GCU 11/08/2023 8:42 AM

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. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2022 Open to Public Inspection

4	For the	2022 c	alendar year, or tax year beginning	, and	ending		B = .1	
3 (heck if ap	oplicable:	C Name of organization				D Employe	r identification number
1	Address ch	hange	GEAUGA CRE	OIT UNION			04.4	055466
-	lame char	nge	Doing business as			December 310	34-1 E Telephon	055466
			Number and street (or P.O. box if mail is not delivered PO BOX 839	d to street address)		Room/suite		834-4327
-	nitial returi Final returr	- 1	City or town, state or province, country, and ZIP or fo	reign postal code				
	erminated			он 44021			G Gross rec	eipts\$ 2,388,027
1	Amended r	return	F Name and address of principal officer:	0.1 11022				
7	Application	n pendina	LISA K BRIGGS			H(a) Is this a gro	oup return for s	ubordinates? Yes X No
	TF	' "	19051 SR 700			H(b) Are all sub	ordinales incl	uded? Yes No
			HIRAM	он 4423	4	If "No,"	' attach a list	See instructions
w 1		rist elektron	501(c)(3) X 501(c) (14) (inse		a)(1) or 527			
	Tax-exem	npt status:	ww.geaugacreditunion.		7(1) 41	H(c) Group exe	mption numbe	er
_	Website:			Other		Year of formation: 1		M State of legal domicile: OH
	art I	rganization:	Immary	Outo				1.00. 0.00.00 10.00
				onificant activities				
	1 5	mbo	scribe the organization's mission or most si Credit Union provides fin	ancial service	es for qualif	ied member	sommer	***************************************
JCe		oscor.	Cledit onion broades in		97909000000	LENTE CARV		
& Governance	2.0	***				ment o cupt		
Ve		. 1811 1811 24 ale ale	s box if the organization discontinued	its operations or disp	osed of more than 25%	of its net assets		
တိ			of voting members of the governing body (P				2	9
			of independent voting members of the gove		ne 1h)			9
Activities							8.97	12
ţį			nber of individuals employed in calendar ye				682	0
Ac			nber of volunteers (estimate if necessary)				(H)()	13,749
			elated business revenue from Part VIII, colu				7a 7b	15,715
	bΛ	Vet unrel	ated business taxable income from Form 9	90-1, Part I, line 11		Prior Ye		Current Year
		D = =4=:lb4	ione and grants (Dart VIII line 1h)			7 1107 10		0
ne			ions and grants (Part VIII, line 1h)			1.94	9,741	2,314,247
Revenue	l .	-			e and the element of the first term of the first		0,997	52,925
Şe			nt income (Part VIII, column (A), lines 3, 4,				4,889	
-			renue (Part VIII, column (A), lines 5, 6d, 8c,				5,627	2,388,027
			enue – add lines 8 through 11 (must equal			1,91	5,021	2,300,027
			nd similar amounts paid (Part IX, column (A			21	2,017	308,307
			paid to or for members (Part IX, column (A)				9,580	
es			other compensation, employee benefits (P			43	9,500	307,210
Expenses			nal fundraising fees (Part IX, column (A), li			p	-	
xpe			draising expenses (Part IX, column (D), line				7 020	850,273
Ш	17 0	Other exp	penses (Part IX, column (A), lines 11a–11d	11f-24e)			7,930	
			enses. Add lines 13–17 (must equal Part I)				9,527	
	19 F	Revenue	less expenses. Subtract line 18 from line 1	2	DESCRIPTION OF THE PARTY OF THE	Beginning of Cu	6,100	End of Year
SOL						64,96		
set	20 T					59,30		
Net Assets or	21 ⊺						3,242	
			ts or fund balances. Subtract line 21 from li	ne 20		3,03	5,242	0,373,171
P	art II	Si	gnature Block				-4 -6 10-	
U	nder per	nalties of	perjury, I declare that I have examined this return omplete. Declaration of preparer (other than office	n, including accompanying the control in the contro	ng schedules and statements	ents, and to the be	st of my Kno	owledge and beller, it is
tr	ue, corre	ect, and co	ompiete. Declaration of preparer (other than one	cr) is based on all inform	nation of William proparer.	ide diry imerire =g		
							Date	<u> </u>
Siç		1 "	e of officer		CEC		Date	
He	re		A K BRIGGS		CEO			
_			print name and title			Date		e lif PTIN
		Print/Typ	e preparer's name	Preparer's signature	n s.		Check	` "
Pai		James	Ebert, CPA		10		3/23 self-e	
	parer	Firm's na	me Ebert, Owen &				Firm's EIN	81-2664208
Use	Only		539 Washington		4400			440-247-9933
		Firm's ad	dress Chagrin Falls,				Phone no.	440-247-8233
Ma	the IR	S discus	s this return with the preparer shown above	? See instructions			and a second	X Yes No

(Expenses \$

4e Total program service expenses

4d Other program services (Describe on Schedule O.)

including grants of \$

1,486,168

) (Revenue \$

Part IV Checklist of Required Schedules

0		-	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			
2	TABLE BARRIER FOR THE PORT OF THE SAME	1	-	X
3	Samuel 1- dampe to complete conference B, conference of Contributions: See Instructions	2		X
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			
4		3	-	X
7	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II			
5		4	_	-
Ū	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	- 1		١
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	5	-	X
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			1
	"Yes," complete Schedule D, Part I			1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6	-	X
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	_		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7	-	X
-	complete Schedule D, Part III			7.7
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	8		X
	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			
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9	-	X
	or in quasi endowments? If "Yes," complete Schedule D, Part V	40		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		X
	VII, VIII, IX, or X, as applicable.			-
а			-	
	complete Schedule D, Part VI	11a	x	
b	***************************************	Ha	A	-
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	[0] 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	110		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	***************************************	110		-
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е		11e	х	-
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110	- 22	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a				
	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	12a		
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D. Parts XI and XII is optional	12b		x
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	1 1		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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		X
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		X
7	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		X
8	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		X
9	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		X
0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	if the sto line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
-	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

-	m 990 (2022) GEAUGA CREDIT UNION 54-1055466			age
_P	art IV Checklist of Required Schedules (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	ſ	163	140
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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	23		X
24a		A3(200)		
	\$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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	A. A		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Х	
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			۱
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			٠
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			٦,
	or IV, and Part V, line 1			X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	٥٥١		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	26		
27	related organization? If "Yes," complete Schedule R, Part V, line 2	36		-
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	31		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	x	
D,		30	Y	-
1	art 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			
	Chesical Continues Continues a response of note to any and in the rest.		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1859			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			E
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			

reportable gaming (gambling) winnings to prize winners?

_P	art V Statements Regarding Other IRS Filings and Tax Compliance (contin	nued)				Pag
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	lueuj			Y	es
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	12	1	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	12	21		~
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?		************	2t	_	X X
þ	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3t	_	X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority	/ over	Vertical St.	'	<u>^</u>
	a imancial account in a foreign country (such as a bank account, securities account, or other financial	accoun	nt)?	4a		
b	res," enter the name of the foreign country		F (6.9-4) (1.0) (1.0)	4d	+	+
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts	s (FBAR)			
5a	vvas tile organization a party to a prohibited tay shelter transaction at any time during the territory			5a	1	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ion?		5b	_	
С	and the organization life (off) about 1				_	+
6a	bees the organization have arrival gross receipts that are normally greater than \$100,000, and did the	i patennati B	************		+	+
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a	1	:
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or		<u>vu</u>	+	+
_	gitts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for or	oods			1	
	and services provided to the payor?			7a		
b	res, and the organization notify the donor of the value of the goods or services provided?				+	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		* * * * * * * * * * * * * * *	********	+	
	required to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	****	70		#
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit cor-	tract2		70		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contrac	42		7e 7f	-	+
3	in the organization received a contribution of qualified intellectual property, did the organization file Form	n 8899	as required?	72	1	+
1	if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	on file a	Form 1009 (7g	-	+
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	hv the	11 01111 1090-0	2?		+
	sponsoring organization have excess business holdings at any time during the year?					
	Sponsoring organizations maintaining donor advised funds.	() * * ((), V , A)		8		+-
1	Did the sponsoring organization make any taxable distributions under section 49662			0-		1
)	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9a	-	+
	Section 501(c)(7) organizations. Enter:	******		9b		+-
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
•	Gross receipts included on Form 000, Dort VIII line 40, t	10b			-	1
	Section 501(c)(12) organizations. Enter:	100				
a (Gross income from members or shareholders	11a		175		
	Gross income from other sources. (Do not net amounts due or paid to other sources	IId				1
á	anginet amounte due or received from the	446				4
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1	11b				+
-1	T Yes, enter the amount of tax-exempt interest received or secreted during the	20820		12a		+
5	Section 501(c)(29) qualified nonprofit health insurance issuers.	12b				
- 1	s the organization licensed to issue qualified health plans in more than one state?			1.		+-
١	Note: See the instructions for additional information the organization must report on Schedule O.	10.000.00		13a		-
E	inter the amount of reserves the organization is required to maintain by the states in which					
tl	Of Organization is licensed to issue qualified beauty - I	401				
Е	nter the amount of reserves on hand	13b				1-
	Did the organization receive any payments for indoor tanning services during the tax year?	13c			4	-
lf	"Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			14a	_	X
ls	the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration			14b		-
е	VCQCC narachuto naumoni(a) duning the contraction of					
	"Yes," see instructions and file Form 4720, Schedule N.			15		X
ls	the organization an educational institution subject to the coeffice 4000 and					-
lf	the organization an educational institution subject to the section 4968 excise tax on net investment incomes, "Yes," complete Form 4720, Schedule O.	ome?		16		X
	ection 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities					
th	at would result in the imposition of an excise to yunder earlier to the total total and the imposition of an excise to yunder earlier total tota	S		1 1		
1996	at would result in the imposition of an excise tax under section 4951, 4952 or 4953? "Yes," complete Form 6069.	- () (() () ()		17		

Form 990 (2022) GEAUGA CREDIT UNION 34-1055466 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Se	ction A. Governing Body and Management					
		20	6		Yes	No
1a	GETTER-AUTHOLOGICAL PRODUCTION	1a	9			
	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 on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	9	c i		
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	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	MAN WILL	WOOLOUS CHOOL DRIVE	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	un test	5555 · 156555			
	one or more members of the governing body?			7a	Х	
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		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?	•	ŭ	8a	х	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	575555	**********			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte-	nal R	evenue C	ode.)		
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	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		he form	1?	11a		х
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		11111111111		91	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to confl	icts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		(FARCES)	1.20		
	describe on Schedule O how this was done			12c		x
13	Did the experience have a written which blower a disco			13	х	-
14	Did the organization have a written document retention and destruction policy?			14	X	_
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?			1		
а	The constitute OFO Figure District			15a	x	
b	Other officers or key employees of the organization			15b		Х
-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		43000000000000	130		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a tayable antity dyniae the ward			16a		x
b	TERRESONER BER ERGERERE ROBERT - RESERVE - RESERVE - DE FAN ARREST - RESERVE - DE L'ANDERE - L'ANDRE - L'A			104		
	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		
Sec	tion C. Disclosure			100		
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 Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (sec	tion 50	1(c)	0.0000000000000000000000000000000000000	****	1000
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	aon ou	.(0)			
	Own website					
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	et nolice	,			
-	and financial statements available to the public during the tax year.	st bolic)	′,			
20	State the name, address, and telephone number of the person who possesses the organization's books and record					
	omas Briggs P.O. Box 839	5				
	rton OH 4402	1	111	-83	1 - 1 ·	327
		-	771			J = 1

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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

Check this box if neither the orga	anization nor an	y rela	ited o	orga	nizat	ion co	mp	ensated any current officer	director, or trustee.	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	bo	x, unle ficer a	Pos check ess pe	erson i lirecto	than one a both a both a both a r/trustee Highest compensated	ın	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) THOMAS BRIGGS	0.35									
TREASURER	0.00	X		X				0	0	
(2) JAY ALLEN										
	0.35									
Director	0.00	X		X				0	0	
(3) ROBERT YODER	0.05									
	0.35									
DIRECTOR (4) BARBARA TITUS	0.00	X	_				4	0	0	(
(4) BARBARA IIIUS	0.35									
VICE PRESIDENT	0.00	x		x			- 1	0	0	
(5) AGGIE SOJKA	0.00	┼≏		_		-	\dashv	- 0	0	(
(3)113312 203141	0.35						- 1			
Vice President	0.00	x						0	0	
(6) LINDA SWANEY	0.00	1					7			
(0,=======	0.35									
SECRETARY	0.00	x		x				o	0	(
(7) DAVID MILLER							\forall			
	0.35									
DIRECTOR	0.00	x						0	0	(
(8) LISA K BRIGGS							\top			
	40.00									
CEO	0.00			X				75,191	0	C
(9) Daniel Burkholde							T			
***************************************	0.35									
DIRECTOR	0.00	X		X				0	0	
(10)Georgia Klemenci										
	0.35									
DIRECTOR	0.00	X		X			_	0	0	C
(11)										

Part VII Section A. Officers	s, Directors, Tru	uste	es. K	(ev E	Emp	love	es. a	and Highest Compensate				Page
(A) Name and title	(B) Average hours per week	(c	do not ox, uni	Po: check ess po	(C) silion more erson	than is both	one n an	(D) Reportable compensation	(E) Reportable compensation	Estimate	F) d amou	nt
	(list any hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)			ď
	es e											
	0.00 A = 1.00 E5 (V = V = V = V = V = V = V = V = V = V											
	Distance of the second											

::::::::::::::::::::::::::::::::::::::	*************											
1b Subtotal	4- 4- D- 4 VIII - O	200	10.000					75,191				
c Total from continuation shee d Total (add lines 1b and 1c) Total number of individuals (inc	Karana a siasa ana ang aranasana	DE DESERVE						75,191 who received more than \$	100.000 of			
reportable compensation from t	he organization	-	0								Yes	No
 Did the organization list any for employee on line 1a? If "Yes," of For any individual listed on line 	complete Schedu	ıle J	for s	uch .	indiv	riduai	1		om the	3	100	х
organization and related organization	zations greater tl	han :	\$150	,000	? If	'Yes,	" cor	mplete Schedule J for such	on ale			x
5 Did any person listed on line 1a for services rendered to the org	receive or accru	ie co	mpe	nsat	ion f	rom :	any i	unrelated organization or in	dividual	4		
ection B. Independent Contractor	S	142								5		X
 Complete this table for your five compensation from the organization 	highest comper ation. Report con	nsate nper	ed ind	depe	nder	nt coi	ntrac ndar	ctors that received more that year ending with or within	in \$100,000 of	3		
Name and b	(A) usiness address							Description	(B) on of services		(C) mpensa	tion
		-				_						
2 Total number of independent co	ntractors (in 1, 1)				:4 '							
2 Total number of independent correceived more than \$100,000 of	compensation fr	rom f	the o	rgan	nted izati	to th	ose	listed above) who	0	, J		

		Check if	Schedule O co	ntains	a respons	e or note	to any line in this	Part VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelaled business revenue	(D) Revenue excluded from tax under sections 512-514
ts st	1a	Federated camp	aigns	1a				BRYT W		
and Other Similar Amounts	b	Membership due	S	1b		1		200	7	
Am	c	Fundraising ever	nts	1c						
ar	c	Related organiza	ations	1d						
Ξ	е			1e						
S	1	All other contributions,		46						
the	0	and similar amounts no Noncash contributions i	t included above	1f						
9	8		TOTAL TOTAL CONTRACTOR	. 1g	\$					
an	r	Total. Add lines	1a–1f	-		701003707				
					8	usiness Code				
- 1	2a	INTEREST ON	N PERSONAL LOAN	ıs			1,561,648	1,561,648		
Revenue	b	INTEREST ON	N BUSINESS LOAN	ទេ			469,464	469,464		
Sun	С	INTERES INC	COME VISA CARDS	00 1000000	NAME OF THE PARTY		77,667	77,667		
Seve	d	INTERCHANGE	E INCOME DEBIT	CARD			58,747	58,747		
~	е	NSF ACH FEE		61223333			32,195	32,195		
	f	All other program	service revenue				114,526	100,777	13,749	=
			2a–2f		27	orining .	2,314,247			
1	3		ne (including divide							
- 1		other similar amo	ounts)			evalueses -	52,925	52,925		
1	4	Income from inve	estment of tax-exem	pt bond	proceeds					
- 1	5	Royalties				*****	20,843	20,843		
			(i) Rea	ı	(ii) Per	sonal				
1	6a	Gross rents	6a							
- 1	b	Less: rental expenses	6b						100	
	С	Rental inc. or (loss)	6c						100	
	d	Net rental income	e or (loss)							
1	7a	Gross amount from sales of assets	(i) Securit	ies	(ii) OI	her			7 -115	
1		other than inventory	7a							
١	þ	Less: cost or other								
5		basis and sales exps.	7b							
	С	Gain or (loss)	7c							
onioi iveveilde	d	Net gain or (loss)	***********			22220022				
5		Gross income from f						115		
		(not including \$								
1		of contributions repo								
1		1c). See Part IV, line	e 18	8a			100			
1	b		nses						Trail 1	
1			ss) from fundraising		******			in the same of the	1 2	
	9a	Gross income from	m gaming							
			rt IV, line 19	9a						
1	b		nses							
1			ss) from gaming ac							
1		Gross sales of inv					TEN KIN			
1		returns and allow		10a			504			
1	b	Less: cost of good		10b						
			ss) from sales of inv	entory .		1017007111				
1						usiness Code				
	11a	MISCELLANEO	US OPERATING I	NCOM		522100	12	12		
2	b				8.903000.000					
Revenue	C	.4 . 4		0.0000000000000000000000000000000000000	*******					
×	d	All other revenue		acaucinescens	00000000					
	е		1a–11d		The state of the s	******	12			
		Total revenue. S					2,388,027	2,374,278	13,749	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete 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, (B) Program service (D) Total expenses Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 308,307 308,307 Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 401,826 401,826 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 8,057 8,057 Other employee benefits 52,706 52,706 9 Payroll taxes 10 44,629 44,629 Fees for services (nonemployees): Management 20,725 þ Legal 20,725 Accounting 89,098 С 89,098 Lobbying e 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.) 12 Advertising and promotion 32,999 32,999 Office expenses 13 157,716 157,716 Information technology 14 15 Royalties Occupancy 47,140 16 47,140 17 Travel 3,565 3,565 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 3,883 19 3,883 20 20 20 Payments to affiliates 83,431 21 83,431 Depreciation, depletion, and amortization 27,705 22 27,705 Insurance 13,886 13,886 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) ATM EXPENSES 119,554 119,554 PROVISION FOR LOAN LOSSES 85,000 h 85,000 DATA PROCESSING EXPENSE 64,973 64,973 PROCESSOR EXPENSES d 21,254 21,254 e All other expenses 79,324 79,324 1,665,798 25 Total functional expenses. Add lines 1 through 24e 1,486,168 179,630 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

	art .	Check if Schedule O contains a response or note	to any line	in this Part X			同		
		·			(A) Beginning of year		(B) End of year		
	1	Cash—non-interest-bearing		MANAGEMENT CONTRACTOR	701,826	1	675,834		
	2	Savings and temporary cash investments			23,942,844	2	13,531,609		
	3	Pledges and grants receivable, net		OUT OF THE PARTY O		3			
	4	Accounts receivable, net			24,160	4	6,140		
	5	Loans and other receivables from any current or former							
		trustee, key employee, creator or founder, substantial co	ntributor, o	r 35%					
		controlled entity or family member of any of these person	ns	#159900000000000000000000000000000000000		5			
	6	Loans and other receivables from other disqualified pers	sons (as de	fined	3417				
ts		under section 4958(f)(1)), and persons described in sec	tion 4958(c))(3)(B)		6			
Assets	7	Notes and loans receivable, net		200000000000000000000000000000000000000	36,264,680	7	46,553,169		
ä	8	Inventories for sale or use				8			
	9	Prepaid expenses and deferred charges	ass shering		68,821	9	80,612		
	10a	Land, buildings, and equipment: cost or other							
		basis. Complete Part VI of Schedule D	10a	2,251,900					
	b	Less: accumulated depreciation	0.00	838,879	1,446,306	10c	1,413,021		
	11	Investments—publicly traded securities			1,434,000	11	2,854,000		
	12	Investments—other securities. See Part IV, line 11			12				
	13	Investments—program-related. See Part IV, line 11		988,933	13	1,073,048			
	14	Intangible assets	****			14			
	15	Other assets. See Part IV, line 11		88,858	15	137,587			
	16	Total assets. Add lines 1 through 15 (must equal line 33	3)	********	64,960,428	16	66,325,020		
	17	Accounts payable and accrued expenses			169,389	17	309,986		
	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 I			21			
es	22	Loans and other payables to any current or former office	r, director,						
≣		trustee, key employee, creator or founder, substantial co							
Liabilities		controlled entity or family member of any of these person	is			22			
- 1	23	Secured mortgages and notes payable to unrelated third	parties			23			
	24	Unsecured notes and loans payable to unrelated third pa				24			
	25	Other liabilities (including federal income tax, payables to							
		parties, and other liabilities not included on lines 17-24).	Complete F	Part X					
		of Schedule D			59,137,797		59,639,563		
\dashv	26	Total liabilities. Add lines 17 through 25			59,307,186	26	59,949,549		
ا ي		Organizations that follow FASB ASC 958, check here	9		to the second	1			
Balances		and complete lines 27, 28, 32, and 33.							
	27	Net assets without donor restrictions				27			
ă	28	Net assets with donor restrictions		28					
runa		Organizations that do not follow FASB ASC 958, che							
- -		and complete lines 29 through 33.				- 4			
2	29	Capital stock or trust principal, or current funds				30			
200	30	Paid-in or capital surplus, or land, building, or equipment	Paid-in or capital surplus, or land, building, or equipment fund						
	31	Retained earnings, endowment, accumulated income, or	other funds		5,653,242 5,653,242	31	6,375,471 6,375,471		
	32	Total liebilities and ant seed (%)	et assets or fund balances						
	33_	Total liabilities and net assets/fund balances		AND ADDRESS OF A STATE	64,960,428	33	66,325,020		

_	34 1033486			Pa	ge 14
P	art XI Reconciliation of Net Assets				
_	Check if Schedule O contains a response or note to any line in this Part XI				X
1	l otal revenue (must equal Part VIII, column (A), line 12)	1	2,38	38,	027
2	rotal expenses (must equal Part IX, column (A), line 25)	2	1,66	65,	798
3	Leveline less exherises, Subflact line 5 from line 1	3			229
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,65		
5	Net ufficialized gains (losses) on investments	5			
6	Bonated services and use of facilities	6			
7	Investment expenses Prior period adjustments	7			
8	r noi ponoa dajustinonts	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	6,37	75-4	471
Pa	art XII Financial Statements and Reporting	1		- /	
	Check if Schedule O contains a response or note to any line in this Part XII				П
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			. 00	110
	If the organization changed its method of accounting from a prior year or checked "Other," explain on		-		
	Schedule O.		1 - 1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	- 1	x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		. 20		-
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		11 II A		
b	Were the organization's financial statements audited by an independent accountant?		2b		x
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		2.0		÷
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	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 on	T-5-1-0-4-0-1-0-0	. 20	-	
	Schedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		. 3a	\dashv	
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		26		
	and describe any steps taken to undergo such audits		_ 3b	005	

Form **990** (2022)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection Employer identification number

G	EAUGA CREDIT UNION		34-1055466
P	art I Organizations Maintaining Donor Advised Full Complete if the organization answered "Yes" on F	nds or Other Similar Funds or A	
	The second secon	(a) Donor advised funds	(h) Funda and alban accounts
1	Total number at end of year	(a) Donor advised fullus	(b) Funds and other accounts
2	Aggregate value of contributions to (during year)		
3	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	L	
5	Did the organization inform all donors and donor advisors in writing that		
_	funds are the organization's property, subject to the organization's exclu	isive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in v		
	only for charitable purposes and not for the benefit of the donor or donor		
D.	conferring impermissible private benefit?	*****************	Yes No
P	art II Conservation Easements. Complete if the organization answered "Yes" on F	Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check a		
	Preservation of land for public use (for example, recreation or education of land for public use)		mnortant land area
	Protection of natural habitat	Preservation of a certified hist	·
	Preservation of open space	1 reservation of a certified filst	ione structure
2	Complete lines 2a through 2d if the organization held a qualified conserv	vation contribution in the form of a consen-	vation
	easement on the last day of the tax year.	valion contribution in the form of a conserv	Held at the End of the Tax Year
а			
	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic structure included the structure i	ded in (a)	2c 2c
Ч	Number of conservation easements included in (c) acquired after July 25	5 2006 and not on a	. 20
u	historic structure listed in the National Pogistor		
3	Number of conservation easements modified, transferred, released, extin	nguished or terminated by the conscients	2d
5		nguished, or terminated by the organization	n during the
4	Number of states where property subject to conservation easement is loc		
5			
5	Does the organization have a written policy regarding the periodic monitor	oring, inspection, nandling of	
6	violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of	raner presentates - maneface escabace escabace and	Yes No
Ü	otali and volunteer nours devoted to monitoring, inspecting, handling of	violations, and enforcing conservation eas	ements during the year
7	Amount of expanses incurred in monitoring increasing handling of title	Aines and antiquity	
•	Amount of expenses incurred in monitoring, inspecting, handling of violating	tions, and enforcing conservation easeme	nts during the year
	Dogs each corresponding accoment senseted on line 2(d) above a tief of		
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section 1/0(h)(4)(B)(i)	П., П.,
9	and section 170(h)(4)(B)(ii)?	*************	Yes No
9	In Part XIII, describe how the organization reports conservation easemer		
	balance sheet, and include, if applicable, the text of the footnote to the or organization's accounting for conservation easements.	rganization's financial statements that desi	cribes the
Pa	ort III Organizations Maintaining Collections of Art, I	Historical Traccuras or Other S	imilar Assets
	Complete if the organization answered "Yes" on F	form 990. Part IV. line 8.	illilar Assets.
1a	If the organization elected, as permitted under FASB ASC 958, not to rep		shoot works
-	of art, historical treasures, or other similar assets held for public exhibition	n education or research in furtherance of	nublic
	service, provide in Part XIII the text of the footnote to its financial stateme		public
ь	If the organization elected, as permitted under FASB ASC 958, to report		at works of
	art, historical treasures, or other similar assets held for public exhibition, or		
	provide the following amounts relating to these items:	eddcallon, or research in furtherance of po	ablic service,
	- · · · · · · · · · · · · · · · · · · ·		
	(i) Revenue included on Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X		***************************************
	If the organization received or held works of art, historical treasures, or ot	ther similar ecosts for financial calc.	**************************************
			ae ine
	following amounts required to be reported under FASB ASC 958 relating		
d	Revenue included on Form 990, Part VIII, line 1		***************************************
n	Assets included in Form 990, Part X		\$

Part III Organizations Maintainin	ng Collections of Art. I	listorical Treasures	or Other Si	milar Asso	te (continued)
3 Using the organization's acquisition access	sion, and other records, check	any of the following that ma	ke significant u	se of its	is (continued)
conconstructing (official all that apply);			_		
a Public exhibition		exchange program			
b Scholarly research	e Other			Order work as a con-	
c Preservation for future generations					
4 Provide a description of the organization's of XIII.	collections and explain how the	ey further the organization's	exempt purpos	e in Part	
	or receive donations of art, his	torical treasures, or other si	milar		-
Part IV Escrow and Custodial Ar	Tangomonto	organization's collection?		*********	Yes N
	n answered "Ves" on Ec	orm 000 Doct IV line 0		L	
Complete if the organizatio 990, Part X, line 21.	manswered res on re	orin 990, Part IV, line 9	, or reported	an amoun	t on Form
1a Is the organization an agent, trustee, custod	ian or other intermedians for a	ontributions or ather and			
included as Farm 000 D 120					[] [B]
b If "Yes," explain the arrangement in Part XIII	and complete the following to	hla:			Yes
, , , , , , , , , , , , , , , , , , ,	and complete the following ta	DIC.			A == a = 4
c Beginning balance					Amount
d Additions during the year		**********************		1c	
e Distributions during the year	************			1d	
f Ending balance		*************		1e	
2a Did the organization include an amount on F	orm 990 Part X line 21 for e	scrow or custodial account li	abilib.0	1f	
b If "Yes," explain the arrangement in Part XIII.	Check here if the explanation	has been provided on Dad	ability? ∨III		Yes
Part V Endowment Funds.	and explanation	nas been provided on Fait	AIII	**********	
Complete if the organization	n answered "Yes" on Fo	rm 990. Part IV-line 10	1		
		Prior year (c) Two years		Three was a basis	T 455 -
1a Beginning of year balance	(-)	(c) Two years	Dack (u)	Three years back	(e) Four years back
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 curre	ent vear end balance (line 1g	column (a)) held as:			
a Board designated or quasi-endowment	%	oolaliiii (a)) licid as.			
b Permanent endowment %	recence exectly				
c Term endowment %					
The percentages on lines 2a, 2b, and 2c show	ıld equal 100%.				
3a Are there endowment funds not in the posses	sion of the organization that a	re held and administered for	r the		
organization by:					Yes No
(ii) Unrelated organizations (iii) Related organizations					3a(i)
					0 (11)
b ii res on line sa(ii), are the related organizat	tions listed as required on Sch	edule R?	* * * * * * * * * * * * * * * * * *		3b
Describe in Fait Aill the intended uses of the	organization's endowment fun	ds.	*****		
Part VI Land, Buildings, and Equi	pment.				
Complete if the organization	answered "Yes" on For	m 990, Part IV, line 11	a. See Form	990. Part	X. line 10
Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulate		(d) Book value
	(investment)	(other)	depreciation		
a Land		320,381			320,381
b Buildings		1,333,047	315	,058	1,017,989
c Leasehold improvements					
d Equipment					
e Other	598,472		523	,821	74,651
tal. Add lines 1a through 1e. (Column (d) must eq	ual Form 990, Part X, column	(B), line 10c.)			1,413,021

Part VII	Investments – Other Securities.		
-	Complete if the organization answered "Yes" on	Form 990, Part IV, lir	ne 11h See Form 990 Part V lina 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
(1) Financial			
(2) Closely he	eld equity interests		
(3) Other	Personal for the state of the s		
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l otal. (Columi	n (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments – Program Related.		
	Complete if the organization answered "Yes" on I	orm 990, Part IV, lin	e 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Melhod of valuation:
724			Cost or end-of-year market value
(1)			
(2)			
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Dart IV	(b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.		
Part IX	Other Assets.	orm 990, Part IV, line	e 11d. See Form 990, Part X, line 15
Part IX	(b) must equal Form 990, Part X, col. (B) line 13.) Other Assets. Complete if the organization answered "Yes" on F (a) Description	orm 990, Part IV, line	
Part IX	Other Assets. Complete if the organization answered "Yes" on F	orm 990, Part IV, line	e 11d. See Form 990, Part X, line 15.
(1) (2)	Other Assets. Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
(1) (2) (3)	Other Assets. Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
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(1) (2) (3) (4) (5)	Other Assets. Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
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(1) (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
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Schedule D (Form 990) 2022 GEAUGA CREDIT UNION	34-1055466	Page 5
Part XIII Supplemental Information (continued)		

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(Form 990)

GCU 11/08/2023 8:42 AM SCHEDULE L

Department of the Treasury

Internal Revenue Service

Name of the organization

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Inspection

Employer identification number

The second second	GEAUGA CREDIT UN						34-	-10554	466					
Part I	Excess Benefit Transact	tions (section 50	(c)(3), section	501(c)(4)	, and section 50	(c)(29) organiza	tions o	nly).					
	Complete if the organization ans		rm 990, Part IV				990-EZ, Part V, I	ine 40	b,					
1	(a) Name of disqualified person	(b) relati	organizatio		u per	son and	(c) Description of t	ransactio	on		Yes) Correc	_	
(1)			organization	211				_			Tes	<u>`</u>	No	
(2)											_	+		
(3)											+	\top	_	
(4)											1	\neg		
(5)														
(6)														
under s	ne amount of tax incurred by the orga ection 4958 ne amount of tax, if any, on line 2, ab						erecenter com	Telifox Grand	- -					
Part II	Loans to and/or From Int	wered "Yes" on For	m 990-EZ, Par	t V, lii	пе 3	8a or Form 990,	Part IV, line 26; o	or if the	e					
	organization reported an amount													
	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan		_oan from org.?	(e) Original principal amount	(f) Balance due	by		by bo			(i) Written greement	
				То	From			Yes	No	Yes	No	Yes	No	
(1)														
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otal						\$		\vdash	-				-	
Part III	Grants or Assistance Ben Complete if the organization answ	nefiting Interestered "Yes" on Form	ted Person	IS. line 2	7.	Ψ		L						
	(a) Name of interested person		hip between interes	- 1	-	c) Amount of (d) Type of assistance		(e) P	urpose	of assi	stance		
(1)								+						
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SCHEDULE O (Form 990)

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 Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

GEAUGA CREDIT UNION

Employer identification number

34-1055466 Form 990, Part III - Additional Information Part VI, Line 2 - Related Party Information Among Officers Lisa K Briggs CEO Thomas Briggs Treasurer Form 990, Part VI, Line 6 - Classes of Members or Stockhol; ders Anyone who lives/works/worships/goes to school in Geauga, Trumbull, Portage, Ashtabula Counties may become a member. (Note: November of 2016, GCU was granted a "Field of Membership" expansion from ODFI. GCU is offering same program services currently offered to Geauga County.) Appropriate membership application must be completed and processed along with a deposit which represents one share. This share is kept in a share savings for the life of the membership. This share entitles the member voting privileges in deciding the governing body; aka Board of Directors. Each director has a term of three years. Each year three positions are up for election. A short resume of each nominee is mailed to eachmember and available in office. In this mailing is a ballot and return envelope. When the ballot is returned to GCU they are held unopened until the Audit Committee meets to open and tally the votes. Election results are presented at the annual Meeting held the third Thursday of July. Form 990, Part VI, Line 7a - Election of Members and Their Rights. Anyone who lives, works, worships, goes to school in Geauga, Ashrtabula, Trumbull, Portage Counties may become a member. Appropriate membership application must be completed and processed along with a \$5 deposit that represents one For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022 Schedule O (Form 990) 2022

Name of the organization

GEAUGA CREDIT UNION

Employer identification number

34-1055466

share. This share is kept in share savings account for the life of the membership. This share entitles the member voting privileges in deciding the governing body; aka Board of Directors. Each director serves a three year term. Each year three positions are up for election. A short resume of each nominee is mailed to each member and available in office. In this mailing is a ballot and a return envelope. When the ballot is returned to GCU they are held unopened until the Audit Committee meets to open and tally the votes. Election results are presented at the annual Meeting held the third Thursday in July.

Form 990, Part VI, Line 11b - Organization's process of review Fprm 990

The 990 is completed by staff members who complete the data under the supervision of the CEO and Treasurer. They review and approve the 990, with the CEO signing off on the return prior to filing with the IRS. The 990 is also reviewed by the BOD prior to filing with the IRS

Form 990, Part VI, Line 12c - Enforcement of Conflict Policy

GCU has a process to determine Conflict of Interest regarding Board

Members Annually, the Board Members are required to complete a Conflict of Interest Annual Statement. These are summarized and maintained in a document present at each Board Meeting. If there is a possible conflict the Board Members complete a disclosure and it is reviewed by a non- conflicted Director and the CEO.If a Conflict of Interest is determined to exist, the conflicted Board Member is required to abstain from any discussion or vote in the matter.

Frm 990, Part VI, Line 15a - Compensation Process for Top Official - The Compensation Committee researches salaries and proposes the CEO's compensation. The Board will discuss and vote on CEO's compensation with the Treasurer abstaining. The Board performs an annual evaluation of the

Name of the organization

GEAUGA CREDIT UNION

Employer identification number

34-1055466

CEO's performance.

Form 990, Part VI, Line 18 - No Public Disclosure Explanation GCU also posts the Form 990 in the entry vestibule.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation. GCU ByLaws, monthly financial statements and other pertinent documents are posted in a secure display board in the office vestibule. additionaly any member cancan review/question any GCU policy by making an appointment. Form 990, Part IX, Line 11g - Other Fees for Services Description Tot/Program Services

Fund Raising

Form 990, Part VI, Line 2 - Related Party Information Among Officers LISA BRIGGS THOMAS BRIGGS

Mgt. & General

CEO BOARD MEMBER

FATHER IN LAW

Form 990, Part VI, Line 6 - Classes of Members or Stockholders THE CREDIT UNION IS FORMED UPON MEMBERSHIPS

Form 990, Part VI, Line 7a - Election of Members and Their Rights ALL BOARD MEMBERS ARE ELECTED BY THE MEMBERSHIP

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The credit union distributes the form 990 & 990-T to all board members and enters a motion to accept the return as prepared.

Form 990, Part VI, Line 15a - Compensation Process for Top Official OFFICER COMPENSATION IS DETERMINED BY THE BOARD

Page 2 of 3

Name of the organization		Employer identification number				
GEAUGA CREDIT UNION		34-10554				

Form 990, Part VI, Line 19 - Governing D	ocuments Disclosu	re Explai	nation			
Provided on request.						

Form 990, Part XI, Line 9 - Other Change	s in Net Assets E	xplanatio	on			
Rounding		\$	0			
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