
	XIII.		•		,		,			
5	During the year, did the organization	solicit or receive	donatio	ns of art.	. historical ti	reasure	s. or other simil	ar		
	assets to be sold to raise funds rathe	r than to be mainta	ained as	part of th	ne organizati	ion's co	ollection?	_	es 「	□No
Par	t IV Escrow and Custodial Arra									
	Complete if the organization 990, Part X, line 21.						•		ı For	m
1a	Is the organization an agent, trustee included on Form 990, Part X?	, custodian or oth	ner inter	mediary	for contribut	tions o	other assets n	ot 🗌 \Upsilon	es [] No
b	If "Yes," explain the arrangement in P	art XIII and compl	ete the f	ollowing	table:		Α	mount		
С	Beginning balance					10	:			
d	Additions during the year					10				
е	Distributions during the year					16				
f	Ending balance					11		_		
2a	Did the organization include an amou							/2 T Y /	es [¬ No
b	If "Yes," explain the arrangement in P	art XIII. Check her	e if the e	explanation	on has been	provide	ed on Part XIII .		- F	
	t V Endowment Funds.					<u> </u>		<u> </u>		
	Complete if the organization	answered "Yes	" on Fo	rm 990.	Part IV. line	e 10.				
		(a) Current year		or year	(c) Two year		(d) Three years bac	k (e) Four	r years	back
1a	Beginning of year balance				-		 	 	-	
b	Contributions	, . <u></u>	· · · · · · ·					 		
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 t	the current year en	id baland	ce (line 1	g, column (a)) held a	as:			
а	Board designated or quasi-endowme	nt ▶	%							
b	Permanent endowment ▶	%								
С	Temporarily restricted endowment ▶									
	The percentages on lines 2a, 2b, and									
3a	Are there endowment funds not in the	e possession of th	e organ	ization th	at are held	and ad	ministered for th	e		
	organization by:								Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" on line 3a(ii), are the related o	rganizations listed	as requi	ired on S	chedule R?			3b		
4	Describe in Part XIII the intended uses	of the organization	n's end	owment f	unds.					
Part	VI Land, Buildings, and Equip	ment.				•				
	Complete if the organization	answered "Yes'	on For	m 990,	Part IV, line	11a. S	See Form 990,	Part X,	line 1	١٥.
	Description of property	(a) Cost or oth			or other basis other)		Accumulated preciation	(d) Boo	k value	•
1a	Land				211,084	K SPORT			21	1,084
b	Buildings				1,521,069		588,063		93	3,006
С	Leasehold improvements			-						
d	Equipment			· ·	808,075		743,311		64	4,764
e	Other		•		41,782		23,717		1/	8,065
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	00, Part 2	X, columi	n (B), line 10	c.)			1,22	6,919
				., 55,6,711	. ,=,,	, , ,				

Part VII	Investments – Other Securitie Complete if the organization and		m 990. Part IV. lin	e 11b. See Forr	n 990 Part X line 12
	(a) Description of security or catego (including name of security)		(b) Book value	(c) Me	othod of valuation d-of-year market value
(1) Financial	derivatives				
(2) Closely-I	neld equity interests			-	
(B)					
(C)					
(D)					
(E)	***				
(F)					
(G) (H)					
	b) must equal Form 990, Part X, col. (B) line 12)				
Part VIII	Investments - Program Relate		000 D+ N/ E	44 0 5	000 5 11/11 10
	Complete if the organization and	swered "Yes" on For			
	(a) Description of investment		(b) Book value		ethod of valuation d-of-year market value
_(1)					
(2)					
(3)					
(4)					
(5)				<u></u>	
(6)					
<u>(7)</u>					
(8)					
	n) must equal Form 990, Part X, col. (B) line 13.)	-			
Part IX	Other Assets.				
	Complete if the organization ans	wered "Yes" on For	n 990. Part IV line	a 11d See Form	1 990 Part X line 15
		(a) Description		3 1 1 d 1 0 0 0 1 0 1 1 1	(b) Book value
(1)					
(2)					
(3)					
(4)					
_(5)					
_(6)					
_(7)					
(8)					
(9)	on (h) must a rue Form 200 Fort V	-1 (0) (1 45)			
Part X	nn (b) must equal Form 990, Part X, c Other Liabilities.	oi. (B) line 15.)	· · · · · ·	<u> ▶</u>	
raitA	Complete if the organization ans line 25.	wered "Yes" on Forr	n 990, Part IV, line	e 11e or 11f. Se	e Form 990, Part X,
1.	(a) Description of liability	(b) Book value			
(1) Federal inc		(5) 25011 16105			
	SHARES/ACCOUNTS	81,350	.438		t
(3)			7.00		
(4)					4
(5)					
(6)					· · ·
(7)				1	
(8)					, ,
(9)					
	must equal Form 990, Part X, col. (B) line 25.)	81,350			
2. Liability for	uncertain tax positions. In Part XIII, provi	de the text of the footno	te to the organization'	s financial stateme	nts that reports the
organization's	liability for uncertain tax positions under	FIN 48 (ASC 740). Chec	k here if the text of th	e footnote has bee	n provided in Part XIII

	Reconciliation of Revenue per Audited Financial Statem		r Return.	
1	Complete if the organization answered "Yes" on Form 990, Total revenue, gains, and other support per audited financial statements	Part IV, line 12a.	T 2 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1	
	Net unrealized gains (losses) on investments	20		
	Donated services and use of facilities	2a 2b	-	
	Recoveries of prior year grants	<u> </u>		
	Other (Describe in Part XIII.)	2c 2d	-	
	Add lines 2a through 2d		- 	
3	Subtract line 2e from line 1		2e 3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i	3	
	nvestment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII.)		-	
	Add lines 4a and 4b		4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)	5	
Part >				
	Complete if the organization answered "Yes" on Form 990,		Jei Hetuiii.	
1	Total expenses and losses per audited financial statements	Turtiv, into 12a.	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		-	
	Donated services and use of facilities	2a		
	Prior year adjustments	2b	-	
	Other losses	2c	-	
	Other (Describe in Part XIII.)	2d	\dashv	
	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	•
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i		
	nvestment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, Iir	ne 18.)	5	
•				
art X	III Supplemental Information.		<u> </u>	art X I
art X ovide		d 4; Part IV, lines 1b and 2	2b; Part V, line 4; P	art X,
art X ovide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	2b; Part V, line 4; P	art X,
art X ovide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	2b; Part V, line 4; P	art X,
art X ovide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	2b; Part V, line 4; P	art X,
art X ovide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	2b; Part V, line 4; P	art X,
art X ovide	Supplemental Information. the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	2b; Part V, line 4; P	art X,

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

ARREA C	REDIT UNION INC	31-0329725
Part I	Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) of	rganizations only).
	Complete if the examination answered "Vee" on Form 000, Dart N. Har OFA or OFA	Farms 000 F7 David V June 40h

1	(a) Name of disqualified person	(b) Relationship between disqualified person and	(c) Description of transaction		rrected
	(4)	organization	(c) Description of transaction	Yes	No
(1)					
(2)					
(2) (3)					
(4)					\Box
(5)					
(6) 2					
2		red by the organization managers or disqual			
3	Enter the amount of tax, if any.	on line 2, above, reimbursed by the organization	on		

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?		from the		from the principal amount		(g) in default?		(h) Approved by board or committee?			
			То	From			Yes	No	Yes	No	Yes	No		
(1) LYNN COOK	PRIOR CEO	LIFE INSURA		1	140,000	140,000		~	~		~			
(2) LYNN COOK	PRIOR CEO	LIFE INSURA		~	140,000	140,000		~	~		~			
(3) LYNN COOK	PRIOR CEO	LIFE INSURA		~	140,000	140,000		~	~		~	_		
(4) LYNN COOK	PRIOR CEO	LIFE INSURA		~	140,000	140,000		~	~		~			
(5) LYNN COOK	PRIOR CEO	LIFE INSURA		~	140,000	140,000		~	~		~			
(6) LYNN COOK	PRIOR CEO	LIFE INSURA		~	140,000	140,000		~	~		~			
(7) LYNN COOK	PRIOR CEO	LIFE INSURA		~	140,000	140,000		~	~		~			
(8) LYNN COOK	PRIOR CEO	LIFE INSURA		~	140,000	140,000		~	~		~			
(9) LYNN COOK	PRIOR CEO	LIFE INSURA		~	140,000	140,000		~	~		~			
(10)														
Total						1,260,000	1114	4		7 (B)				

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
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organi rever	anng zation nues?
					Yes	No
<u> </u>					-	
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<u> </u>					4	↓_
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rt V	Supplemental Information Provide additional information	. fan waar a waar ka maar akadul- I. /aa-				
	······································				_	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

20**16**

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization	Employer Identification number
ABBEY CREDIT UNION INC	31-0329725
FORM 990 - ORGANIZATIONS' MISSION	
Our Mission is to help our members improve their economic well-being and quality of life by being co	mpetitive, convenient,
and cutting edge.	
FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS	
MEMBERSHIP TO ABBEY CREDIT UNION IS OPEN TO THOSE WHO LIVE, WORK, ATTEND SCHOOL,	OR WORSHIP IN VANDALIA, BUTLER
TOWNSHIP, OR MIAMI COUNTY. ABBEY CREDIT UNION IS OWNED BY THOSE PEOPLE THAT OPEN	AN ACCOUNT AT ABBEY
FORM 990, PART VI, LINE 7A - ELECTION OF GOVERNING BODY	
YES - EACH MEMBER GETS ONE VOTE FOR THE ANNUAL ELECTION	
FORM 990, PART VI, LINE 7B - GOVERNANCE DECISIONS	
YES - PURSUANT TO THE REGULATION OF THE NCUA AND THE OHIO DIVISION OF CREDIT UNIONS	<u> </u>
FORM 990, PART VI, LINE 11B - PROCESS TO REVIEW 990	
THE VP OF FINANCE PREPARED THE FORM 990 BASED ON FINANCIAL RECORDS FINANCIAL STATE	TEMENTS ARE AUDITED ANNUALLY
THE CEO REVIEWS THE RETURN PRIOR TO FILING	
FORM 990, PART VI, LINE 12C - CONFLICTS POLICY	
BOARD MEMBERS WERE NOT ASKED TO DISCLOSE CONFLICTS IN 2016, THEY WILL BE IN 2017.	
FORM 990, PART VI, LINE 15A/B - COMPENSATION PROCESS	
COMPENSATION FOR DEAN PIELEMEIER, CEO IS REVIEWED BY THE PERSONNEL COMMITTEE OF	THE BOARD OF DIRECTORS AND
IS ACTED UPON BY THE BOARD OF DIRECTORS PER THE COMMITTEE RECOMMENDATION.	
COMPENSATION FOR OFFICERS IS REVIEWED AND APPROVED BY DEAN PIELEMEIER, CEO.	

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization ABBEY CREDIT UNION INC	Employer identification number 31-0329725
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE	
DOCUMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC	

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