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.

DLN: 93493217010321 OMB No. 1545-0047

Open to Public

Form **990**

Department of the

Treasu		enue Servio		ov/Form990 for instructions and the	e latest ir	itormation.		Inspection
				ning 01-01-2020 , and ending 12-	31-2020		_	
		applicable:	C Name of organization	<u> </u>		D Employ	er identifi	ication number
		change	Florida Credit Union	59-077	3154			
□ Na		_	Doing business as					
	tial re	turn n/terminate						
		d return		ail is not delivered to street address) Room/	suite	E Telepho	ne number	
□ Ар	plicati	on pendin	PO Box 5549			(352) 3	377-4141	
			City or town, state or province, coun	try, and ZIP or foreign postal code				
			Gainesville, FL 326275549			G Gross re	eceipts \$ 95	5,547,350
			F Name and address of principal	l officer:	H(a)	Is this a group re	turn for	
			Mark Starr PO Box 5549			subordinates?		□Yes ☑ No
			Gainesville, FL 326275549			Are all subordina included?	tes	☐ Yes ☐No
I Ta	x-exei	mpt status	s: ☐ 501(c)(3) ☑ 501(c)(14) ◄	(insert no.) 4947(a)(1) or 527		If "No," attach a	list. (see	
J W	ebsit	te:▶ w	ww.flcu.org		1	Group exemption	•	•
K Forr	n of o	rganizatio	n: 🗹 Corporation 🔲 Trust 🔲 Assoc	ciation D Other ►	L Year o	f formation: 1950	M State	of legal domicile: FL
		_	·					
Pa	art I	_	nmary					
			escribe the organization's mission or	r most significant activities: membership and from investments of n	nember fu	nds provide the f	oundation	from which the
ψ			tion can function and provide service		nember ru	nas provide the n	Junuacion	nom which the
E C	:			·				
Ĕ								
Activities & Governance	,	Chock t	his how by if the organization dis	continued its operations or disposed of	more that	a 25% of its not :	recete	
ن ت				g body (Part VI, line 1a)			3	7
> 5 ∽	l	Number	4	7				
I te	l	Total nu	5	0				
Š	l		• •	ressary)			6	0
ĕ	l		· ·	VIII, column (C), line 12			7a	481,828
	l			n Form 990-T, line 39			7b	0
	-					Prior Year		Current Year
	8	Contribu	utions and grants (Part VIII, line 1h)				0	0
Ę	9 Program service revenue (Part VIII, line 2g)		84,085,	502	28,080,449			
Rəvenue	l	-	• • • • •	1,335,		66,203,452		
ď	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)						334	17,080
	1			st equal Part VIII, column (A), line 12)		85,476,		94,300,981
	_		and similar amounts paid (Part IX, co			<u> </u>	0	0
	l		s paid to or for members (Part IX, co				0	
(0	l		,	nefits (Part IX, column (A), lines 5–10)		20,597,		23,210,205
Expenses	l		ional fundraising fees (Part IX, colun			20,337,	0	
9	l .		draising expenses (Part IX, column (D), li	, ,,			-	
শ্র	l		xpenses (Part IX, column (A), lines 1	· -		45,296,	959	52,681,620
	l		penses. Add lines 13–17 (must equ	, ,		65,894,		75,891,825
	l		e less expenses. Subtract line 18 fro	, , , , ,		19,582,		18,409,156
- S		Revenu	ress expenses. Subtract line 10 hr		Begi	inning of Current		End of Year
Net Assets or Fund Balances								
sse 3ala	20	Total as	sets (Part X, line 16)			1,266,313,	564	1,449,934,229
Z B	21	Total lia	bilities (Part X, line 26)			1,131,972,	740	1,297,184,248
žΞ	22	Net ass	ets or fund balances. Subtract line 2	21 from line 20		134,340,	824	152,749,981
Pa	rt II	Sigi	nature Block				<u>'</u>	
				ined this return, including accompanyin				
any k			er, it is true, correct, and complete.	. Declaration of preparer (other than of	ficer) is ba	ased on all inform	ation of v	√nich preparer has
		- La						
		**** Signa	** sture of officer			2021-07-29 Date		
Sign		y Sigria	tare of officer			Date		
Here	•		dy Koford CFO					
		I Iype	or print name and title	15			Part	
			Print/Type preparer's name	Preparer's signature	Date	Check \square if	PTIN	
Paid		}	Firm's name			self-employed Firm's EIN ►		
Pre			Time F			THIN S LIN P		
Use	Un	ııy [Firm's address ►			Phone no.		

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

. 🗌 Yes 🗌 No

Form	990 (2	(020)				Page 2
Pa	rt III	Statement of Program S	rvice Accomplishm	ents		_
		Check if Schedule O contains a	response or note to any	line in this Part III .		🗆
1	Briefly	describe the organization's mis				
		n credit union membership and fr ice to its restricted membership.	om investement of mem	ber funds provide the f	foundation from which the organiza	tion can function and
2	Did th					
	the pr	ior Form 990 or 990-EZ?				☐ Yes ☑ No
	If "Yes	s," describe these new services o	n Schedule O.			
3	Did th	e organization cease conducting	or make significant cha	nges in how it conducts	s, any program	
		es?				☐ Yes ☑ No
4	Descri Sectio	ibe the organization's program s	ervice accomplishments fizations are required to	report the amount of g	gest program services, as measure rants and allocations to others, the	
4a	(Code:) (Expenses \$	in	cluding grants of \$) (Revenue \$)
	•	Iditional Data			, (,
4b	(Code:) (Expenses \$	in	cluding grants of \$) (Revenue \$)
4c	(Code:)(Expenses \$	in	cluding grants of \$) (Revenue \$)
4d		program services (Describe in S	chedule O.) including grants of \$) (Revenue \$)
4e	Total	program service expenses ▶				

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

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

lines 1c and 8a? If "Yes," complete Schedule G, Part II

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

No Form **990** (2020)

Nο

Nο

Nο

18

19

20a

20b

21

18

19

	orm 990 (2020) Page 4								
Par	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 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No					
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes						
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b							
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c							
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d							
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a							
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</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	Yes						
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? <i>If "Yes," complete Schedule L,</i> Part III	27		No					
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):								
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No					
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No					
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No					
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No					
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No					
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No					
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b							
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36							
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No					
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes						
De	tV Statements Regarding Other TRS Filings and Tax Compliance			_					

Yes

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0

1c

1a

1b

No

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

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

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .

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

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)							
	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	0						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes					
b	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O							
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	4a		No				
ь	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No				
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service provided to the payor?	es 7a		No				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No				
d	If "Yes," indicate the number of Forms 8282 filed during the year	4						
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?	7 g						
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?	9 b						
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
a	Gross income from members or shareholders	4						
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
	Enter the amount of reserves on hand	_ 14a		No				
	14a Did the organization receive any payments for indoor tanning services during the tax year?							
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No				

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Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lines
Se	ction 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 7			
	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 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code		
10-	Did the constitution have been been been been been as affiliated.	10-	Yes	No
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a 10b	Yes Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the			
	form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	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		No
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> </u>
Se 17	ection C. Disclosure List the states with which a copy of this Form 990 is required to be filed			
-,	FL			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			

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

of reportable compensation from the organization						sateu	em	ployees who receive	ed more than \$100	,,000	
 List all of the organization's former director organization, more than \$10,000 of reportable control 											
See instructions for the order in which to list the			Jigan	IIZati	1011 6	and a	ıy ı c	elated organization	s.		
Check this box if neither the organization no	•		ion c	omp	ens	ated a	any o	current officer, dire	ctor, or trustee.		
(A) Name and title	(B) Average hours per week (list any hours for related	Position that persuand	n (do an on on is	(C) o not e bo both) t che ox, u n an or/tr	eck m inless office ustee	ore er	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
(1) Alfred Peoples Director	0.00	Х						0	0	0	
(2) Lynn Jones	0.00										
Director	0.00	Х						0	0	0	
(3) Judy Johnson Board Secretary	0.00	Х						0	0	0	
(4) Dr Jacquiline Hart	0.00										
Board Vice-Chair	0.00	Х						0	0	0	
(5) Dr Barbara Buys	0.00										
Board Treasurer	0.00	Х						0	0	0	
(6) William Hopgood	0.00										
Director	0.00	Х						0	0	0	
(7) Andrew Sutherland	0.00	Х						0	0	0	
Board Chair	0.00	X						0	0	0	
(8) David Eckardt	40.00			x				341,504	0	91,672	
SVP Operations/COO	0.00							341,304	0	51,072	
(9) Christine Suarez-Jenkins	40.00			X				330,673	0	34,830	
SVP Lending/CLO	0.00							223,212			
(10) Mark Starr	40.00			X				717,100	0	220,980	
President/CEO	0.00							·			
(11) Thomas Beck	40.00			Х				342,405	0	46,540	
SVP IS/CTO	0.00 40.00										
(12) Wendy Koford				Х				291,792	0	46,845	
SVP Finance/CFO	0.00 40.00										
(13) Beatrice Cherry					Х			220,612	О	27,789	
SVP Marketing	0.00 40.00										
(14) Evan Pitts SVP of Commercial Lending	0.00				Х			267,692	0	30,472	
(15) Wesley Colson	40.00					X		164,910	0	16,838	
VP Member Solutions	0.00					<u> </u>		104,510		10,030	
(16) Gregory Purvis VP Consumer Lending	40.00					x		155,516	0	18,162	
(17) Jane Harris	40.00										
VP Business Relationship Manager	0.00					Х		138,716	0	22,811	

Form 990 (2020)			_	_								Page 8
Part VII Section A. Officers, Directors	i i	ey Em	ploy			ıd Hiç	hes	1	1	(cont		
(A) Name and title	(B) Average hours per week (list any hours for related	than o	one bo both a direct	oox, u an of ctor/t	ot che unles officer truste	<u>, </u>	rson a	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensatio from relate organizatior (W-2/1099	on ed ns	Estima amount of compensions from	ated of other sation the
	organizations below dotted line)	lividual trustee director	Institutional Trustée	Officer	Key employee	Highest compensated employee	Former	(W-Z/1099- MISC)	(W-2/1099 MISC)		organizat relat organiza	ted
(18) Kirk Becker	40.00				Γ'	Х	['	148,811		0		23,857
VP Information Services	0.00 40.00		—	₩	—'	 	<u> </u> '	 				
(19) Daniel Arreola					'	X	'	136,760	,	0		20,931
VP Risk Management	0.00 40.00		₩	₩	 	—	<u> </u> '	 				
(20) Byron Zonin Former AVP of Mortgages	40.00						X	180,748		0		22,251
				<u> </u>								
			_	\vdash								
							\vdash					
to Total from continuation sheets to Part V d Total (add lines 1b and 1c)	VII, Section A t not limited to t			·	ove) w	>	ceiv	3,437,239 red more than \$100,		0		623,978
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for			key	emp •	loye •	e, or h	nighe	est compensated er	mployee on	3	Yes Yes	No
For any individual listed on line 1a, is the organization and related organizations greindividual	sum of reportal	able com							he	4		
5 Did any person listed on line 1a receive or services rendered to the organization? <i>If</i> "									dual for	5		No
Section B. Independent Contractors												
1 Complete this table for your five highest of from the organization. Report compensation										mpen	nsation	
	(A)		_	_				Descrip	(B)		(C)	
Sorenson Van Leuven Law Firm	business address							Attorneys	otion of services		Compen	649,592
PO Box 3637 Tallahassee, FL 32315 Williams Gautier Law Firm								Attorneys				289,847
PO Box 4128 Tallahassee, FL 32315								,,		ļ		205,-
Service Master Maintenance System PO BOX 141984		-						Cleaning Service	ces			273,403
Gainesville, FL 32614 Family Recovery Services LLC								Repossesion Fir	irm			184,283
PO Box 916 Archer, FL 32618	_								_			
Hamilton Lock and Safe 11302 NW 31st Road						-		Maintenance of	<i>i</i> equipment			145,959
Gainesville, FL 32606 2 Total number of independent contractors (in	ncluding but no	t limite	d to t	chos	e list	ted ab	ove)	who received more	 e than \$100,00	00 of		
compensation from the organization ▶ 5				_							Form 990	0 (2020)

		(2020)	of "	20105						Page 9
Part	VII				respo	nse or note to anv	line in this Part VIII			🗆
				G		and the same	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
10 £	1a	Federated campaigns 1a						revenue		<u> </u>
s, Grants Amounts	b	Membership dues		. [:	1b					
Am G		Fundraising events		<u> </u>	1c					
Gifts ilar		Related organization Government grants (ld le					
Contributions, Gifts, Grants and Other Similar Amounts				<u> </u>						
ution		above			1f					
d ji	g	Noncash contributions lines 1a - 1f:\$	s incl		1g					
Com	h	Total. Add lines 1a	a-1f			•				
						Business Code				
a n	2a	Other Operating Inco	me			522100	27,598,621	27,598,621		
nue	b Mechanical Breakdown				522291	439,648		439,648		
Program Service Revenue	_ ا	ATM Surcharges					42,180		42,180	
.vice						525990				
₹	d	1								
gran	 									
æ										
		All other program								
		Total. Add lines 2 Investment income				28,080,449 nterest, and other	1			
	!	similar amounts) .			•	•	67,399,89	9 67,399,899		
	l	Income from invest Royalties		it or tax-exer	npt bc	ond proceeds •	\ <u> </u>			
		•		(i) Rea	l	(ii) Personal				
	6a	a Gross rents	6a		38,976					
	b	Less: rental expenses	6b		21,896					
	С	Rental income					_			
	١,	or (loss) d Net rental income	6c		17,080		17,08	0 17,080		
				(i) Securit		(ii) Other		,		
	7 <i>a</i>	Gross amount from sales of	7a			28,02	6			
		assets other than inventory				,				
	b	Less: cost or other basis and	7b			1,224,47	3			
		sales expenses					_			
	l	Gain or (loss)	7 c			-1,196,44				
		d Net gain or (loss) a Gross income from fu					-1,196,44	7 -1,196,447		
3ne		(not including \$ contributions reported		of						
e∧e		See Part IV, line 18			8a					
Ä	l	b Less: direct expen			8b					
Other Revenue	'	c Net income or (los	ss) fr	rom fundraisi	ng eve	ents >	7			
J	9a	Gross income from See Part IV, line 19	gam	ing activities.						
	ŀ	b Less: direct expen			9a 9b		_			
	l	c Net income or (los			activiti	es >				
	10	aGross sales of inve	ento	rv. less						
		returns and allowa	ance	s	10a					
	l	Less: cost of good			10b					
	_	Net income or (los Miscellaneo			nvent	Business Code				
	11	La					1			
		b								
	,									
	`									
	,	d All other revenue	•		 					
	•	e Total. Add lines 1	1a-:	11d		•				
	12	2 Total revenue. S	ee ir	nstructions .			94,300,98	1 93,819,153	481,828	3 0
										Form 990 (2020)

Section 501(c)(3) and 501(c)(4) comparisations must complete a loculume. All other organizations must complete column (A). Chock of Selective Control to any line in this Part X (1). Do not Include amount proposed on lines 6b, 70 (A). By 9b, 4nd 10b of Part VIII. 1 Grants and other assistance to domestic organizations and connectic governments. See Part VI, line 2 (1). 2 Grants and other assistance to domestic includus a. See Part VI, line 1 (2). 3 Grants and other assistance to foreign organizations, fireign governments, of Ferritory organizations, fireign governments, organizations, see Part VI, line 15 (2). 4 Benefits paid to a ferritory organization organiza	Ρ	art IX Statement of Functional Expenses				
Do not included amounts reported on lines 6b, (A) (B) (C) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D				_		· · · —
1. Grants and other assistance to demestic organizations and domestic governments. See Part V, line 21 2. Grants and other assistance to demestic individuals. See Part V, line 22 3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part V, line 15 and 15. 3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part V, line 15 and 15. 4. Seenfits paid to or for members 5. Compensation of current officers, directors, fusitees, and key employees 6. Compensation not included above, to dispatilified persons (as certified under section 4905 (1)) and persons described in organization of current officers, directors, fusitees, and key employees 6. Resonand has and contributions (include section 401 7. Other salaries and wrages 7. Section 4903 (section 4905 (1)) and persons described in 1,523,055 8. Resonand has accorded and contributions (include section 401 7. Other salaries and marges 7. Section 4903 (section 4905 (1)) and persons described in 1,523,055 8. Resonand has accorded and contributions (include section 401 7. Other salaries and marges 7. Section 4903 (section 4905 (1)) and persons described in 1,523,055 8. Resonand has accorded and contributions (include section 401 7. Other salaries and marges 7. Section 4903 (section 4905 (1)) and 1,523,055 8. Resonand has a disconsistent of the section 401 8. Resonand has a disconsistent of the section 401 8. Resonand has a section 4905 (section 4		not include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
Part IV, Ine 22 3 Crants and other assistance to fursign organizations, fursing 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 of current officers of cisqualified persons (as defined under section 4998(f)(1)) and persons described in section 4998(c)(3)(3) 7 Other salaries and wages. 1 16,343,355 8 Pension plan accrusis and contributions (include sect on 401 (k) and 403(b) employer contributions) 1 Person of plan accrusis and contributions. 1 Peyrol taxes. 1 1,404,493 1 Fees for services (non-employees): 1 Fees for services (non-employees): 2 Accounting. 1 Lobbying. 2 Professional fundral sing services. See Part IV, line 17 1 Investment management fees. 9 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 12g amount exceeds 10% of line 25, column (A) amount, list line 12g arepenses on Schedule O) 2 Advertising and promotion. 2 Advertising and promotion. 3 Office expenses. 4 1 Information technology 1 Conference, convertions, an emetings. 4 2 Other expenses. 4 2 Department of the value of the extension of the professional fundral sing services. See Part IV, line 17 2 Payments to strain exceeds 10% of line 25, column (A) amount, sit line 12g aspenses. 4 1 Information technology 1 2 Advertising and promotion. 3 Payments of travel or entertainment expenses for any feederal, state, or local public officials 5 Payments of travel or entertainment expenses for any feederal, state, or local public officials 1 Payments to arfillates. 2 Departments of travel or entertainment expenses for any feederal, state, or local public officials 5 Payments on Schedule O.) a Provision for Loan Loss b Prof and Outside Servic c Loan Servicing d Hiscellanous 2 Advertising and fundralising sinclustation. 5 Payments of the provision of Loan Loss b Profesion for Loan Loss b Profesion for Loan Loss b Profesion for Loan Loss 1 Paym	1			скрепосо	general expenses	СХРСПОСО
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 1958(f)(13)) and persons described in section 4958(f)(13) and persons described in section 4911 (x) and 492(b) employer contributions) (include section 4911 (x) and 492(b) employer contributions) 9 Other employee benefits 1	2	Grants and other assistance to domestic individuals. See				
Compensation of current officers, directors, trustees, and key employees	3	governments, and foreign individuals. See Part IV, lines 15				
key employees (4	Benefits paid to or for members				
defined under section 4958(f)(1)) and persons described in section 4958(f)(3)(8)	5		2,511,778			
Sepsion plan accruais and contributions (include section 401 (k) and 403(b) employer contributions)	6	defined under section 4958(f)(1)) and persons described in				
(k) and 403(b) employer contributions)	7	Other salaries and wages	16,343,555			
11 Pees for services (non-employees): a Planagement b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other (Fill ine 1) amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 2 Advertising and promotion 3 J.796,876 3 Office expenses 6 J.211,854 4 Information technology 15 Royalties 6 Occupancy 1, 605,906 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 473,441 20 Interest 11,916,057 12 Payments to affiliates 20 Depreciation, depletion, and amortization 21 Insurance 22 Insurance 24 Other 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 b Prof and Outside Servic c Loan Servicing 4,339,708 d Miscellanous 254,804 e All other expenses. Add lines 1 through 24e 75,891,825 10 Jint costs. Complete this line only if the organization reported in column (B) joint costs from a combined eclucation campaign and fundraising 30 licitation. Check here } If foliowing SOP 982-(485 695-720).	8		1,612,894			
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 Cher (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 12g expenses on Schedule O) 12 Advertising and promotion 3,295,826 13 Office expenses 6,211,854 14 Information technology 15 Royalties 16 Occupancy 1,695,996 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 473,441 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e. If fine 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Provision for Lean Less b Prof and Outside Servic c Loan Servicing d Miscellanous 254,804 e All other expenses 25 Joint costs. Complete this line only if the organization expensed in column (B) prict costs from a combined educational campaign and fundraising solicitation. Check here ▶ If following SOP 98-2 (ASC 958-720).	9	Other employee benefits	1,601,575			
a Management	10	Payroll taxes	1,140,403			
b Legal	11	Fees for services (non-employees):				
d Lobbying	ā	Management				
d Lobbying	ŀ	Legal	683,423			
e Professional fundraising services. See Part IV, line 17 f Investment management fees	c	Accounting	12,491			
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) 12 Advertising and promotion	ď	lLobbying				
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	•	Professional fundraising services. See Part IV, line 17				
(A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion	f	Investment management fees				
13 Office expenses	g					
14 Information technology	12	Advertising and promotion	3,296,826			
15 Royalties	13	Office expenses	6,211,854			
16 Occupancy	14	Information technology				
17 Travel	15	Royalties				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 19 Conferences, conventions, and meetings	16	Occupancy	1,605,906			
federal, state, or local public officials 19 Conferences, conventions, and meetings 11 Payments to affiliates 12 Depreciation, depletion, and amortization 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Provision for Loan Loss 14,040,000 b Prof and Outside Servic c Loan Servicing 4,539,708 d Miscellanous 254,804 e All other expenses 199,339 25 Total functional expenses. Add lines 1 through 24e 75,891,825 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).	17	Travel				
20 Interest	18					
21 Payments to affiliates	19	Conferences, conventions, and meetings	473,441			
22 Depreciation, depletion, and amortization 2,083,955	20	Interest	13,916,057			
23 Insurance 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Provision for Loan Loss b Prof and Outside Servic c Loan Servicing d Miscellanous e All other expenses 199,359 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 fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).	21	Payments to affiliates				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	22	Depreciation, depletion, and amortization	2,083,955			
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 b Prof and Outside Servic c Loan Servicing d Miscellanous e All other expenses 199,359 25 Total functional expenses. Add lines 1 through 24e 75,891,825 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).	23	Insurance				
a Provision for Loan Loss b Prof and Outside Servic c Loan Servicing d Miscellanous e All other expenses Total functional expenses. Add lines 1 through 24e 25 Total functional expenses. Add lines 1 through 24e 75,891,825 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).	24	miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e				
c Loan Servicing d Miscellanous e All other expenses Total functional expenses. Add lines 1 through 24e 25 Total functional expenses. Add lines 1 through 24e 75,891,825 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).		· · · · · · · · · · · · · · · · · · ·	14,040,000			
d Miscellanous e All other expenses 199,359 Total functional expenses. Add lines 1 through 24e 75,891,825 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).		b Prof and Outside Servic	5,363,796			
e All other expenses 199,359 25 Total functional expenses. Add lines 1 through 24e 75,891,825 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).		c Loan Servicing	4,539,708			
Total functional expenses. Add lines 1 through 24e 75,891,825 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).		d Miscellanous	254,804			
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720).		e All other expenses	199,359			
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).	25	Total functional expenses. Add lines 1 through 24e	75,891,825			
	26	reported in column (B) joint costs from a combined				
		Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2020)

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27

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32

33

Liabilities 22

Fund Balances

ō 29

Assets

Intangible assets .

Grants payable .

Page **11**

2,414,700

16,520,028

20,376,863

416.378

1,039,978

30,000,000

1,245,351,029

1.297.184.248

0

0

152.749.981

152,749,981

1,449,934,229

Form 990 (2020)

1,449,934,229

Check if Schedule O contains a response or note to any line in this Part IX
Charlest Cabadula O andrina a management as made to any line in this Bott IV

Investments—other securities. See Part IV, line 11 . . .

Total assets. Add lines 1 through 15 (must equal line 33)

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Organizations that follow FASB ASC 958, check here ▶

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here > 🗹 and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Investments-program-related. See Part IV, line 11

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Tax-exempt bond liabilities . .

	Beginning of year		End of year
Cash-non-interest-bearing	5,782,427	1	6,202,082
Savings and temporary cash investments	119.718.468	2	167.851.324

	_	Savings and temporary cash investments	110,710,100	_	101,001,021
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	8,017,969	4	33,952,169
	5	Loans and other 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	623,446	5	101,425
	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), and persons described in section $4958(c)(3)(B)$.		6	
, n	7	Notes and loans receivable, net	1,087,669,108	7	1,192,522,457

	5	Loans and other payables to any current or form key employee, creator or founder, substantial co- entity or family member of any of these persons	ontribu	tor, or 35% controlled	623,446	5	
	6	Loans and other receivables from other disqualif section $4958(f)(1)$), and persons described in se		6			
S	7	Notes and loans receivable, net	1,087,669,108	7	1,19		
sets	8	Inventories for sale or use		8			
Ass	9	Prepaid expenses and deferred charges			10,552,160	9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	43,119,826			

key employee, creator or founder, substantial centity or family member of any of these person	623,446	5	101,425		
Loans and other receivables from other disqual section $4958(f)(1)$), and persons described in s		6			
Notes and loans receivable, net			1,087,669,108	7	1,192,522,457
Inventories for sale or use		8			
Prepaid expenses and deferred charges			10,552,160	9	9,080,209
 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 	10a	43,119,826			
Less: accumulated depreciation	10b	21,829,991	19,293,427	10 c	21,289,835
Investments—publicly traded securities .				11	

1,849,800

12,806,759

15,423,371

24.619

1,086,656

20,000,000

1,095,438,094

1.131.972.740

1,266,313,564

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134.340.824

134,340,824

1,266,313,564

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a

3h

Nο

Form 990 (2020)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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.

Audit Act and OMB Circular A-133?

Additional Data

Software ID: Software Version:

EIN: 59-0773154

Income from credit union membership and from investment of members funds provide the foundation from which the organization can function and provide service to its

Name: Florida Credit Union

restricted membership.

Form 990, Part III, Line 4a:

Form 990 (2020)

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

DLN: 93493217010321

Open to Public

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

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

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

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

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

Inspection

Nai	Section 501(c)(4), (5), or (6) organ me of the organization	nzations. Complete Fait III.			Employ	er ide	entif	ication nun	nber
Flor	rida Credit Union				59-0773	3154			
Par	t I-A Complete if the org	anization is exempt under sect	tion 501(c) or is	s a sectio	n 527 d	orgar	niza	tion.	
1	"political campaign activities")	anization's direct and indirect political o		,			s for	definition of	
2		nditures (see instructions)					_		10,366
3		npaign activities (see instructions)							0
	•	anization is exempt under sect							
1		tax incurred by the organization under					_		
2 3		tax incurred by organization managers ection 4955 tax, did it file Form 4720 fo					\$_		
	-	,	,					☐ Yes	☐ No
4a	Was a correction made?							☐ Yes	☐ No
b	If "Yes," describe in Part IV.		ion F01/o)		501	(-)(5	•		
		anization is exempt under sect					-		
1 2	, ,	nded by the filing organization for secting rganization's funds contributed to othe	•			•	\$ <u>_</u>		
2						>	\$_		
3	Total exempt function expenditu	A 111: 4 12 F 1 1	E 4430 DOI						
	rotal exempt falletion expendite	ires. Add lines 1 and 2. Enter here and	on Form 1120-POL	., line 17b		>	\$		
4	·	orm 1120-POL for this year?					\$_	Ves	
4 5	Did the filing organization file Fo Enter the names, addresses and organization made payments. Fo of political contributions receive		of all section 527 p mount paid from th ered to a separate	olitical orga e filing orga political org	inizations anization' anization	s to wl 's func	ds. Al	lso enter the	
	Did the filing organization file Fo Enter the names, addresses and organization made payments. Fo of political contributions receive	orm 1120-POL for this year?d d employer identification number (EIN) or each organization listed, enter the a d that were promptly and directly deliv	of all section 527 p mount paid from th ered to a separate	oolitical orga e filing orga political org ion in Part I	inizations anization' anization	s to wl s func n, such	ds. Al	the filing Iso enter the	e amount egregated of political s received potly and vered to a political n. If none,
	Did the filing organization file Fo Enter the names, addresses and organization made payments. Fo of political contributions receive fund or a political action commit	orm 1120-POL for this year?	of all section 527 p mount paid from th ered to a separate d, provide informat	oolitical orga e filing orga political org ion in Part I	inizations anization anization V. ount paid organizat If none,	s to wl s func n, such	ds. Al	the filing so enter the a separate so (e) Amount contribution: and prom directly deliv separate organization	e amount egregated of political s received potly and vered to a political n. If none,
	Did the filing organization file Fo Enter the names, addresses and organization made payments. Fo of political contributions receive fund or a political action commit	orm 1120-POL for this year?	of all section 527 p mount paid from th ered to a separate d, provide informat	oolitical orga e filing orga political org ion in Part I	inizations anization anization V. ount paid organizat If none,	s to wl s func n, such	ds. Al	the filing so enter the a separate so (e) Amount contribution: and prom directly deliv separate organization	e amount egregated of political s received potly and vered to a political n. If none,
	Did the filing organization file Fo Enter the names, addresses and organization made payments. Fo of political contributions receive fund or a political action commit	orm 1120-POL for this year?	of all section 527 p mount paid from th ered to a separate d, provide informat	oolitical orga e filing orga political org ion in Part I	inizations anization anization V. ount paid organizat If none,	s to wl s func n, such	ds. Al	the filing so enter the a separate so (e) Amount contribution: and prom directly deliv separate organization	e amount egregated of political s received potly and vered to a political n. If none,
	Did the filing organization file Fo Enter the names, addresses and organization made payments. Fo of political contributions receive fund or a political action commit	orm 1120-POL for this year?	of all section 527 p mount paid from th ered to a separate d, provide informat	oolitical orga e filing orga political org ion in Part I	inizations anization anization V. ount paid organizat If none,	s to wl s func n, such	ds. Al	the filing so enter the a separate so (e) Amount contribution: and prom directly deliv separate organization	e amount egregated of political s received potly and vered to a political n. If none,
	Did the filing organization file Fo Enter the names, addresses and organization made payments. Fo of political contributions receive fund or a political action commit	orm 1120-POL for this year?	of all section 527 p mount paid from th ered to a separate d, provide informat	oolitical orga e filing orga political org ion in Part I	inizations anization anization V. ount paid organizat If none,	s to wl s func n, such	ds. Al	the filing so enter the a separate so (e) Amount contribution: and prom directly deliv separate organization	e amount egregated of political s received potly and vered to a political n. If none,
	Did the filing organization file Fo Enter the names, addresses and organization made payments. Fo of political contributions receive fund or a political action commit	orm 1120-POL for this year?	of all section 527 p mount paid from th ered to a separate d, provide informat	oolitical orga e filing orga political org ion in Part I	inizations anization anization V. ount paid organizat If none,	s to wl s func n, such	ds. Al	the filing so enter the a separate so (e) Amount contribution: and prom directly deliv separate organization	e amount egregated of political s received potly and vered to a political n. If none,

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2020

ress,	EIN,	

Page 2

١	Check ▶ ☐ if the filing organization belongs expenses, and share of excess lob			in Part IV each a	ffiliated group	member's nam	e, add	ress, EIN,	
3	Check ▶ ☐ if the filing organization checked	box A and "li	mited control" p	rovisions apply.					
	Limits on Lobb	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)							
.a	Total lobbying expenditures to influence public	opinion (gras	s roots lobbying)			1		
	Total lobbying expenditures to influence a legis			1					
c	Total lobbying expenditures (add lines 1a and 1								
d	Other exempt purpose expenditures								
е	Total exempt purpose expenditures (add lines :	1c and 1d)							
f	Lobbying nontaxable amount. Enter the amoun columns.	t from the fol	lowing table in b	ooth					
	If the amount on line 1e, column (a) or (b) is: The lo	bbying nontaxa	able amount is:					
	Not over \$500,000	20% of	the amount on line	1e.					
	Over \$500,000 but not over \$1,000,000	\$100,00	0 plus 15% of the	excess over \$500,00	0.				
	Over \$1,000,000 but not over \$1,500,000	\$175,00	0 plus 10% of the	excess over \$1,000,0	000.				
	Over \$1,500,000 but not over \$17,000,000	\$225,00	0 plus 5% of the ex	cess over \$1,500,00	00.				
	Over \$17,000,000	\$1,000,0	000.						
j	If there is an amount other than zero on either section 4911 tax for this year?	ar Averagir	ng Period Und	der Section 50	1(h)			∕es □ No 	
	columns below. S	See the sep	oarate instruc	ctions for lines	2a throug	h 2f.)			
	Lobbying	Expenditu	res During 4-	Year Averagir	ng Period				
	Calendar year (or fiscal year beginning in)		(a) 2017	(b) 2018	(c) 2019	(d) 2020	,	(e) Total	
2a	Lobbying nontaxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
С	: Total lobbying expenditures						\perp		
d	Grassroots nontaxable amount						\perp		
e	Grassroots ceiling amount								

Part II-B, Line 1:

Crédit Unions.

or e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(;	1)		(b)
ctiv		Yes	No	Aı	nount
ı.	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1	
С	Media advertisements?			1	
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?	Yes			10,36
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				10,366
a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912			1	
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), o	r secti	on	
	501(c)(6).				W N-
ı	Mars substantially all (00% or mars) dues resolved pandadustible by mambars?		_	1	Yes No
	Were substantially all (90% or more) dues received nondeductible by members?		⊢		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		F	3	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			_	24 (-) (6
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	III-A,	line 3	on su B, is)1(c)(e
L	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
_	Int IV Supplemental Information				
• 1	Supplemental Information				
	did the decidation control for Death Allice 4, Death D. H. A. D. H. C. H. E. D. LY A. (2011)	D 77	A 1:	4 - 1	3 /-
Pro	vide the descriptions required for Part l-A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated group list); ructions), and Part II-B, line 1. Also, complete this part for any additional information.	Part II-	A, lines	1 and	2 (see

Payment to Florida Creidt Union Political Action Committee (CUPAC) received by the League of Southeastern

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493217010321

2020

OMB No. 1545-0047

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.

Open to Public

Schedule D (Form 990) 2020

Cat. No. 52283D

Department of the Treasury

(Form 990)

terna	al Revenue Service	► Go to <u>www.irs.gov/Form</u>	<u>1990</u> for instructio	ns and the latest info	rmation.	Ins	spection
	me of the organ ida Credit Union	nization			Employer ide	entification	number
					59-0773154		
Рa	rt I Organi	izations Maintaining Donor Advi- ete if the organization answered "Ye	sea Funas or Oti os" on Form 990 P	ner Similar Funds o Part IV line 6	or Accounts.		
	соттріс	te ii the organization answered Te		advised funds	(b) Fund	s and other	accounts
L	Total number at	end of year	, ,				
2	Aggregate value	of contributions to (during year)					
3		of grants from (during year)					
1		at end of year					
5		, ation inform all donors and donor adviso property, subject to the organization's ex				_	
5	Did the organiza	ation inform all grantees, donors, and do oses and not for the benefit of the donor	onor advisors in writi or donor advisor, or	ng that grant funds can for any other purpose o	be used only for	 r	Yes □ No
Pai		rvation Easements. ete if the organization answered "Ye	es" on Form 990, P	Part IV, line 7.			
L		onservation easements held by the organ					
	☐ Preservati	on of land for public use (e.g., recreation	n or education)	Preservation of an	historically imp	ortant land a	area
		of natural habitat	,	Preservation of a c			
		on of open space			ser annea mistorne	Jii decare	
2		2a through 2d if the organization held a e last day of the tax year.	qualified conservation	on contribution in the for		ation at the End o	of the Year
а	Total number of	conservation easements			2a		
b	Total acreage re	estricted by conservation easements			2b		
С	Number of cons	ervation easements on a certified histori	ic structure included	in (a)	2c		
d		ervation easements included in (c) acqui in the National Register	ired after 7/25/06, a	nd not on a historic	2d		
3	Number of cons tax year ►	servation easements modified, transferre	ed, released, extingui	ished, or terminated by	the organization	during the	
1	Number of state	es where property subject to conservatio	on easement is locate	ed ▶			
5		ization have a written policy regarding that of the conservation easements it holds			of violations,	☐ Yes	□ No
5	Staff and volunt	teer hours devoted to monitoring, inspec	cting, handling of vio	lations, and enforcing co	onservation ease		ng the year
7	Amount of expe	enses incurred in monitoring, inspecting,	handling of violation	s, and enforcing conser	vation easement	s during the	year
3		ervation easement reported on line 2(d) 0(h)(4)(B)(ii)?			70(h)(4)(B)(i)	☐ Yes	□ No
9	balance sheet, a	scribe how the organization reports cons and include, if applicable, the text of the	footnote to the orga			and	
ar	t IIII Örgani	n's accounting for conservation easemen izations Maintaining Collections	of Art, Historica		er Similar As	sets.	
		ete if the organization answered "Ye	·	· · · · · · · · · · · · · · · · · · ·		L L	-£4
La	historical treasu	ion elected, as permitted under FASB AS ures, or other similar assets held for pub ext of the footnote to its financial statem	lic exhibition, educat	ion, or research in furth			
b	historical treasu	ion elected, as permitted under FASB AS Ires, or other similar assets held for pub nts relating to these items:	SC 958, to report in it lic exhibition, educat	ts revenue statement ar ion, or research in furth	nd balance sheet erance of public	: works of ar service, pro	t, vide the
(_	ded on Form 990, Part VIII, line 1			▶\$		
		in Form 990, Part X					
2	If the organizat	ion received or held works of art, historints required to be reported under FASB	cal treasures, or othe	er similar assets for fina		de the	
а	=	ed on Form 990, Part VIII, line 1	-		▶\$		
b		in Form 990, Part X					

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

d Equipment .

Sche	dule D (f	Form 990) 2020									Page 2
Par	t 1111	Organizations M	aintaining Col	lections of Art	, Histori	ical Tre	asures, c	or Other	Similar As	sets (con	tinued)
3		the organization's acq (check all that apply):		n, and other record	,	any of th	ne following	that are a	significant u	ise of its co	llection
а		Public exhibition			d	□ ι	oan or exc	hange prog	ırams		
b		Scholarly research			e		Other				
С		Preservation for future	e generations								
4	Provide Part XI	e a description of the II.	organization's col	lections and expla	in how the	ey furthe	r the orgar	nization's e:	xempt purpo	se in	
5		the year, did the org to be sold to raise fu								☐ Yes	□ No
Pai		Escrow and Cust Complete if the or X, line 21.			orm 990), Part I	V, line 9,	or reporte	ed an amou	nt on For	m 990, Part
1a		organization an agent ed on Form 990, Part								Yes	☑ No
b	If "Vec	," explain the arrange	ement in Part VIII	and complete the	following	table:			Δι	mount	
c		ing balance			_			1c		inounc	
d	-	ns during the year .						1d			
e		utions during the yea						1e			
f		balance						1f			
2a	_	organization include						account lia	ahility?	V vec	 □ No
		," explain the arrange							•		
		Endowment Fun		. Check here it the	Схріанас	1011 1103 1	been provid	ica iii i aic .	XIII		
		Complete if the or		vered "Yes" on F	orm 990	, Part I	V, line 10				
				(a) Current year	(b) F	Prior year	(c) Two	years back	(d) Three yea	ars back (e	Four years back
	-	ng of year balance .									
		itions									
		stment earnings, gair	•								
	Other ex	or scholarships openditures for faciliti grams									
f		trative expenses .									
		ear balance									
э 2		the estimated perce		nt year and halan	co (lino 1	a colum	n (a)) hold	261			
۷,		designated or quasi-e	-	ent year end balan	ce (iiiie I	g, coluin	ii (a)) iielu	as.			
a b		nent endowment >									
_		endowment ►									
С		rcentages on lines 2a	 J. 2b. and 2c show	ld equal 100%							
3a	Are the	ere endowment funds zation by:	•		zation tha	t are hel	d and admi	inistered fo	r the		Yes No
	(i) Unr	related organizations								3a(i)
		lated organizations								3a(ii)
b		on 3a(ii), are the re								3b	
4		pe in Part XIII the inte			dowment	tunds.					
Pal		Land, Buildings, Complete if the or			orm 990). Part T	V. line 11.	a. See Fo	rm 990 Pai	rt X. line	10.
		tion of property	(a) Cost or oth	ner basis (b) Co	ost or other			ccumulated o			Book value
		,	(investme	ent)							
1a	Land .					8,517	,514				8,517,514
b	Buildings	s				12,661	,693		4,505,182		8,156,511
		ld improvements				1,912	,008		1,308,534		603,474

19,375,873

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

652,738

3,955,557

21,289,835

56,779

15,420,316

595,959

Part VII	Complete if the organization answered "Yes" on Form 990,	Part IV. li	ne 11b.See Form 990	. Part X	. line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Met	hod of va	
	held equity interests				
(3)Other					
(B) (C)					
(D)					
(E)		1			
(F)					
(G)					
(H)					
(I)					
	n (b) must equal Form 990, Part X, col. (B) line 12.)				
	Investments—Program Related.		no 11c. Soo Form 000) Dart \	/ line 12
	Complete if the organization answered 'Yes' on Form 990, (a) Description of investment	Part IV, II	(b) Book value	e (c	Method of valuation: or end-of-year market
(1)					value
(2)				+	
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Colum	n (b) must equal Form 990, Part X, col.(B) line 13.)		•		
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, lir	ne 11d. See Form 990, I	Part X, lir	ne 15.
(1)	(a) Description				(b) Book value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
				. •	
Part X	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P	art IV, lir	ne 11e or 11f.See Fori	n 990,	Part X, line 25.
1. (1) Fodoral	(a) Description of liability	•			look value
(1) Federal (2) Member	Deposits			1,184	,020,672
(3) Non-Men	nber Share Accounts			61	,330,357
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col.(B) line 25.)			▶ 1.245	5,351,029
2. Liability fo	or uncertain tax positions. In Part XIII, provide the text of the footnot			tements	
uncertain tax	x positions under FIN 48 (ASC 740). Check here if the text of the foot	note has b	een provided in Part XII	' '	

Schedule D (Form 990) 2020

Page 4

1	Total revenue, gains, and other su	upport per audited financial statements .		1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on ir	nvestments	2a		
b	Donated services and use of facilit	ties	2b		
С	Recoveries of prior year grants .		2c		
d	Other (Describe in Part XIII.) .		2d		
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, P	Part VIII, line 12, but not on line 1:			
а	Investment expenses not included	d on Form 990, Part VIII, line 7b 🔒	4a		
b	Other (Describe in Part XIII.) .		4b		
c	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c	c. (This must equal Form 990, Part I, line 1	2.)	5	
Par		penses per Audited Financial State		r Return.	
	•	zation answered 'Yes' on Form 990, P			
1	'	dited financial statements		1	
2	Amounts included on line 1 but no	, ,	1 1		
а	Donated services and use of facilit		2a	_	
b	Prior year adjustments		2b		
С	Other losses		2c		
d	Other (Describe in Part XIII.) .		2d		
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, P	art IX, line 25, but not on line 1:			
а	Investment expenses not included	d on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.) .		4b		
C	Add lines 4a and 4b			4c	
5		c. (This must equal Form 990, Part I, line	18.)	5	
Pai	t XIII Supplemental Info	rmation			
		art II, lines 3, 5, and 9; Part III, lines 1a ar 2d and 4b. Also complete this part to prov		art V, line 4;	Part X, line 2; Part
	Return Reference		Explanation		
See /	Additional Data Table				

chedule D (Form 990) 2020	Page 5
Part XIII Supplemental Inform	nation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2020

Additional Data

EIN: 59-0773154 Name: Florida Credit Union

Software ID: Software Version:

Supplemental Information

Return Reference

Part IV, Line 2b:

Escrow for Tax and Insurance on Members Mortgage and Commercial Loans.

Supplemental Information						
Return Reference	Explanation					
Part X, Line 2:	Effective January 1, 2009, the Credit Union implemented the new accounting requirements as sociated with uncertainty in income taxes using the provisions of Financial Accounting Sta ndards Board (FASB) ASC 740, Income Taxes. The guidance prescribes a minimum recognition t hreshold and measurement methodology that a tax position taken or expected to be taken in a tax return is required before being recognized in the financial statements. It also prov ides guidance for derecognition, classification, interest, and penalties, accounting in in terim periods, disclosure, and transition. As of September 30, 2020, the Credit Union has no uncertain tax positions that qualify for either recognition or disclosure in the financial statements. With few exceptions, the Credit Union is no longer subject to US federal I					

ncome tax examinations by tax authorities for years before 2014.

efil	le GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	19321	7010	321			
Schedule J		C	ompensat	ion Information	ON	1B No.	1545-0	0047			
(Fori	m 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.					2020 Open to Public				
-	tment of the Treasury al Revenue Service	► Go to <u>www.irs.go</u>	o <u>v/Form990</u> for	instructions and the latest inform	ation.		to Pul ectio				
Nar	me of the organiza	ation		E	Employer identificat						
Flor	ida Credit Union				59-0773154						
Pa	rt I Questi	ons Regarding Compensa	ntion	1.5							
							Yes	No			
1a				f the following to or for a person listed ny relevant information regarding these							
	_	s or charter travel		Housing allowance or residence for pe							
		companions		Payments for business use of persona							
	_	nification and gross-up payment	_	Health or social club dues or initiation							
	☐ Discretion	nary spending account	Ц	Personal services (e.g., maid, chauffe	eur, chef)						
b				follow a written policy regarding paym ve? If "No," complete Part III to explai		1b	Yes				
2				or allowing expenses incurred by all		2	Yes				
	directors, truste	es, officers, including the CEO/I	Executive Directo	r, regarding the items checked on Line	e la?						
3	organization's C	EO/Executive Director. Check a	Il that apply. Do	ed to establish the compensation of the not check any boxes for methods CEO/Executive Director, but explain in							
	☐ Compensa	ation committee		Written employment contract							
	Independ	ent compensation consultant	✓	Compensation survey or study							
	☐ Form 990	of other organizations	\checkmark	Approval by the board or compensati	on committee						
4	During the year related organiza		990, Part VII, Se	ection A, line 1a, with respect to the fili	ng organization or a						
а	Receive a sever	ance payment or change-of-con	ntrol payment? .			4a		No			
b	Participate in, o	r receive payment from, a supp	lemental nonqual	lified retirement plan?		4b	Yes				
C	• •	. ,		nsation arrangement?		4c		No			
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the app	olicable amounts for each item in Part I	III.						
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9							
5	For persons liste	ed on Form 990, Part VII, Section		the organization pay or accrue any							
	•	ontingent on the revenues of:				l _					
a	-	1?				5a					
b		anization?				5b					
6		ed on Form 990, Part VII, Section ontingent on the net earnings o		the organization pay or accrue any							
а	The organization	n?				6a					
b						6b					
	If "Yes," on line	6a or 6b, describe in Part III.									
7				the organization provide any nonfixed art III		7					
8	subject to the in	nitial contract exception describe	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," des		8					
9				presumption procedure described in R		9					
For I	Danarwork Body	iction Act Notice, see the Ins	structions for Fo	orm 990 Cat No. 50	053T Schedule 1	(Form	990)	2020			

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

(A) Name and Title		kdown of W-2 and/o compensation	or 1099-MISC	(C) Retirement and other	columns	(F) Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table	1	1	•			
	l	1		ı	Schedule J (Fo	orm 990) 2020

Schedule J (Form 990) 2020 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Return Reference Explanation Florida Credit Union purchases 3rd party salary surveys of competitive industries based on asset size. Part I, Line 3 Part I, Line 4b Mark Starr, 183.025.81 David Eckhardt 43.209

Schedule 1 (Form 990) 2020

Manager

12Daniel Arreola

VP Risk Management

(ii)

(i)

(ii)

108,936

25,760

Software ID:

Software Version:

EIN: 59-0773154

Name: Florida Credit Union

		(B) Breakdown	of W-2 and/or 1099-MISC	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred or prior Form 990
1Mark Starr President/CEO	(i)	568,714	125,410	22,976	220,400	580	938,080	
	(ii)	0	0	0	0	0	0	(
David Eckardt SVP Operations/COO	(i)	267,559	66,564	7,381	75,888	15,784	433,176	(
	(ii)	0	0	0	0	0	0	(
2 Thomas Beck SVP IS/CTO	(i)	264,361	60,008	18,036	35,323	11,217	388,945	(
	(ii)	0	0	0	0	0	0	(
Christine Suarez-Jenkins SVP Lending/CLO	(i)	262,476	63,139	5,058	32,625	2,205	365,503	(
- · · · - · · · · · · · · · · · · · · ·	(ii)	0	0	0	0	0	0	(
4Wendy Koford SVP Finance/CFO	(i)	233,704	58,088	0	34,792	12,053	338,637	(
	(ii)	0	0	0	0	0	0	(
5Evan Pitts SVP of Commercial Lending	(i)	217,692	50,000	0	30,472	0	298,164	(
3	(ii)	0	0	0	0	0	0	(
6Beatrice Cherry SVP Marketing	(i)	176,612	44,000	0	0	20,613	241,225	(
· · · · · · · · · · · · · · · · · · ·	(ii)	0	0	0	0	0	0	(
Byron Zonin Former AVP of Mortgages	(i)	156,854	14,641	9,253	20,193	2,058	202,999	(
	(ii)	0	0	0	0	0	0	(
BWesley Colson VP Member Solutions	(i)	111,563	46,497	6,850	13,931	2,907	181,748	(
	(ii)	0	0	0	0	0	0	(
Gregory Purvis VP Consumer Lending	(i)	137,727	12,947	4,842	17,657	505	173,678	(
	(ii)	0	0	0	0	0	0	(
10Kirk Becker VP Information Services	(i)	142,274	0	6,537	12,666	11,191	172,668	(
	(ii)	0	0	0	0	0	0	
	(i)	104,152	34,564		11,251	11,560	161,527	

2,064

16,380

4,551

157,691

0

0

0

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Schedule L		Tran	saction	ns with li	ntereste	d Person	S			10	1B No.	1545-0	047	
Form 990 or 990-l	EZ) ► Comple	te if the orga	anization a	nswered "Yes	s" on Form 9	90, Part IV, li	nes 2	5a, 2	25b, 26	5,	2020			
		27, 28a,		c, or Form 99 h to Form 99		', line 38a or 4 10-EZ.	ю.				20	20	<u>'</u>	
Department of the Treas Internal Revenue Service	,	Go to <u>www.ii</u>	rs.gov/Fori	m990 for inst	ructions and	the latest inf	orma	tion.			pen t Insp	o Put ectio		
Name of the organ Florida Credit Union	nization						Er	nplo	yer ide	ntifica	tion n	umber		
Florida Credit Onion							59	-077	3154					
	s Benefit Trai	,	,	, , , , ,		•	, , ,	_						
	te if the organiza													
1 (a)	Name of disquali	fied person	(b)		etween disqua organization	lified person an	id		escript ansacti		(d) Ye	Corre	No.	
					ga <u>-</u>		+				16	s	NO	
							-							
							+							
2 Enter the am	ount of tax incur	red by the org	ganization m	anagers or dis	qualified perso	ons during the	year u	ınder						
	ount of tax, if an						•			\$ —— \$				
D Enter the ann	ount or tax, ii an	y, on mic 2, c	bove, renna	arsea by the e	ngamzacion i		•		_	*				
	ns to and/or													
	olete if the organ ted an amount o				, Part V, line 3	38a, or Form 99	0, Par	rt IV,	line 26	; or if	he orga	anizatio	'n	
	(b) Relationship			• •	(e) Original	(f) Balance	(g)	In	(h)	(i)	Writte	 en	
nterested person	with organization		orgai	nization?		due	default? Appr		Appro	ved by	agi	agreement?		
										ard or mittee?				
			То	From			Yes	No	Yes	No	Yes	N	<u> </u>	
See Additional Data Table														
 Γotal				1	<u> </u> ▶ \$	101,425								
	ts or Assista					101,423								
	olete if the orga					, line 27.								
(a) Name of intere) Relationship		(c) Amount	of assistance	(d) Type o	f assi	stanc	:e	(e) Pu	pose of	assist	ance	
	int	erested perso organizat												
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Schedule I. (Form 990 or 990-F7) 2020.

Additional Data

Software ID:

Software Version:

EIN: 59-0773154

Name: Florida Credit Union

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e)Original principal amount	(f)Balance due	(g) In default?		(h) Approved by board or committee?			
			То	From			Yes	No	Yes	No	Yes	No
(1) William Hopgood	Vice Chairperson, Board Member	Credit Card		Х	20,000	1,484		No	Yes		Yes	
(1) Dr Barbara Buys	Director	Line of Credit		Х	5,500	0		No	Yes		Yes	
(2) David Eckhardt	SVP Operations/COO	Credit Card		Х	20,000	0		No	Yes		Yes	
(3) Wendy Koford	SVP Finance/CFO	Home Equity Loan		Х	120,000	39,144		No	Yes		Yes	
(4) Alfred Peoples	Director	Line of Credit		Х	7,000	0		No	Yes		Yes	
(5) Dr Jacquelyn Hart	Board Secretary	Line of Credit		Х	10,000	0		No	Yes		Yes	
(6) Andrew Sutherland	Board Treasurer, Board Member	Credit Card		Х	7,600	6,394		No	Yes		Yes	
(7) Alfred Peoples	Director	Home Equity LOC		Х	40,000	27,351		No	Yes		Yes	
(8) David Eckhardt	SVP Operations/COO	New Auto		Х	30,000	11,303		No	Yes		Yes	
(9) David Eckhardt	SVP Operations/COO	Secured LOC		Х	2,000	0		No	Yes		Yes	
(10) Andrew Sutherland	Board Treasurer, Board Member	Line of Credit		Х	500	0		No	Yes		Yes	
(11) Alfred Peoples	Director	Credit Card		Х	12,000	3,368		No	Yes		Yes	
(12) Judy Johnson	Director	Credit Card		Х	10,000	0		No	Yes		Yes	
(13) Mark Starr	President/CEO	Credit Card		Х	16,000	4,000		No	Yes		Yes	
(14)	SVP Marketing	Credit Card		Х	20,000	0		No	Yes		Yes	

Form 990, Schedule L, Part II - Loans to and from Interested Persons (a) Name of (b) Relationship (c) Purpose of (d) Loan to (e)Original (f)Balance due (g) In (i)Written (h) interested person with organization loan or from the principal default? Approved agreement? by board or organization? amount committee? То From Yes No Yes No Yes No (16)Director Credit Card 10,000 7,400 No Yes Yes Lynn Jones SR Credit Card 18,300 No Yes Director No Dr Barbara Buys (2) SVP Lending/CLO credit Card 4,000 No Yes lΝο Christine Suarez-Jenkins 1,000 981 (3) SVP Lending/CLO credit Card Х Νo Yes Yes Christine Suarez-Jenkins

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Name & the of grant Unio	on	lemental Informatio	on		Employer ident 59-0773154	ification number			
Return Reference		Explanation							
Form 990, Part VI, Section A, line 6	Anyone doing business with the credit union is a member.								

Return Explanation
Reference

990 Schedule O, Supplemental Information

line 7a

Form 990,
Part VI,
Section A.

An annual election is held for open spots on the board of directors and we are regulated by the Florida Division of Financials Institutions and the National Credit Union Administra tion.

Return Explanation
Reference

990 Schedule O, Supplemental Information

line 11b

Form 990,
Part VI,
Section B.

Auditors and examiners review the report and give a report to the board of directors.

990 Schedule O, Supplemental Information

Return Explanation

Reference

Form 990, Part VI,	Directors and employees are required to avoid conflicts of interest by Federal and State B anking laws. Staff and board are guestioned by auditors as part of the AICPA opinion audit
Section B, line 12c	

Return **Explanation** Reference

990 Schedule O, Supplemental Information

line 15

Form 990. Florida Credit Union purchases 3rd party salary surveys of competitive industries based on asset size. Part VI,

Section B.

Return Explanation
Reference

990 Schedule O, Supplemental Information

line 19

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Form 990,	Financial Statements are available in branch lobbies. Call reports on the web.
Part VI,	· ·
Section C	

990 Schedule O, Supplemental Information Return Explanation Reference Form 990, Part XI, line Rounding 1.