

**Regulatory Information**

1. Please provide the date of the most recent annual meeting held by the credit union: 4/23/2025
2. Please provide the effective date of the most recent supervisory committee or financial statement audit: 12/31/2024
3. Please select the last type of audit performed for the credit union's records:
  - a. Financial statement audit performed by state licensed persons
  - b. Supervisory Committee audit performed by state licensed persons
  - c. Supervisory Committee audit performed by other external auditors
  - d. Supervisory Committee audit performed by the supervisory committee or designated staff
4. Provide the name of the Audit Firm or Auditor (see instructions) (b)(4); (b)(8)
5. Please provide the effective date of the most recent Supervisory Committee verification of member's accounts : 12/1/2025
6. Who completed the verification of member's accounts:  a. Supervisory Committee  b. Third Party
7. Provide your Supervisory or Audit Committee contact information for public/official correspondence
 

Mailing Address: (b)(4); (b)(8) Email: (b)(4); (b)(6); (b)(8)

Mailing City: (b)(4); (b)(8) State: (b)(4); Zip Code: (b)(4); (b)(8)
8. Provide the effective date of the most recent Bank Secrecy Act Independent Test: (b)(4);
9. Indicate the Fidelity Bond Provider Name : Other - TruStage CUMIS Insurance Society, Inc.
10. Indicate the amount of Fidelity Coverage for any Single Loss (RR 713.5): (b)(4); (b)(8)
11. Please provide Section 701.4 certification date (Federal Credit Unions Only): (b)(4); (b)(8)  
Certification Date
12. Please provide Section 701.4 certifier's name (Federal Credit Unions Only): (b)(4); (b)(6); (b)(8)  
Certified By
13. Please provide Section 701.4 certifier's job title (Federal Credit Unions Only): (b)(4); (b)(8)  
Job Title

**Equal Employment Opportunity**

14. Does your credit union meet any of the following criteria? (Yes/No) (b)(4); (b)(8)
  - Credit union with 100 or more employees; or
  - Credit union with 50 or more employees and:
    - 1) Has a contract of at least \$50,000 with the Federal government; or
    - 2) Serves as a depository of U.S. government funds of any amount; or
    - 3) Serves as a paying agent for U.S. Savings Bonds.
- a. If yes, what is the last date you filed an EEO-1 Survey Report with the U.S. Equal Employment Opportunity Commission (MM/DD/YYYY)? (b)(4); (b)(8)
- b. If yes, do you have a diversity policy and/or program in your credit union? (Yes/No) (b)(4); (b)(8)

**Home Mortgage Disclosure Act - Loan Application Register criteria**

15. Is your credit union located in a Metropolitan Statistical Area (MSA)? (b)(4); (b)(8) Yes No
16. Did your credit union originate at least one home purchase loan or refinance a home purchase loan secured by a first lien on a one-to-four unit dwelling during the preceding calendar year? (b)(4); (b)(8) Yes No
17. Did your credit union originate closed-end mortgages in each of the two preceding calendar years OR originate open-end lines of credit in each of the two preceding calendar years in excess of the HMDA Loan-Volume Threshold? (b)(4); (b)(8) Yes No
18. If you answered yes to all three questions, please provide your HMDA LAR filing date. (b)(4); (b)(8)

**Trade Names**

19. List any trade names the credit union uses for signage or advertising.
 
