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CLIENT'S COPY



CliftonLarsonAllen

CliftonLarsonAllen LLP
8215 Greenway Boulevard, Suite 600
Middleton, WI 53562
608-662-8600 | fax 608-662-9142
CLAconnect.com

Worldwide Foundation for Credit
Unions, Inc.
P.O. Box 2982
Madison, WI 53701-2982
Attention: Mr. Robert Beers

Dear Robert:

Enclosed are the original and one copy of the 2016 Exempt
Organization returns, as follows...

2016 Form 990

2016 California Form RRF-1

2016 Illinois Form AG990-IL

2016 Wisconsin Form 1952

Be sure to review the returns prior to signing as you have
final responsibility for all information included in the
returns. If there is anything on the return you do not
understand, ask us to explain. We want you to be satisfied
with the accuracy of your return before filing. Copies of
each return should be retained for your files.

We are enclosing any documents you gave us to assist in the
preparation of the returns. We do not maintain original
client documents in our files.

Federal income tax law states that it is the taxpayer's
responsibility to maintain tax-related documents, including
copies of previously filed tax returns, for a sufficient
period of time. Generally, the Internal Revenue Code statute
of limitations period, in which items on a tax return can be
questioned, is three years from the date the return is filed.
Many states have a four year statute of limitations.

We generally recommend that you keep supporting documentation
for a minimum of six years; records that support basis for
items in the tax return should be kept indefinitely. We also
recommend that a copy of the actual tax return be kept
indefinitely. We believe keeping supporting documents for a
six-year period will protect you from most circumstances,
including longer statute of limitation periods that some

state or other regulatory agencies may impose. At the same time, we believe this policy will save you from paying unnecessary storage costs.

As a tax return preparer, we are required to give you a copy of your tax return when it is completed and maintain a copy in our files for a minimum of three years. We have and will continue to comply with this federally mandated requirement. If you have any specific questions, please feel free to contact us.

Pursuant to disclosure regulations, tax-exempt organizations must make available for public inspection a copy of their application for exemption indefinitely and their annual tax returns for the preceding three years. These documents must be made available without charge at the organization's principal, regional and district offices during regular business hours. In addition, an organization generally must furnish a copy of the application and annual tax returns to anyone who requests them in person or in writing. An exempt organization can avoid providing copies by posting all the documents on its website or at another organization's website as part of a database of similar materials. Specific requirements must be met to fit within this exception. As a courtesy we have provided a Public Disclosure Copy of your annual return for the current year, including Form 990-T if applicable.

If we have provided you tax advice in connection with the preparation of your U.S. federal tax return and associated tax planning services, this advice is not intended or written to be used by any taxpayer for the purpose of avoiding penalties that may be imposed on the taxpayer by the Internal Revenue Service, and it cannot be used by any taxpayer for such purpose.

We value our relationship with you and thank you for your trust and confidence in allowing us to serve you. If you have any questions regarding the returns or any other services that we can assist you with, please do not hesitate to contact us. Some of our best clients come through referrals from existing clients. If you know of anyone who could benefit from our assistance, we would be pleased to speak to him or her.

Sincerely,

Kimberly Anderson, CPA

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING
December 31, 2016

Prepared for	Worldwide Foundation for Credit Unions, Inc. P.O. Box 2982 Madison, WI 53701-2982
Prepared by	CliftonLarsonAllen LLP 8215 Greenway Boulevard, Suite 600 Middleton, WI 53562
Amount due or refund	Not applicable
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Not applicable
Return must be mailed on or before	Not applicable
Special Instructions	This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-EO to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-EO to us by November 15, 2017.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2016, or fiscal year beginning _____, 2016, and ending _____, 20____

2016

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**

▶ **Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.**

Name of exempt organization

**WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.**

Employer identification number

39-6093210

Name and title of officer

**BRIAN BRANCH
PRESIDENT & CEO**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, or 5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, or 5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b <u>1,592,356.</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize CLIFTONLARSONALLEN LLP to enter my PIN 70470
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ ******* THIS IS NOT A FILEABLE COPY ***** Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

39631288889

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2016 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ 10/03/17

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2016
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2016 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 2982 City or town, state or province, country, and ZIP or foreign postal code MADISON, WI 53701-2982 F Name and address of principal officer: BRIAN BRANCH SAME AS C ABOVE	D Employer identification number 39-6093210 E Telephone number 608-395-2000 G Gross receipts \$ 1,592,356. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.WOCCU.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
L Year of formation: 1965		M State of legal domicile: WI

Part I Summary

1	Briefly describe the organization's mission or most significant activities: SUPPORT CREDIT UNION SYSTEMS & MEMBERS IN DEVELOPMENT ACTIVITIES.		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	20
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9	Program service revenue (Part VIII, line 2g)	1,566,008.	1,301,547.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	463,325.	280,559.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	256.	10,250.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,029,589.	1,592,356.
14	Benefits paid to or for members (Part IX, column (A), line 4)	491,172.	447,500.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 89,422.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,504,812.	1,138,602.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,995,984.	1,586,102.
19	Revenue less expenses. Subtract line 18 from line 12	33,605.	6,254.
20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21	Total liabilities (Part X, line 26)	645,025.	962,397.
22	Net assets or fund balances. Subtract line 21 from line 20	79,439.	390,557.
		565,586.	571,840.

Part II Signature Block

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

Sign Here	Signature of officer BRIAN BRANCH, PRESIDENT & CEO Type or print name and title	Date _____			
Paid Preparer Use Only	Print/Type preparer's name KIMBERLY ANDERSON, CPA	Preparer's signature KIMBERLY ANDERSON, C	Date 10/03/17	Check if self-employed <input type="checkbox"/>	PTIN P00188889
Firm's name ▶ CLIFTONLARSONALLEN LLP		Firm's EIN ▶ 41-0746749			
Firm's address ▶ 8215 GREENWAY BOULEVARD, SUITE 600 MIDDLETON, WI 53562		Phone no. (608) 662-8600			

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
PEOPLE HELPING PEOPLE IS AT THE HEART OF WHAT THE WORLDWIDE FOUNDATION FOR CREDIT UNIONS DOES. AS THE GLOBAL PLATFORM DEDICATED TO SUPPORTING AND ADVANCING CREDIT UNIONS, CONTRIBUTIONS TO THE WORLDWIDE FOUNDATION ALLOWS WORLD COUNCIL TO TACKLE THE CRITICAL ISSUES FACING THE CREDIT

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 159,495. including grants of \$) (Revenue \$)
PARTNERSHIP PROGRAM

THE FOUNDATION'S INTERNATIONAL PARTNERSHIP PROGRAM BRINGS TOGETHER CREDIT UNION LEADERS FROM DEVELOPED AND EMERGING ECONOMIC SYSTEMS TO SHARE CUTTING-EDGE TECHNOLOGY AND BEST PRACTICES, PROVIDING NEW KNOWLEDGE AND RESOURCES FOR ALL PARTICIPANTS. CREDIT UNION EXECUTIVES AND VOLUNTEERS FROM AROUND THE WORLD HELPED BUILD STRONGER INSTITUTIONS IN 2016 THROUGH WORLD COUNCIL'S REGIONAL WORKSHOPS, INTERNATIONAL PARTNERSHIPS, IMMERSION TRAINING AND VOLUNTEER OUTREACH PROGRAMS. COLLABORATION THROUGH THE EXCHANGE OF BEST PRACTICES, SUCCESSFUL EXPERIENCES AND INNOVATIVE IDEAS HAS HAD A SIGNIFICANT IMPACT ON THE WAY CREDIT UNIONS SERVE THEIR COMMUNITIES.

4b (Code:) (Expenses \$ 312,709. including grants of \$ 355,000.) (Revenue \$ 0.)
TECHNICAL ASSISTANCE

CREDIT UNION DEVELOPMENT
THE WORLDWIDE FOUNDATION PROVIDED FUNDING TO WORLD COUNCIL OF CREDIT UNIONS TO SUPPORT ITS CREDIT UNION DEVELOPMENT ACTIVITIES. EXAMPLES OF WORLD COUNCIL'S DEVELOPMENT INITIATIVES INCLUDE THE FOLLOWING:

CREDIT UNION EXECUTIVES AND VOLUNTEERS FROM AROUND THE WORLD HELPED BUILD STRONGER INSTITUTIONS IN 2016 THROUGH WORLD COUNCIL'S REGIONAL WORKSHOPS, INTERNATIONAL PARTNERSHIPS, IMMERSION TRAINING AND VOLUNTEER OUTREACH PROGRAMS. COLLABORATION THROUGH THE EXCHANGE OF BEST

4c (Code:) (Expenses \$ 380,049. including grants of \$ 11,000.) (Revenue \$ 15,900.)
EDUCATION

THE GLOBAL WOMEN'S LEADERSHIP NETWORK IS A WORLDWIDE FOUNDATION PROGRAM THAT ADVANCES CREDIT UNION WOMEN IN LEADERSHIP. THE NETWORK PROVIDES WOMEN WITH ACCESS TO A GLOBAL COMMUNITY OF CREDIT UNION LEADERS DEDICATED TO ADVISING EACH OTHER AND TO CULTIVATING THE LEADERSHIP POTENTIAL OF WOMEN WORLDWIDE. IT ENGAGES CREDIT UNION WOMEN IN PROFESSIONAL AND PERSONAL DEVELOPMENT THROUGH SOCIAL MEDIA AND ONLINE RESOURCES, EDUCATIONAL PLATFORMS AND NETWORKING EVENTS. GLOBAL WOMEN'S ALSO SUPPORTS WORLD COUNCIL'S DEVELOPMENT PROGRAMS THAT FURTHER THE VISION AND MISSION OF ADVANCING WOMEN IN THEIR COMMUNITIES.

4d Other program services (Describe in Schedule O.)
(Expenses \$ 371,997. including grants of \$ 81,500.) (Revenue \$ 264,659.)

4e Total program service expenses **1,224,250.**

**WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.**

Form 990 (2016)

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i>	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
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? <i>If "Yes," complete Schedule C, Part III</i>		X
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, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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 foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Form **990** (2016)

WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.

Form 990 (2016)

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Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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>	X	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2016)

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	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.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

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

Section A. Governing Body and Management

			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 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.	1a	13		
b Enter the number of voting members included in line 1a, above, who are independent	1b	13		
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, or 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?	4			X
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 one or more members of the governing body?	7a		X	
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 by the following:				
a The governing body?	8a		X	
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 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9			X

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

			Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a			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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X	
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		X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		X	
13 Did the organization have a written whistleblower policy?	13		X	
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?				
a The organization's CEO, Executive Director, or top management official	15a			X
b Other officers or key employees of the organization	15b			X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a			X
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			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **WI, CA, IL**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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: **BRIAN BRANCH - 608-395-2000**
5710 MINERAL POINT RD, MADISON, WI 53705

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DANIEL BURNS CHAIR	1.00 1.00	X		X				0.	0.	0.
(2) PATRICK JURY 1ST VICE CHAIR	1.00 1.00	X		X				0.	0.	0.
(3) BRIAN MCCRORY 2ND VICE CHAIR	1.00 1.00	X		X				0.	0.	0.
(4) MANFRED ALFONSO DASENBROCK SECRETARY	1.00 1.00	X		X				0.	0.	0.
(5) BRUCE FOULKE TREASURER	1.00 1.00	X		X				0.	0.	0.
(6) MARK DEGOTARDI DIRECTOR	1.00 1.00	X						0.	0.	0.
(7) JAIME CHAVEZ SUAREZ DIRECTOR	1.00 1.00	X						0.	0.	0.
(8) RAFAL MATUSIAK DIRECTOR	1.00 1.00	X						0.	0.	0.
(9) STEVEN STAPP DIRECTOR	1.00 1.00	X						0.	0.	0.
(10) DR. CHUL-SANG MOON DIRECTOR	1.00 1.00	X						0.	0.	0.
(11) AARON MOSES DIRECTOR	1.00 1.00	X						0.	0.	0.
(12) MARTHA DURDIN DIRECTOR	1.00 1.00	X						0.	0.	0.
(13) GEORGE OTOTO DIRECTOR	1.00 1.00	X						0.	0.	0.
(14) CALYN OSTROWSKI EXECUTIVE DIRECTOR	40.00 1.00			X				0.	102,313.	10,896.

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Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1,301,547.				
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		1,301,547.			
Program Service Revenue	2 a <u>UKRAINE PROJECT</u>	Business Code 611430	264,659.	264,659.		
	b <u>EDUCATIONAL RECEPTIONS</u>	611710	15,900.	15,900.		
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		280,559.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)					
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a 10,250.				
		b Less: direct expenses	b 0.			
c Net income or (loss) from fundraising events			10,250.		10,250.	
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11 a						
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d					
12 Total revenue. See instructions.		1,592,356.	280,559.	0.	10,250.	

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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 **X**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	355,000.	355,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	92,500.	92,500.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management	667,172.	440,164.	159,237.	67,771.
b Legal	271.		271.	
c Accounting	5,382.		5,382.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	179,719.	152,713.	24,756.	2,250.
12 Advertising and promotion	18,061.	9,118.	3,194.	5,749.
13 Office expenses	34,064.	12,268.	16,480.	5,316.
14 Information technology	5,651.	5,407.	244.	
15 Royalties				
16 Occupancy	31,641.	1,533.	30,108.	
17 Travel	119,156.	108,822.	5,571.	4,763.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	43,234.	43,042.	192.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	7,985.		7,985.	
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 _____				
b _____				
c _____				
d _____				
e All other expenses _____	26,266.	3,683.	19,010.	3,573.
25 Total functional expenses. Add lines 1 through 24e	1,586,102.	1,224,250.	272,430.	89,422.
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)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	645,025.	1	946,596.	
	2 Savings and temporary cash investments		2		
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net		4	15,801.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L			6	
	7 Notes and loans receivable, net			7	
	8 Inventories for sale or use			8	
	9 Prepaid expenses and deferred charges			9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 19,851.			
	b Less: accumulated depreciation	10b 19,851.	0.	10c	0.
	11 Investments - publicly traded securities			11	
	12 Investments - other securities. See Part IV, line 11			12	
	13 Investments - program-related. See Part IV, line 11			13	
	14 Intangible assets			14	
	15 Other assets. See Part IV, line 11			15	
16 Total assets. Add lines 1 through 15 (must equal line 34)		645,025.	16	962,397.	
Liabilities	17 Accounts payable and accrued expenses	79,439.	17	318,170.	
	18 Grants payable		18		
	19 Deferred revenue		19	72,387.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23 Secured mortgages and notes payable to unrelated third parties			23	
	24 Unsecured notes and loans payable to unrelated third parties			24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			25	
	26 Total liabilities. Add lines 17 through 25		79,439.	26	390,557.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	204,495.	27	201,546.	
	28 Temporarily restricted net assets	361,091.	28	370,294.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances		565,586.	33	571,840.	
34 Total liabilities and net assets/fund balances		645,025.	34	962,397.	

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**WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.**

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1,592,356.
2	Total expenses (must equal Part IX, column (A), line 25)	1,586,102.
3	Revenue less expenses. Subtract line 2 from line 1	6,254.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	565,586.
5	Net unrealized gains (losses) on investments	
6	Donated services and use of facilities	
7	Investment expenses	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain in Schedule O)	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	571,840.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	3b	

WORLDWIDE FOUNDATION FOR CREDIT

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,734,698.	1,774,012.	1,502,024.	1,566,008.	1,301,547.	7,878,289.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,734,698.	1,774,012.	1,502,024.	1,566,008.	1,301,547.	7,878,289.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						479,901.
6 Public support. Subtract line 5 from line 4.						7,398,388.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	1,734,698.	1,774,012.	1,502,024.	1,566,008.	1,301,547.	7,878,289.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	427.					427.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						7,878,716.
12 Gross receipts from related activities, etc. (see instructions)					12	2,075,065.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	93.90 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	94.03 %
16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
2a			
2b			
3a			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

WORLDWIDE FOUNDATION FOR CREDIT

Schedule A (Form 990 or 990-EZ) 2016 UNIONS, INC.

39-6093210 Page 7

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

WORLDWIDE FOUNDATION FOR CREDIT

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Name of the organization

WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.

Employer identification number

39-6093210

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.	Employer identification number 39-6093210
-----------------------------------------------------------------------------	-----------------------------------------------------

Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CUNA MUTUAL GROUP 5910 MINERAL POINT ROAD MADISON, WI 53705	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	MITCHELL, SUSAN 1256 DENVER ST BOULDER CITY, NV 89006	\$ 89,005.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	NUMERICA CREDIT UNION PO BOX 4000 SPOKANE, WA 99037	\$ 31,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	PSCU PO BOX 31216 TAMPA, FL 33631	\$ 50,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	SCHOOLSFIRST FEDERAL CREDIT UNION PO BOX 11547 SANTA ANA, CA 92711-1547	\$ 36,600.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	THE VALERIE C. BROWN CHARITABLE FUND IN MEMORY OF WILLIAM R. MAPOTHER 1296 BARCLAY CT. BOWLING GREEN, KY 42103	\$ 42,103.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.	Employer identification number 39-6093210
-----------------------------------------------------------------------------	-----------------------------------------------------

Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	VANCITY PO BOX 2120, STATION TERMINAL VANCOUVER, BRITISH COLUMBIA, CANADA V6B 5R8	\$ 37,458.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.	Employer identification number 39-6093210
-----------------------------------------------------------------------------	-----------------------------------------------------

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.	Employer identification number 39-6093210
-----------------------------------------------------------------------------	-----------------------------------------------------

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2016

Open to Public Inspection

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

Name of the organization **WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.** **Employer identification number** **39-6093210**

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

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

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

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

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

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

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

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

Yes No

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

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

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

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

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

a Revenue included on Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2016

**WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.**

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.**

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

Part XIII Supplemental Information.

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

PART X, LINE 2:

WORLD COUNCIL AND THE FOUNDATION ARE EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(6) AND 501(C)(3) OF THE INTERNAL REVENUE CODE, RESPECTIVELY, AND A SIMILAR SECTION OF THE WISCONSIN INCOME TAX LAW, WHICH PROVIDES TAX EXEMPTION FOR CORPORATIONS ORGANIZED AND OPERATED EXCLUSIVELY FOR RELIGIOUS, CHARITABLE, OR EDUCATIONAL PURPOSES.

THE ORGANIZATIONS ARE REQUIRED TO ASSESS WHETHER IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAMINATION ON THE TECHNICAL MERITS OF THE POSITION ASSUMING THE TAXING AUTHORITY HAS FULL KNOWLEDGE OF ALL INFORMATION. IF THE TAX POSITION DOES NOT MEET THE MORE LIKELY THAN NOT RECOGNITION THRESHOLD, THE BENEFIT OF THAT POSITION IS NOT

Part XIII Supplemental Information *(continued)*

RECOGNIZED IN THE FINANCIAL STATEMENTS. THE ORGANIZATIONS HAVE DETERMINED
THERE ARE NO AMOUNTS TO RECORD AS ASSETS OR LIABILITIES RELATED TO
UNCERTAIN TAX POSITIONS. FEDERAL RETURNS FOR THE YEARS ENDED 2013 AND
BEYOND REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2016

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

Open to Public Inspection

Name of the organization
WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.

Employer identification number
39-6093210

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	PROGRAM SERVICES	THE INTERNATIONAL PARTNERSHIP PROGRAM, WHICH UNITES CREDIT UNION MOVEMENTS FROM	39,874.
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	FUNDRAISING		15,523.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	PROGRAM SERVICES	THE INTERNATIONAL PARTNERSHIP PROGRAM, WHICH UNITES CREDIT UNION MOVEMENTS FROM	19,937.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	EDUCATION	SUPPORT OF THE GLOBAL WOMEN'S LEADERSHIP NETWORK, WHICH CONNECTS CREDIT UNION WOMEN WITH	88,877.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	0	0	FUNDRAISING		32,162.
MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	0	0	PROGRAM SERVICES	FOLLOWING THE DEVASTATING 7.9 EARTHQUAKE IN NEPAL, WORLDWIDE FOUNDATION	33,386.
MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	0	0	FUNDRAISING		9,868.
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	TECHNICAL ASSISTANCE	GRANT GIVEN TO WORLD COUNCIL OF CREDIT UNIONS TO ASSIST WITH ITS DEVELOPMENT ACTIVITIES	67,476.
3 a Sub-total	0	0			307,103.
b Total from continuation sheets to Part I	0	0			995,258.
c Totals (add lines 3a and 3b)	0	0			1,302,361.

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

Schedule F (Form 990) 2016

SEE PART V FOR COLUMN (E) DESCRIPTIONS

**WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.**

Schedule F (Form 990)

39-6093210 Page 1

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	FUNDRAISING		19,944.
RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBIJAN, BELARUS,	0	0	PROGRAM SERVICES	THE INTERNATIONAL PARTNERSHIP PROGRAM, WHICH UNITES CREDIT UNION MOVEMENTS FROM	4,984.
RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBIJAN, BELARUS,	0	0	FUNDRAISING		79,699.
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA, FASO,	0	0	TECHNICAL ASSISTANCE	GRANT GIVEN TO WORLD COUNCIL OF CREDIT UNIONS TO ASSIST WITH ITS DEVELOPMENT ACTIVITIES	134,952.
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA, FASO,	0	0	EDUCATION	TRAVEL EXPENSES AND TUITION PAID TO CREDIT UNION PROFESSIONALS FROM KENYA TO ATTEND	110,609.
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA, FASO,	0	0	FUNDRAISING		72,581.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	TECHNICAL ASSISTANCE	GRANT GIVEN TO WORLD COUNCIL OF CREDIT UNIONS TO ASSIST WITH ITS DEVELOPMENT WORK IN	67,476.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	PROGRAM SERVICES	THE INTERNATIONAL PARTNERSHIP PROGRAM, WHICH UNITES CREDIT UNION MOVEMENTS FROM	14,953.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	EDUCATION	SUPPORT OF THE GLOBAL WOMEN'S LEADERSHIP NETWORK, WHICH CONNECTS CREDIT UNION WOMEN WITH	74,836.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	0	0	FUNDRAISING		67,343.
Totals					

**WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.**

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA,	NEPAL EARTHQUAKE ASSISTANCE	25,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA, FASO,	SUPPORT FOR ORPHANAGE EDUCATION FUNDING	11,000.	WIRE TRANSFER	0.		
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	GENERAL SUPPORT FOR DISASTER RELIEF	2,500.	WIRE TRANSFER	0.		
		SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA,	ECUADOR EARTHQUAKE AND CMG DISASTER	54,000.	WIRE TRANSFER	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **4**

3 Enter total number of other organizations or entities **4**

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC. (WF) MAKES ONLY A FEW GRANTS EACH YEAR. THESE ARE PAID TO ORGANIZATIONS THAT THE ORGANIZATION HAS HAD A PRIOR RELATIONSHIP WITH AND WHO ARE PART OF A GLOBAL NETWORK OF CREDIT UNIONS AND SIMILAR COOPERATIVE ORGANIZATIONS. MONITORING OF THE FUNDS IS DEPENDENT ON THE SIZE OF THE GRANT, THE PURPOSE AND THE STRENGTH OF THE RELATIONSHIP WF HAS WITH THE RECIPIENTS. SMALLER GRANTS, PARTICULARLY THOSE PAID TO OTHER FOUNDATIONS, DO NOT REQUIRE ADDITIONAL MONITORING. HOWEVER, FOR LARGER GRANTS OR THOSE PAID TO CERTAIN TYPES OF ORGANIZATIONS, WF WILL REQUEST THAT A FORMAL REPORT BE SUBMITTED BY THE RECIPIENT DOCUMENTING THE USE OF THE FUNDS.

PART I, LINE 3, COLUMN (E):**(A) REGION:**

CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,

(E) SPECIFIC TYPES OF SERVICES IN REGION: THE INTERNATIONAL PARTNERSHIP PROGRAM, WHICH UNITES CREDIT UNION MOVEMENTS FROM AROUND THE WORLD TO EXCHANGE IDEAS, BEST PRACTICES AND TECHNICAL EXPERTISE. THE PROGRAM BUILDS STRONGER INSTITUTIONAL CAPACITY THAT ULTIMATELY BENEFITS CREDIT UNION MEMBERS WHILE DEMONSTRATING THE COOPERATIVE IDEALS THAT CHARACTERIZE CREDIT UNIONS AND DISTINGUISH THEM AS FINANCIAL INSTITUTIONS. CENTRAL AMERICAN/CARIBBEAN PARTNERSHIPS INCLUDE BAHAMAS, BELIZE, COSTA RICA, DOMINICAN REPUBLIC, GUATEMALA, JAMAICA, AND TRINIDAD-TOBAGO.

CUSTOMIZED INTERNATIONAL TRAINING PROGRAMS WHICH PROVIDE TRAINING OPPORTUNITIES FOR CREDIT UNION EXECUTIVES, BOARD MEMBERS AND EMPLOYEES TO LEARN FROM CREDIT UNIONS IN OTHER COUNTRIES. CENTRAL AMERICAN/CARIBBEAN

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PROGRAMS INCLUDE EXCHANGES BETWEEN CREDIT UNIONS IN THE UNITED STATES AND COSTA RICA.

DEPARTMENT OF STATE PROGRAMS PROVIDE EXCHANGES BETWEEN INDIVIDUALS IN THE UNITED STATES, DOMINICAN REPUBLIC, AND GUATEMALA.

(A) REGION:

EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIU

(E) SPECIFIC TYPES OF SERVICES IN REGION: THE INTERNATIONAL PARTNERSHIP PROGRAM, WHICH UNITES CREDIT UNION MOVEMENTS FROM AROUND THE WORLD TO EXCHANGE IDEAS, BEST PRACTICES AND TECHNICAL EXPERTISE. EUROPEAN PARTNERSHIPS INCLUDE ESTONIA, POLAND AND ROMANIA.

(A) REGION:

EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIU

(E) SPECIFIC TYPES OF SERVICES IN REGION: SUPPORT OF THE GLOBAL WOMEN'S LEADERSHIP NETWORK, WHICH CONNECTS CREDIT UNION WOMEN WITH FELLOW LEADERS IN OTHER CREDIT UNION MOVEMENTS ALL OVER THE WORLD AND ENGAGES THEM IN PROFESSIONAL AND PERSONAL DEVELOPMENT THROUGH SOCIAL MEDIA AND EDUCATION FORUMS. MEMBERSHIP INCLUDES WOMEN FROM NORTH AMERICA, EUROPE, SOUTH AMERICA, AND AFRICA.

ACTIVITIES RELATED TO THE WORLD CREDIT UNION CONFERENCE INCLUDE THE ANNUAL SUPPORTERS' RECEPTION AND THE GLOBAL WOMEN'S LEADERSHIP NETWORK EDUCATIONAL SESSIONS.

(A) REGION:

MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,

(E) SPECIFIC TYPES OF SERVICES IN REGION: FOLLOWING THE DEVASTATING 7.9

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

EARTHQUAKE IN NEPAL, WORLDWIDE FOUNDATION PARTNERED WITH CUNA MUTUAL GROUP, THE IRISH LEAGUE OF CREDIT UNIONS FOUNDATION AND ASIA CONFEDERATION OF CREDIT UNIONS TO PROVIDE GRANTS TO REBUILD 30 SACCOS, REPAIR 17 BUILDINGS, RELOCATE 11 OFFICES, AND PROVIDE 123 SACCOS WITH NEW OPERATIONAL EQUIPMENT.

REGION: NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES
(E) SPECIFIC TYPES OF SERVICES IN REGION: GRANT GIVEN TO WORLD COUNCIL OF CREDIT UNIONS TO ASSIST WITH ITS DEVELOPMENT ACTIVITIES IN MEXICO.

REGION: RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBIJAN, BELARUS,
(E) SPECIFIC TYPES OF SERVICES IN REGION: THE INTERNATIONAL PARTNERSHIP PROGRAM, WHICH UNITES CREDIT UNION MOVEMENTS FROM AROUND THE WORLD TO EXCHANGE IDEAS AND TECHNICAL EXPERTISE WITH THE GOAL OF BUILDING STRONGER INSTITUTIONS FOR THE BENEFIT OF THEIR MEMBERS. RUSSIA IS ONE OF THE PARTICIPANTS IN THIS PROGRAM.

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA, FASO,
(E) SPECIFIC TYPES OF SERVICES IN REGION: GRANT GIVEN TO WORLD COUNCIL OF CREDIT UNIONS TO ASSIST WITH ITS DEVELOPMENT ACTIVITIES IN AFRICA.

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA, FASO,
(E) SPECIFIC TYPES OF SERVICES IN REGION: TRAVEL EXPENSES AND TUITION PAID TO CREDIT UNION PROFESSIONALS FROM KENYA TO ATTEND EDUCATIONAL PROGRAMS RELATED TO CREDIT UNION STRENGTHENING AND GOOD GOVERNANCE. SUPPORT OF THE GLOBAL WOMEN'S LEADERSHIP NETWORK, WHICH CONNECTS CREDIT UNION WOMEN WITH FELLOW LEADERS IN OTHER CREDIT UNION MOVEMENTS ALL OVER

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

THE WORLD AND ENGAGES THEM IN PROFESSIONAL AND PERSONAL DEVELOPMENT THROUGH SOCIAL MEDIA AND EDUCATION FORUMS. MEMBERSHIP INCLUDES WOMEN FROM NORTH AMERICA, EUROPE, SOUTH AMERICA, AND AFRICA.

(A) REGION:

SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,

(E) SPECIFIC TYPES OF SERVICES IN REGION: GRANT GIVEN TO WORLD COUNCIL OF CREDIT UNIONS TO ASSIST WITH ITS DEVELOPMENT WORK IN SOUTH AMERICA.

(A) REGION:

SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,

(E) SPECIFIC TYPES OF SERVICES IN REGION: THE INTERNATIONAL PARTNERSHIP PROGRAM, WHICH UNITES CREDIT UNION MOVEMENTS FROM AROUND THE WORLD TO EXCHANGE IDEAS, BEST PRACTICES AND TECHNICAL EXPERTISE. SOUTH AMERICAN PARTNERSHIPS INCLUDE BRAZIL, COLOMBIA, PARAGUAY AND PERU.

CUSTOMIZED INTERNATIONAL TRAINING PROGRAMS, WHICH PROVIDE TRAINING OPPORTUNITIES FOR CREDIT UNION EXECUTIVES, BOARD MEMBERS AND EMPLOYEES TO LEARN FROM CREDIT UNIONS IN OTHER COUNTRIES. SOUTH AMERICAN PROGRAMS INCLUDE EXCHANGES BETWEEN CREDIT UNIONS IN THE UNITED STATES, BRAZIL AND ECUADOR.

(A) REGION:

SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,

(E) SPECIFIC TYPES OF SERVICES IN REGION: SUPPORT OF THE GLOBAL WOMEN'S LEADERSHIP NETWORK, WHICH CONNECTS CREDIT UNION WOMEN WITH FELLOW LEADERS IN OTHER CREDIT UNION MOVEMENTS ALL OVER THE WORLD AND ENGAGES THEM IN PROFESSIONAL AND PERSONAL DEVELOPMENT THROUGH SOCIAL MEDIA AND EDUCATION

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

FORUMS. MEMBERSHIP INCLUDES WOMEN FROM NORTH AMERICA, EUROPE, SOUTH AMERICA, AND AFRICA.

(A) REGION:

CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,

(E) SPECIFIC TYPES OF SERVICES IN REGION: FOLLOWING TYPHOON HAIYAN THAT STRUCK THE PHILLIPINES IN NOVEMBER 2013, WORLD COUNCIL PARTNERS UP WITH THE CREDIT UNION FOUNDATION OF AUSTRALIA AND THE IRISH LEADUE OF CREDIT UNIONS TO REBUILD CREDIT UNIONS.

(A) REGION:

CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,

(E) SPECIFIC TYPES OF SERVICES IN REGION: GRANT GIVEN TO WORLD COUNCIL OF CREDIT UNIONS TO ASSIST WITH ITS DEVELOPMENT ACTIVITIES IN CENTRAL AMERICA.

REGION: RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBIJAN, BELARUS,

(E) SPECIFIC TYPES OF SERVICES IN REGION: SUPPORT OF THE UKRAINE CAP PROJECT. PURPOSE OF THE UKRAINE PROJECT IS TO STRENGTHEN THE CREDIT UNION SECTOR IN UKRAINE TO IMPROVE THE QUALITY OF THE FINANCIAL SERVICES AND PRODUCTS OFFERED TO FARMERS AND AGRIBUSINESS IN RURAL AREAS IN UKRAINE.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2016

**Open to Public
Inspection**

Name of the organization **WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.**

**Employer identification number
39-6093210**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
WORLD COUNCIL OF CREDIT UNIONS INC. - 5710 MINERAL POINT ROAD - MADISON, WI 53705	39-1143339	501(C)(6)	355,000.	0.			DEVELOPMENT ASSISTANCE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 0.

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

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

Schedule I (Form 990) (2016)

**WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.**

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

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

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

SCHEDULE I, PART I, LINE 2:

WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC. (WF) MAKES ONLY A FEW GRANTS EACH YEAR. THESE ARE PAID TO ORGANIZATIONS THAT THE ORGANIZATION HAS HAD A PRIOR RELATIONSHIP WITH AND WHO ARE PART OF A GLOBAL NETWORK OF CREDIT UNIONS AND SIMILAR COOPERATIVE ORGANIZATIONS. MONITORING OF THE FUNDS IS DEPENDENT ON THE SIZE OF THE GRANT, THE PURPOSE AND THE STRENGTH OF THE RELATIONSHIP WF HAS WITH THE RECIPIENTS. SMALLER GRANTS, PARTICULARLY THOSE PAID TO OTHER FOUNDATIONS, DO NOT REQUIRE ADDITIONAL MONITORING. HOWEVER, FOR LARGER

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.	Employer identification number 39-6093210
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FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

UNION INDUSTRY AND STRENGTHEN THE ECONOMIC SECURITY OF MEMBERS.

FUNDS RAISED IN 2016 SUPPORTED WORLD COUNCIL'S DEVELOPMENT EFFORTS AND

ADVANCED THE ORGANIZATION'S PARTNERSHIP PROGRAM, GLOBAL WOMEN'S

LEADERSHIP PROGRAM, NEPALESE AND ECUADORIAN CREDIT UNION REBUILDING,

AND WORLD COUNCIL YOUNG CREDIT UNION PEOPLE PROGRAM.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

IN 2016, THE INTERNATIONAL PARTNERSHIPS PROGRAM OVERSAW THE SIGNING OF

ONE NEW PARTNERSHIP AND FACILITATED SIX SOLUTION FOCUSED PARTNERSHIP

EXCHANGES IN SEVERAL COUNTRIES AROUND THE WORLD. IMMERSION TRAINING

PROGRAMS PROVIDED OPPORTUNITIES FOR 165 INTERNATIONAL PARTICIPANTS TO

ENGAGE WITH MORE THAN 100 CREDIT UNION AMBASSADORS AT DOZENS OF CREDIT

UNION ORGANIZATIONS. THE PROGRAM HELD REGIONAL WORKSHOPS IN BOTH

WASHINGTON D.C. AND BANGKOK, THAILAND WHERE SEVERAL HUNDRED CREDIT

UNION EXECUTIVES AND VOLUNTEERS GAINED EXPERIENCE FROM LEADERS IN THE

FIELDS OF PAYMENTS SYSTEMS, TECHNOLOGY, DIGITAL MEDIA AND ADVOCACY.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

PRACTICES, SUCCESSFUL EXPERIENCES AND INNOVATIVE IDEAS HAS HAD A

SIGNIFICANT IMPACT ON THE WAY CREDIT UNIONS SERVE THEIR COMMUNITIES.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

THE GLOBAL WOMEN'S LEADERSHIP NETWORK GREW TO 1,160 MEMBERS FROM 78

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

Name of the organization	WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.	Employer identification number	39-6093210
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COUNTRIES AND OVERSEES 32 LOCAL CHAPTERS, CALLED SISTER SOCIETIES, IN 13 COUNTRIES. OVER 1,000 ARTICLES OF CLOTHING, SCHOOL SUPPLIES, AND MATERIALS HAVE BEEN DONATED TO LOCAL CHARITIES IMPROVING WOMEN'S LIVES. ADDITIONAL PROGRAMMING INCLUDED THE ANNUAL GAC BREAKFAST AND LEADERSHIP FORUM.

GLOBAL WOMEN'S LEADERSHIP NETWORK COMPLETED ITS 2015-2016 EMPOWERMENT GRANT WORK WITH RECIPIENTS JULIET RAWLINSON, ELI ZGONJANIN, AND KRISTI LAZANO WHO TRANSFORMED THEIR LOCAL COMMUNITIES AND CHANGED THE LIVES OF WOMEN, YOUTH, AND FAMILIES WORLDWIDE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

DISASTER RELIEF

THE FOUNDATION GRANTED \$70,000 TO ADDRESS THE NEEDS OF FOUR ECUADORIAN CREDIT UNIONS INFRASTRUCTURE AND IMPROVE THEIR DISASTER CONTINGENCY SYSTEMS FOLLOWING THE DEVASTATING 7.8 MAGNITUDE EARTHQUAKE IN APRIL. EXPENSES \$ 107,338. INCLUDING GRANTS OF \$ 81,500. REVENUE \$ 0.

FEDERAL AGENCY - SUPPORTED DEV.

THE CREDIT FOR AGRICULTURE PRODUCERS (CAP) PROJECT IS A FOUR YEAR PROJECT (2016-2020) FUNDED BY USAID THAT WILL BE IMPLEMENTED BY WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC. WITH OVERSIGHT AND TECHNICAL ASSISTANCE FROM VOLUNTEERS FOR ECONOMIC GROWTH ALLIANCE (VEGA). THE PURPOSE OF THE PROJECT IS TO STRENGTHEN THE CREDIT UNION SECTOR IN UKRAINE TO IMPROVE THE QUALITY OF THE FINANCIAL SERVICES AND PRODUCTS OFFERED TO FARMERS AND AGRIBUSINESSES IN RURAL AREAS IN

Name of the organization	WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.	Employer identification number	39-6093210
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UKRAINE. THE CAP PROJECT WILL SUPPORT BROAD-BASED RESILIENT ECONOMIC DEVELOPMENT THROUGH A MULTI-FACETED APPROACH TO FURTHER DEVELOP UKRAINE'S CREDIT UNION SECTOR. IN ORDER TO ACHIEVE ITS OBJECTIVES, THE CAP PROJECT, WITH SUPPORT OF INTERNATIONAL, CREDIT UNION EXPERTS AND VOLUNTEERS, WILL WORK CLOSELY WITH THE NATIONAL COMMISSION ON REGULATION OF FINANCIAL SERVICES MARKETS AND THE TWO CREDIT UNION ASSOCIATIONS: THE ALL-UKRAINIAN CREDIT UNION ASSOCIATION (AUCUA) AND UKRAINIAN NATIONAL ASSOCIATION OF SAVINGS AND CREDIT UNIONS (UNASCU).

WORLD COUNCIL RECEIVED AN AWARD FROM THE U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT TO ADVANCE UKRAINE'S CREDIT UNION REGULATORY ENVIRONMENT AND STRENGTHEN THEIR CAPACITY TO LEND AGRICULTURE LOANS. THE PROJECT IS SUPPORTED BY THE WORLDWIDE FOUNDATION'S NETWORK OF VOLUNTEERS TO PROVIDE HIGH LEVEL TECHNICAL EXPERTISE AND MENTORSHIP.

EXPENSES \$ 264,659. INCLUDING GRANTS OF \$ 0. REVENUE \$ 264,659.

FORM 990, PART VI, SECTION A, LINE 7A:

THE GOVERNING DOCUMENT OF WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC. (WF) STATES THAT THE BOARD IS THE SAME AS THE WORLD COUNCIL OF CREDIT UNIONS, INC. (WOCCU) (EIN #39-1143339) BOARD. WOCCU'S BOARD IS CHOSEN BY ITS MEMBERS. THEREFORE, BY DEFAULT, WOCCU'S MEMBERS DETERMINE WF'S BOARD.

FORM 990, PART VI, SECTION A, LINE 7B:

THE BYLAWS ARE DETERMINED BY THE WOCCU MEMBERS AND CARRIED OUT BY THE WOCCU/WF BOARD MEMBERS. DECISIONS ARE MADE DIRECTLY BY THE BOARD MEMBERS.

FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION DOES NOT HAVE COMMITTEES.

Name of the organization **WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.**

Employer identification number
39-6093210

FORM 990, PART VI, SECTION B, LINE 11B:

THE TAX RETURN IS POSTED ON THE BOARD WEBSITE AND REQUIRED TO BE REVIEWED AND ACCEPTED BY THE BOARD OF DIRECTORS PRIOR TO SUBMISSION TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EMPLOYEES - WE HAVE A WRITTEN CONFLICT OF INTEREST POLICY AS PART OF OUR EMPLOYEE POLICIES, WHICH ARE POSTED ON THE EMPLOYEE INTRANET WEBSITE. ALL EMPLOYEES ARE INFORMED OF THE POLICIES AND REQUIRED TO STATE IN WRITING THAT THEY HAVE READ AND UNDERSTAND THE POLICIES. SENIOR MANAGERS ARE REQUIRED TO REPORT ANY CONFLICTS THAT THEY BECOME AWARE OF, EITHER THEIR OWN CONFLICTS OR OF THEIR STAFF.

BOARD - AT ALL COMMITTEE AND FULL BOARD MEETINGS, THE CHAIR OF THE MEETING IS REQUIRED TO STATE THE CONFLICT OF INTEREST POLICY AND ASK IF ANY BOARD MEMBERS HAVE A CONFLICT OF INTEREST FOR ANY ITEMS ON THE AGENDA. ANNUALLY, KEY EMPLOYEES AND BOARD MEMBERS ARE REQUIRED TO SIGN A STATEMENT THAT THEY HAVE DISCLOSED ALL CONFLICTS OF INTEREST. ANY INDIVIDUAL WITH A PERCEIVED OR ACTUAL CONFLICT OF INTEREST WILL BE RECUSED FROM ANY DISCUSSION OR VOTING ON THE MATTER TO WHICH THE CONFLICT RELATES.

FORM 990, PART VI, SECTION C, LINE 19:

THE QUALIFICATIONS & DUTIES OF BOARD MEMBERS AND THE CONFLICT OF INTEREST POLICY ARE POSTED ON THE BOARD WEBSITE. THE ANNUAL REPORT, WHICH INCLUDES A SUMMARY OF THE FINANCIALS, IS ALSO POSTED. IN ADDITION, CONTACT INFORMATION IS PROVIDED IN THE ANNUAL REPORT FOR ANYONE WHO WANTS TO REQUEST A COPY OF THE FULL AUDITED FINANCIALS. THE FULL BY-LAWS OF THE ORGANIZATION ARE NOT POSTED ON THE WEBSITE, BUT WILL BE SENT IF REQUESTED.

Name of the organization WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.	Employer identification number 39-6093210
-----------------------------------------------------------------------------	----------------------------------------------

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTANTS:

PROGRAM SERVICE EXPENSES	152,713.
MANAGEMENT AND GENERAL EXPENSES	24,756.
FUNDRAISING EXPENSES	2,250.
TOTAL EXPENSES	179,719.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	179,719.

FORM 990, PART XII, LINE 2C:

THE OVERSIGHT PROCESS FOR THE FINANCIAL STATEMENT REVIEW HAS NOT
 CHANGED FROM THE PRIOR YEAR.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization **WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.** Employer identification number **39-6093210**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
WORLD COUNCIL OF CREDIT UNIONS, INC. - 39-1143339, 5710 MINERAL POINT ROAD, MADISON, WI 53705	PROMOTE, SUPPORT, REPRESENT, AND SERVE THE WORLDWIDE CREDIT UNION	WISCONSIN	501(C)(6)		N/A		X

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule R (Form 990) 2016

SEE PART VII FOR CONTINUATIONS

WORLDWIDE FOUNDATION FOR CREDIT

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
WOCU SERVICES GROUP, INC. - 39-1984681 PO BOX 2982 MADISON, WI 53701	CREDIT UNION SERVICES	WI	N/A	C CORP	N/A	N/A	N/A		X
IRNET COOPERATIVE KENYA, LTD 3RD NGONG ROAD NAIROBI, KENYA	CREDIT UNION SERVICES	KENYA	N/A	C CORP	N/A	N/A	N/A		X
SERVIED, S.A. AV G VILLARROEEL NRO 1132 COCHABAMBA, BOLIVIA	CREDIT UNION SERVICES	BOLIVIA	N/A	C CORP	N/A	N/A	N/A		X
WOCU MEXICO, S DE R,L DE C.V. CALLE PLATEROS 102 COLONIA CARRETAS, MEXICO	CREDIT UNION SERVICES	MEXICO	N/A	C CORP	N/A	N/A	N/A		X
WOCU SERVICIOS DEL ECUADOR S.A. AV REPUBLICA E7-23 Y LA PRADERA, OFFICE 601 QUITO, ECUADOR	CREDIT UNION SERVICES	ECUADOR	N/A	C CORP	N/A	N/A	N/A		X

**WORLDWIDE FOUNDATION FOR CREDIT
UNIONS, INC.**

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

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

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses	X	
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) WORLD COUNCIL OF CREDIT UNIONS, INC.	B	355,000.	CASH GRANT
(2) WORLD COUNCIL OF CREDIT UNIONS, INC.	O	667,172.	FAIR MARKET VALUE
(3) WORLD COUNCIL OF CREDIT UNIONS, INC.	P	663,930.	FAIR MARKET VALUE
(4)			
(5)			
(6)			

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

WORLD COUNCIL OF CREDIT UNIONS, INC.

PRIMARY ACTIVITY: PROMOTE, SUPPORT, REPRESENT, AND SERVE THE WORLDWIDE
CREDIT UNION MOVEMENT

RELATED ORGANIZATIONS TAXABLE AS A CORPORATION OR TRUST

THE WOCCU SERVICES GROUP, INC. (WSG), A WHOLLY OWNED SUBSIDIARY OF
WORLD COUNCIL, IS A WISCONSIN FOR-PROFIT CORPORATION THAT WAS
INCORPORATED IN 1999. WSG CARRIES ON THE FOR-PROFIT ACTIVITIES OF
WORLD COUNCIL, INCLUDING PAYMENT SYSTEMS AND TECHNICAL ASSISTANCE TO
CREDIT UNION ORGANIZATIONS.

IRNET COOP KENYA LTD. IS A JOINT VENTURE BETWEEN WSG, KUSCCO (KENYA
UNION OF SAVINGS AND CREDIT CO-OPERATIVES) AND TWO KENYAN SAVINGS
INSTITUTIONS (SACCOS) ESTABLISHED ON JULY 1, 2005. THE PURPOSE OF THE
JOINT VENTURE IS TO CENTRALIZE MONEY TRANSFER REMITTANCES AND TO
PROVIDE TECHNOLOGY SOLUTIONS TO SACCOS VIA PAYMENT SYSTEMS IN KENYA.
WSG SOLD THEIR INTEREST IN THIS ENTERPRISE DURING 2016. WSG HAD A 61%
INTEREST IN THE ENTERPRISE AS OF DECEMBER 31, 2015.

SERVIRE S.A. IS A JOINT VENTURE BETWEEN WSG AND THREE BOLIVIAN CREDIT
UNIONS. IT WAS ESTABLISHED ON AUGUST 16, 2008, AND PROVIDES PAYMENT
SYSTEMS TO THE BOLIVIAN CREDIT UNION NETWORK. WSG SOLD THEIR INTEREST
IN THIS ENTERPRISE DURING 2016. WSG HAS A 98% INTEREST IN THE
ENTERPRISE AS OF DECEMBER 31, 2015.

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

WOCU MEXICO WAS ESTABLISHED ON SEPTEMBER 15, 2011, AND BEGAN OPERATIONS IN 2012. IT IS A JOINT VENTURE BETWEEN WSG AND TWO WORLD COUNCIL EMPLOYEES. THE PURPOSE OF THE JOINT VENTURE IS TO PROVIDE TECHNICAL ASSISTANCE TO CREDIT UNIONS IN MEXICO. WSG OWNED 25% AND 60% OF THE ENTERPRISE AS OF DECEMBER 31, 2016 AND 2015.

WOCU ECUADOR WAS ESTABLISHED ON JANUARY 17, 2013, AND BEGAN OPERATIONS IN 2014. IT IS A JOINT VENTURE BETWEEN WSG AND TWO WORLD COUNCIL EMPLOYEES. THE PURPOSE OF THE JOINT VENTURE IS TO PROVIDE TECHNICAL ASSISTANCE TO CREDIT UNIONS IN ECUADOR. WSG SOLD THEIR INTEREST IN THIS ENTERPRISE DURING 2016. WSG OWNED 98% OF THE ENTERPRISE AS OF DECEMBER 31, 2015.

TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM RRF-1

FOR THE YEAR ENDING
December 31, 2016

Prepared for	Worldwide Foundation for Credit Unions, Inc. P.O. Box 2982 Madison, WI 53701-2982
Prepared by	CliftonLarsonAllen LLP 8215 Greenway Boulevard, Suite 600 Middleton, WI 53562
Amount due or refund	Balance due of \$150.00
Make check payable to	Attorney General Registry of Charitable Trusts
Mail tax return and check (if applicable) to	Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470
Return must be mailed on or before	November 15, 2017
Special Instructions	The report should be signed and dated by the authorized individual(s).

MAIL TO:
 Registry of Charitable Trusts
 P.O. Box 903447
 Sacramento, CA 94203-4470
 Telephone: (916) 445-2021

WEB SITE ADDRESS:
<http://ag.ca.gov/charities/>

**ANNUAL
 REGISTRATION RENEWAL FEE REPORT
 TO ATTORNEY GENERAL OF CALIFORNIA**

Sections 12586 and 12587, California Government Code
 11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

State Charity Registration Number: CT 0136254 WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC. <small>Name of Organization</small> P.O. BOX 2982 <small>Address (Number and Street)</small> MADISON, WI 53701-2982 <small>City or Town, State and ZIP Code</small>	Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report Corporate or Organization No. _____ Federal Employer I.D. No. 39-6093210
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ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312)
 Make Check Payable to Attorney General's Registry of Charitable Trusts

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

PART A - ACTIVITIES

For your most recent full accounting period (beginning 01/01/2016 ending 12/31/2016) list:
 Gross annual revenue \$ 1,592,356. Total assets \$ 962,397.

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer "yes" to any of the questions below, you must attach a separate sheet providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, did non-program expenditures exceed 50% of gross revenues?		X
4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.		X
5. During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider.		X
6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.		X
7. During this reporting period, did the organization hold a raffle for charitable purposes? If "yes," provide an attachment indicating the number of raffles and the date(s) they occurred.		X
8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.		X
9. Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?	X	

Organization's area code and telephone number **608-395-2000**

Organization's e-mail address **MAIL@WOCU.ORG**

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

BRIAN BRANCH <small>Signature of authorized officer</small>	PRESIDENT & CEO <small>Title</small>
<small>Printed Name</small>	<small>Date</small>

TAX RETURN FILING INSTRUCTIONS

ILLINOIS FORM AG990-IL

FOR THE YEAR ENDING
December 31, 2016

Prepared for	Worldwide Foundation for Credit Unions, Inc. P.O. Box 2982 Madison, WI 53701-2982
Prepared by	CliftonLarsonAllen LLP 8215 Greenway Boulevard, Suite 600 Middleton, WI 53562
Amount due or refund	Balance due of \$115.00
Make check payable to	Illinois Charity Bureau Fund
Mail tax return and check (if applicable) to	Office of the Attorney General Charitable Trust Bureau 100 West Randolph St., 11th Floor Chicago, IL 60601-3175
Return must be mailed on or before	Please mail as soon as possible.
Special Instructions	The report should be signed and dated by the authorized individual(s).

ILLINOIS CHARITABLE ORGANIZATION ANNUAL REPORT

PMT #	_____
AMT	_____
INIT	_____

Attorney General LISA MADIGAN State of Illinois
Charitable Trust Bureau, 100 West Randolph
11th Floor, Chicago, Illinois 60601

CO # 01-052485

Report for the Fiscal Period:

Beginning 01/01/2016

& Ending 12/31/2016
MO DAY YR

Make Checks Payable to the Illinois Charity Bureau Fund

- Check all items attached:**
- Copy of IRS Return
 - Audited Financial Statements
 - Copy of Form IFC
 - \$15.00 Annual Report Filing Fee
 - \$100.00 Late Report Filing Fee

Federal ID # 39-6093210

Are contributions to the organization tax deductible? Yes No

Date Organization was created: 11/12/1965
MO DAY YR

LEGAL NAME WORLDWIDE FOUNDATION FOR CREDIT UNIONS, INC.	Year-end amounts	
MAIL ADDRESS P.O. BOX 2982	A) ASSETS	A) \$ 962,397.
CITY, STATE MADISON, WI	B) LIABILITIES	B) \$ 390,557.
ZIP CODE 53701-2982	C) NET ASSETS	C) \$ 571,840.
I. SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE	AMOUNT
D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	100.000%	D) \$ 1,592,356.
E) GOVERNMENT GRANTS & MEMBERSHIP DUES	%	E) \$
F) OTHER REVENUES	%	F) \$
G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100 %	G) \$ 1,592,356.
II. SUMMARY OF ALL EXPENDITURES DURING THE YEAR:		
H) OPERATING CHARITABLE PROGRAM EXPENSE	48.972%	H) \$ 776,750.
I) EDUCATION PROGRAM SERVICE EXPENSE	%	I) \$
J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)	48.972%	J) \$ 776,750.
J1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J):		\$
K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS	28.214%	K) \$ 447,500.
L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	77.186%	L) \$ 1,224,250.
M) MANAGEMENT AND GENERAL EXPENSE	17.176%	M) \$ 272,430.
N) FUNDRAISING EXPENSE	5.638%	N) \$ 89,422.
O) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	100 %	O) \$ 1,586,102.
III. SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES: (Attach Attorney General Report of Individual Fundraising Campaign- Form IFC. One for each PFR.)		
PROFESSIONAL FUNDRAISERS:		
P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS	100 %	P) \$ 0.
Q) TOTAL FUNDRAISERS FEES AND EXPENSES	%	Q) \$
R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)	%	R) \$
PROFESSIONAL FUNDRAISING CONSULTANTS:		
S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS		S) \$ 0.
IV. COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR:		
T) NAME, TITLE:		T) \$
U) NAME, TITLE:		U) \$
V) NAME, TITLE:		V) \$
V. CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDED) CODE CATEGORIES		List on back side of instructions CODE
W) DESCRIPTION: PARTNERSHIP PROGRAM		W) # 300
X) DESCRIPTION: EDUCATION		X) # 300
Y) DESCRIPTION: DISASTER RELIEF		Y) # 300

IF THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:

	YES	NO
1. WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?		<input checked="" type="checkbox"/>
2. HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR MISAPPROPRIATION OF FUNDS OR ANY FELONY?		<input checked="" type="checkbox"/>
3. DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?		<input checked="" type="checkbox"/>
4. HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES?		<input checked="" type="checkbox"/>
5. IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?		<input checked="" type="checkbox"/>
6. DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)		<input checked="" type="checkbox"/>
7a. DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?		<input checked="" type="checkbox"/>
7b. IF "YES", ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$ _____; (ii) THE AMOUNT ALLOCATED TO PROGRAM SERVICES \$ _____; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL \$ _____; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$ _____		
8. DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?		<input checked="" type="checkbox"/>
9. HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?		<input checked="" type="checkbox"/>
10. WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION, MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?		<input checked="" type="checkbox"/>
11. LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS: US BANK, PO BOX 524, ST. LOUIS, MO 63166-0524 SUMMIT CREDIT UNION, 401 S. YELLOWSTONE DRIVE, MADISON, WI 53705		
12. NAME AND TELEPHONE NUMBER OF CONTACT PERSON: BRIAN BRANCH - 608-395-2000		

ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS

UNDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS AND THE FACTS THEREIN STATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

BE SURE TO INCLUDE ALL FEES DUE:

- 1.) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.
- 2.) FOR FEES DUE SEE INSTRUCTIONS.
- 3.) REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A \$100.00 PENALTY.

BRIAN BRANCH

PRESIDENT or TRUSTEE (PRINT NAME)

SIGNATURE

DATE

PAUL TREINEN

TREASURER or TRUSTEE (PRINT NAME)

SIGNATURE

DATE

KIMBERLY ANDERSON, CPA

PREPARER (PRINT NAME)

SIGNATURE

DATE