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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

2008 Open to Public Inspection

	Engths 2009 a	alandar :	ear, or tax year beginning 7/01/08, and ending 6/30/0	ġ ·	-	
<u>A</u>	Check if applicable	Please	C Name of organization		D Emp	loyer identification number
ň	Addrass change	use IRS	UNITED METHODIST URBAN MINIS	STRIES	,	
님	-	label or	Doing Business As		62	-1294095
片	Nam + change	print or type.	Number and street (or P O box if mail is not delivered to street address)	Room/suite		phone number
\square	Initia Ireturn	See	P.O. BOX 324			1-648-9090
\sqcup	Termination	Specific Instruc-	City or town, state or country, and ZIP + 4		G Gross.re	ceipts\$ 474,32
П	Amended return					
百	Appli cation pending	F Nam	and address of principal officer		H(a) Is thi	s a group return for
		ĺ			affilia H(b) Are a	ites? Yes X
		[inclui	ded? Yes
					If "No	o," attach a list (see instructions)
上	Tax-exempt statu		501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	•		
<u></u>	Wellsite: ▶ 1				H(c) Grou	p exemption number
	Type of organization		· · · · · · · · · · · · · · · · · · ·	Year of formation		M State of legal domicile
	1	umma				
			ne organization's mission or most significant activities. THE DISADVANTAGED IN THE COMMUNITY.			
9	10 1	10010.	THE DISADVANTAGED IN THE COMMONITY.	•		
E E			,			
Activities & Govern			and the second s			•
ò	2 Check th	is box	if the organization discontinued its operations or disposed of more than	25% of its asset	s	
& Governance	3 Number	of voting	members of the governing body (Part VI, line 1a)		3	
	4 Number	of indep	ndent voting members of the governing body (Part VI, line 1b)		4	
Activities	5 Total nur	nber of e	mployees (Part V, line 2a)		5	
Ċ	6 Total nur	nber of v	olunteers (estimate if necessary)		6	
٩	7a Total gro	7a				
Revenue	_		iness taxable income from Form 990-T, line 34		7b	-
				Prior Yea		Current Year
•	8 Contribut	ions and	grants (Part VIII, line 1h)	474	,589	473,78
Ĕ	9 Program					
9V6	10 Investme	nt incom	e (Part VIII, column (A), lines 3, 4, and 7d)		.,172	54
IK.	11 Other rev	enue (P	irt VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		, 956	
_	12 Total reve	enue—a	d lines 8 through 11 (must equal Part VIII, column (A), line 12)		,717	474,32
			amounts paid (Part IX, column (A), lines 1-3)	116	,479	84,85
	14 Benefits	oaid to o	for members (PartitX Columny(A), line 4)			
g			npensation, employee benefits (Part IX, column (A), lines 5-10)	231	,024	277,29
penses	16a Professio	nal fund	aising fees (Part IX, column (A), line 11¢ (C)			
	b Total fund	traising e	xpenses (Fart IXA column 20) 2 hh 25)	THE TOTAL		127 24 2
Щ			art IX, column (A), lines 11a-11d, 11f-24	105	,964	125,924
	18 Total exp	enses. A	td lines 13-17 (must en led Part IK, Column A), line 25)		,467	488,072
			enses Subtract line 18 from line 12	31	,250	<u>–13,75</u> 0
S OC	,			Beginning of		End of Year
ala	20 Total ass	ets (Part	X, line 16)	201	,030	225,45
Net Assets or Fund Balances	21 Total liabi	lities (Pa	rt X, line 26)			38,176
			balances Subtract line 21 from line 20	201	,030	187,280
_Pa	úrt∛l/ Sig	natur	Block			
		er penalis	s of periury. I declare that I have examined this return, including accompanying schedules	and statements ar	nd to the be	st of my knowledge
	and	bele¶titis	s of perjury, I declare that I have examined this return, including accompanying schedules true, correct, and complete. Declaration of preparer (other than officer) is based on all info	rmation of which pi	reparer has	any knowledge
Sig	n k	Xon.	bra Haniton		12	118110
Jiy Ter		~~~	of officer	· · · · · · · · · · · · · · · · · · ·	Date	
. 1				CIAL DIR	ECTOR	Ł
			int name and title	548		-
		ype or p		<u> </u>		Preparer's identifying number
^o ai	-	arer's	Date	Check if self-		(see instructions)
	parer's	ature	July Weatly 2/13	3/10 employe	<u> </u>	P00137029
		's name (WEATHERSPOON, LOWE & WALLACE, P.	<u>c.</u>	EIN	▶ 20-0406758
JSE		f-employe	d), 631 MADISON ST	·	Phone	
	addı	ess, and	P+4 CLARKSVILLE, TN 37040		no 🕨	931-648-804
Mav	the IRS discuss	this ret	irn with the preparer shown above? (see instructions)			Yes N

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

	3) UNITED METHO				62-129	4095	·		Page
Partil.	Statement of Progra scribe the organization's mi		mplishment	s (see inst	ructions)				
•	IST THE DISAD		THE CON	MUNITY	•				
2 Dilthe or	ganization undertake any s	gnificant program ser	vices during the	year which w	ere not listed	d on			
•	Form 990 or 990-EZ?							Yes 2	▼ No
•	escribe these new services ganization cease conductin		changer in how	it conducts (2011 Drogram				
3 Diffhe or	gamzation cease conducting	g, or make significant	changes in now	it conducts, a	any program			☐ Yes 🏻	Ž No
	escribe these changes on S	Schedule O.			•				<u> </u>
	the exempt purpose achieve		-		-				
	01(c)(3) and 501(c)(4) organ			-	-	amount of	grants and		
arications	s to others, the total expens	es, and revenue, ir an	y, tor each progr	am service re	еропеа				
4a (Ctde) (Expenses \$		including grant	s of \$	9,	032) (Revenue \$	209,9	32)
•	USE WOMEN'S SH		<u></u>					•	
CH JLDRI	E SHELTER FOR	BATTERED, A	ND/OR HO	WETĖSS	WOMEN	ÄND			
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4b (Code	(Expenses \$ ASSISTANCE PRO	199,577	including grants	of \$	70,	185) (1	Revenue \$	199,5	77)
	SPECIFIC ASS	•	INDIVID	JALS -	MEDICA	AT.			
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45 (Codo) (Expenses \$		including grants	-(C		\			
4c (Code) (Expenses \$		including grants	01.2) (F	Revenue \$)
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		•			•	•	•		
	am services (Describe in S	chedule O)) including grants o	s e	5,636	\	- f	Q E00	١ ,	
(Expenses	am service expenses	110		equal Part IX,) (Revenue		8,500	<u>' </u>	
46 Inmit broth	ani out tide expeliates		Timust C	raus i all iA,	L 20, CU	(0/)		Form 990 /	(2008)

Part IV Checklist of Required Schedules

			Yes	_ No
1	l⊐ the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
2	complete Schedule A !sthe organization required to complete Schedule B, Schedule of Contributors?	. 1	X	x
3	Dd the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	1	+	 ^
	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	<u> </u>		1
-	Schedule C, Part II	4		x
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	 	 	-
_	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	1	
6	Od the organization maintain any donor advised funds or any accounts where donors have the right to	-	-	
	plovide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete	j	ĺ	
	Schedule D, Part I	6	1	х
7	Od the organization receive or hold a conservation easement, including easements to preserve open space.			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Dd the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair or debt negotiation services? If "Yes,"	i		
	complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		ĺ	
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	. 15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		<u> </u>
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	. 18		<u> </u>
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u>X</u>
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		ļ	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions	1	Ì	37
L	24b-24d and complete Schedule K. If "No," go to question 25	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction		ļ	v
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			v
	person from a prior year? If "Yes," complete Schedule L, Part I	25b	-+	<u>X</u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			v
•	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	 -	<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	27	1	x
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27 50m	9907	
		FORD	/	et II IX I

Partiv Checklist of Required Schedules (continued)

			Yes	No
28	Pring the tax year, did any person who is a current or former officer, director, trustee, or key employee	., .	, ~ ;	
а	If we a direct business relationship with the organization (other than as an officer, director, trustee, or	1'.	1	1
	Oployee), or an indirect business relationship through ownership of more than 35% in another entity	-		
	(idividually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,	,	. 1	
	Ph IV	28a		X
b	Hive a family member who had a direct or indirect business relationship with the organization? If "Yes,"	İ	1	l
	Conplete Schedule L, Part IV	28b		X
C	Stve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a		1	ĺ
	pfessional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	<u></u>	X
29	Of the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Of the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	C9servation contributions? If "Yes," complete Schedule M	30		X
31	D# the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Pati	31		X
32	Diff the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Shedule N. Part II			
		32		<u> </u>
33	Dil the organization own 100% of an entity disregarded as separate from the organization under Regulations		ĺ	
•	setions 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	— ↓	X
34	Wis the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,] {		
	III,IV, and V, line 1	34		<u> </u>
35	Is iny related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	1 1	l	
	Schedule R, Part V, line 2	35		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	1 1	ļ	
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Die the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	<u>VI</u>	37		X

Form **990** (2008)

<u> </u>	Statements Regarding Other IRS Filings and Tax Compliance			T.	Т
1a	Eler the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1		Yes	No
10	U. Information Returns Enter -0- if not applicable	1a	-],	1
h	Efer the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	٠; ;	-	ŀ
c	Dithe organization comply with backup withholding rules for reportable payments to vendors and re		1	ł	ł
-	graing (gambling) winnings to prize winners?		1c		x
2a	Efer the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1 .		۳,	
	Stements, filed for the calendar year ending with or within the year covered by this return	2a	'	-	ļ
b	If I least one is reported on line 2a, did the organization file all required federal employment tax retu	ırns?	2b		Ī
	Me. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	•	,		
	irasuctions)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
3a	Diffthe organization have unrelated business gross income of \$1,000 or more during the year covered	ed by		*	-
	thiretum?		3a		X
b	If "Tes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	$\mathbf{A}^{\mathbf{t}}$ iny time during the calendar year, did the organization have an interest in, or a signature or other	authority			ļ
	ovt, a financial account in a foreign country (such as a bank account, securities account, or other fin	nancial			
	a Count)?		4a		X
b	If "les," enter the name of the foreign country.		1	ایی	!
	Set the instructions for exceptions and filing requirements for Form TD F 90-22 1 Report of Foreign	Bank			,
	a m Financial Accounts		124.53		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
þ	Didany taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	•	_5b		X
С	If "les," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	'	_		
_	Rejarding Prohibited Tax Shelter Transaction?	•	5c		Х
6a	Didthe organization solicit any contributions that were not tax deductible?		6a	\dashv	
b	If "les," did the organization include with every solicitation an express statement that such contribution in the state of	ons or	.	- 1	
-	gift were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	•	6b		
7	Didthe organization provide goods or services in exchange for any guid pro guo contribution of more	than	`~ . }	, ' ;	: -
а	\$75?	tilan	7a	l	X
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	•	7b	\longrightarrow	
	Didthe organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
Ū	required to file Form 8282?	-5	7c	ł	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		<u></u> \$1 .	
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	<u> </u>	43		
	berefit contract?		7e	'	x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri	act?	7f		$\overline{\mathbf{x}}$
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	•	7g	\neg	X
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0				
	required?		7h	i	X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec	tion		- 1	$\overline{}$
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spon	sonng	3.5-	- 1	
	organization, have excess business holdings at any time during the year?		8		<u>X</u>
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		,		
а	Did the organization make any taxable distributions under section 4966?		9a		X
þ	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		<u> </u>
0	Section 501(c)(7) organizations. Enter			- [
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	-	_ [-
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	,		
1	Section 501(c)(12) organizations. Enter	, ,	. 1	-	
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		-	- 1	
	amounts due or received from them)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
b	if "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
			_	aan,	

Form (2008) UNITED METHODIST URBAN MINISTRIES 62-1294095 Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not PartVI required by the Internal Revenue Code.) Section A. Governing Body and Management Yes Nο For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the crcumstances, processes, or changes in Schedule O. See instructions 1a Enter the number of voting members of the governing body b Enter the number of voting members that are independent 1b 2 Id any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 3 Indicate the organization delegate control over management duties customarily performed by or under the direct sipervision of officers, directors or trustees, or key employees to a management company or other person? Dd the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 Od the organization become aware during the year of a material diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? X 7b Dd the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? X 8a Each committee with authority to act on behalf of the governing body? X 8b 9a Does the organization have local chapters, branches, or affiliates? X 9a b If 'Yes," does the organization have written policies and procedures governing the activities of such chapters. affiliates, and branches to ensure their operations are consistent with those of the organization? 9b Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations 10 must describe in Schedule O the process, if any, the organization uses to review the Form 990 X 10 Is there any officer, director or 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 X Section B. Policies No Yes 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this is done 12c Does the organization have a written whistleblower policy? X 13 14 Does the organization have a written document retention and destruction policy? 14 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-The organization's CEO, Executive Director, or top management official? 15a Other officers or key employees of the organization? 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? X 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **NONE** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website | Another's website | Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

State the name, physical address, and telephone number of the person who possesses the books and records of the

organization >

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

Section 1. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Cor lete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- Let all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- Let the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who recived reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organiz 4on and any related organizations
- Lst all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,0 0 of reportable compensation from the organization and any related organizations
- Lst 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 per sns in the following order individual trustees or directors; institutional trustees; officers, key employees, highest comper lated employees; and former such persons

(A) Virne and Title	(B) Average hours per	Pos	_	chec	C) k ali	that a	ppły)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highesi compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other other compensation from the organization and related organizations
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hours per week Promiser or director week Promiser trustee Promiser		ED METHODIS Officers Directors T										
Total Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a² if "Yes," complete Schedule J for such individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000² if "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person lone B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.	}	(B)	Pos	sition	(C)			(D)	(E)	(F Estin	
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Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization											5	
	is table for	r your five highest comp	pensat	ed in	ndepe	ende	ent co	ntra	ctors that received more th	an \$100,000 of		
									Description (B) n of services	Con	(C) npensa
							_					
<u></u>			-,				_				,	
											_	
							\perp					

Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ▶

P	Part VIII Statement of Revenue								
-, -,	· · · ·	The state of the s	and the second	,	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under sections	
^		1-	114	· · · ·	·	revenue	revenue	512, 513, or 514	
Contributions, gifts, grants	2 1	Federated campaigns	1a		20 - 19 1				
gra	3	Membership dues	1b		-	., '	, ,	` \ ```	
2	5	Fundraising events	1c			,	,	[:	
퍝	Ē	Related organizations	1d		,		, ,		
S,		Government grants (contributions)	1e 1	94,166				T	
육	5	All other contributions, gifts, grants,	1 1			Fr. (1977) 40(28-2),	ر اور اور اور اور اور اور اور اور اور او	177	
퉏		and similar amounts not included above		79,616		The section of the se		1 25	
i di	<u> </u>	Noncash contributions included in lines	i 1a-1f \$. 1	87,589	1. 1. 24 2 1 1 1	The transport of			
	<u>'</u>	Total. Add lines 1a-1f		<u> </u>	473,782	7, 7, 7, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	the transfer of the	() () () () () () () () () ()	
Program Service Revenue	İ			Busn. Code		15	" p " 0, 5" + 2 5 6 19	S	
š	24							<u> </u>	
ž	1								
흣								ļ. <u> </u>	
Ser	4								
a	•				L		<u>. </u>		
ģ	ſ	All other program service re	venue	<u> </u>		<u> </u>	<u> </u>		
ᇫ	وا	Total. Add lines 2a-2f		<u> </u>			T 17 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	n 4 (,) =	
	3	Investment income (includin	ng dividends, intere	st, and					
		other similar amounts)		>	540	540	·		
	4	Income from investment of t	tax-exempt bond p	roceeds 🕨			<u>.</u>		
	5	Royalties		•					
	[(i) Rea	u (ii) P	ersonal	8 4. JULAN	是不是我们	and the same of the same	fr. 1777 to	
	6a	Gross Rents							
	ь	Less rental exps			- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	C	Rental inc or (loss)							
	d	Net rental income or (loss)		•			-		
	7a	Gross amount from (i) Securi	ties (II)	Other	5、16、4、20公司	17. 19.5	The state of the s		
		sales of assets other than inventory			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	建设是严禁的		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	ь	Less cost or other				在中国 法共产的主义		1.3.2	
		basis & sales exps					The second second		
	c	Gain or (loss)					医乳气 医静脉管动脉	1-1	
	d			▶			. ,		
	•	Gross income from fundraising e	vents		1 14 7 7 6 7	* ***	V 3 (3)	5. <u>5.</u> .	
9		(not including \$				4	Agenta and Agent and Agent and Agent and Agent and Agent and Agent and Agent and Agent and Agent and Agent and	and the second	
el l		of contributions reported on line 1	1c)					,,,,,,,,,	
8		See Part IV, line 18	. , a		<u>.'</u> ,			*,	
ar F	h	Less direct expenses	b			4	÷	1-1	
Other Revenu		Net income or (loss) from fur		—					
٦		Gross income from gaming activity							
	Ja	See Part IV, line 19	a			13 14			
	h	Less direct expenses	. Б					,	
		Net income or (loss) from ga	~						
			· · · · · · · · · · · · · · · · · · ·			-	·	·	
	103	Gross sales of inventory, less returns and allowances						-	
			a		٠. "			-	
		Less cost of goods sold	b			· ·	·- 1	•	
	c	Net income or (loss) from sal		Busn. Code					
		Miscellaneous Reveni	ue	ousn. Code	`	, ~,		3	
	11a		<u> </u>						
	b	•	ļ						
	C		<u> </u>					···	
	đ	All other revenue	[
ŀ	e	Total. Add imes 11a-11d		▶					
- {	12	Total Revenue. Add lines 1h	ı, 2g, 3, 4, 5, 6d, 7d	d, 8c,					
- }		9c, 10c, and 11e		•	474,322	540	0	0	

Part K Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations mus				
	o n dinclude amounts reported on lines 6b , b, 8 b9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	©ints and other assistance to governments and organizations in the U.S. See Part IV, line 21			3.5	237.42
2		84,853	84,853		desperation of
3	©Ints and other assistance to governments, or fanizations, and individuals outside the				
	J. See Part IV, lines 15 and 16	ļ	 	***	12.5
4	Baefits paid to or for members			1,11	100 100
5	Conpensation of current officers, directors, trutees, and key employees				
6	Copensation not included above, to disqualified petons (as defined under section 4958(f)(1)) and				
7	petons described in section 4958(c)(3)(B)	277,295	223,332	53,963	
7	Oter salaries and wages Pesion plan contributions (include section 401(k)	211,233	223,332	33,963	
8	,				
9	andsection 403(b) employer contributions) Other employee benefits	<u> </u>		 	
	•				
10	Pairoll taxes				
11	Fes for services (non-employees).	1			
a	Management .				
	Legi		······		
	A Counting Lotbying				<u> </u>
	Proessional fundraising services See Part IV, line 17		300 1 200 700	To the Control of the second o	
f	· · · · · · · · · · · · · · · · · · ·			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
g	=				
-	Advertising and promotion				=
13	Office expenses				
14	Information technology				
15	Royalties				
16	Octupancy	23,913	22,953	960	
17	Travel	1,688	1,673	15	"
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1 501	1 504		
20	Interest	1,581	1,581		
21	Payments to affiliates	6 204	6 204		
22 23	Depreciation, depletion, and amortization	6,204 5,721	6,204 3,261	2,460	
23	Insurance	3,121	3,201	2,400	
24	Other expenses Itemize expenses not		-		, , , ,
	covered above (Expenses grouped together	,		- ,	
	and labeled miscellaneous may not exceed	,			
	5% of total expenses shown on line 25 below)	·	1.		
а	FOOD	53,926	53,926		
ь	CONTRACTED SERVICES	14,464	7,664	6,800	
c	COMMUNICATIONS	10,498	6,141	4,357	
d	SUPPLIES	4,903	3,622	1,281	
e	MISCELLANEOUS	3,026	2,799	227	
f	All Other expenses				
25	Total functional expenses. Add lines 1 through 24f	488,072	418,009	70,063	
26	Joint Costs. Check here ► if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

F	art	& Balance Sheet						
					(A)	1	(B)	
					Beginning of year	↓	End of y	
	1	Cash—non-interest bearing				1	4	3,26
	Z	Savings and temporary cash investments				2	<u> </u>	
	35	Pledges and grants receivable, net				3		5,640
	4	Accounts receivable, net	·		L	4		3,500
	5	Receivables from current and former officers, directors,	trustee	s, key		1		
		employees, or other related parties. Complete Part II of	Schedi	ule L		5		
	5	Receivables from other disqualified persons (as defined	under	section		1- 1		
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Co	mplete	-, -, -, -,	1000		
	Ì	Part II of Schedule L				6	<u> </u>	
ţ	7	Notes and loans receivable, net				7	<u> </u>	
Assets	8	Inventories for sale or use				8		_
As	9	Prepaid expenses and deferred charges				9		2,600
	10i	Land, buildings, and equipment, cost basis	10a	<u>247,705</u>	1.7	1		
		Less accumulated depreciation Complete	} }			, "	Land the same	
		Part VI of Schedule D	10b	107,256	146,653	10c	14	0,449
	11	Investments—publicly traded securities				11		
	12	Investments—other securities See Part IV, line 11				12	ļ	
	13	Investments—program-related See Part IV, line 11				13		
	14	14						
	15	Other assets See Part IV, line 11		54,377		<u> </u>		
	16	Total assets. Add lines 1 through 15 (must equal line 34)		201,030	16		5,456
	17	Accounts payable and accrued expenses			· · · · · · · · · · · · · · · · · · ·	17	ļ	5,045
	18	Grants payable	· · · · · · · · · · · · · · · · · · ·	18				
	19	Deferred revenue		19				
_	20	Tax-exempt bond liabilities		ļ		20		
Liabilities	21	Escrow account liability Complete Part IV of Schedule D	ı			21		
Ħ	22	Payables to current and former officers, directors, trustee	s, key				the state of the	,- ,
ab		employees, highest compensated employees, and disqua			Ý Š	1975年1975年		
_		persons Complete Part II of Schedule L		22				
	23	Secured mortgages and notes payable to unrelated third		23	18	3,794		
l	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D				25		1,337
	26_	Total liabilities. Add lines 17 through 25			·	26	38	3,176
ces		Organizations that follow SFAS 117, check here ▶	and		· 大学 · 大学	. 30	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•
		complete lines 27 through 29, and lines 33 and 34.				i		-
ala 	27	Unrestricted net assets			···	27		
ã	28	Temporarily restricted net assets				28		
Assets or Fund Balar	29	Permanently restricted net assets				_29		
교		Organizations that do not follow SFAS 117, check here	∍► X]	人名英格兰 的复数经营			
5		and complete lines 30 through 34.			Fright Paris Line Line		(是)	
2	30	Capital stock or trust principal, or current funds				30		
Set	31	Paid-in or capital surplus, or land, building, or equipment	fund	_		31		
Š	32	Retained earnings, endowment, accumulated income, or	other f	unds	201,030	32	187	7,280
$\frac{1}{2}$		Total net assets or fund balances		. [201,030	33	187	7,280
Net		Total liabilities and net assets/fund balances		· · · [201,030	34	225	,456
	irt X			•				
<u> </u>						-	Y	es No
1	A~~	ounting method used to prepare the Form 990: Ca	ısh İ	X Accrual Oti	her			
²a		e the organization's financial statements compiled or review					2a	x
		e the organization's financial statements audited by an inc			• = ====		2b	X
þ		e the organization's infancial statements addited by an incident of the committee of the co			for oversight of			
С		audit, review, or compilation of its financial statements an					2c	
3.		audit, review, or compilation of its financial statements and result of a federal award, was the organization required t					44	
38			o unue	igo an addit or addits as s	octional in		3a	
		Single Audit Act and OMB Circular A-133?	dita	•	• • •		3b	
<u>b</u>	11 'Y	es," did the organization undergo the required audit or au	airo ,		· _ · _ · _ · _ · _ · _ · _ · _ · _			90 (2008)

SCHEULE D

Departme 4 of the Treasury Internal Evenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047
2008
...Open to Public

Inspection

Nan	ne o fine org	ganization		Employ	er identification r	number
U	n i ted	METHODIST URBAN MINISTRIES		62-1	.294095	
	art	Organizations Maintaining Donor Advised Futhe organization answered "Yes" to Form 990, I		Accour	nts. Complete	e if
			(a) Donor advised funds	(b)	Funds and other a	ccounts
1	T Cal pur	nber at end of year				
2		e contributions to (during year)				
3	_, •	e grants from (during year)			 	
A	. •	e value at end of year				
5	. •	ganization inform all donors and donor advisors in writing that	the assets held in donor advised			
_		the organization's property, subject to the organization's excli			Yes	□ No
6		ganization inform all grantees, donors, and donor advisors in	· · ·			
Ü		for charitable purposes and not for the benefit of the donor or				
	-	sible private benefit?			Yes	No
P		Conservation Easements. Complete if the organic	anization answered "Yes" to For	m 990		
1		e) of conservation easements held by the organization (check		000,		<u> </u>
•	· '	rvation of land for public use (e.g., recreation or pleasure)	Preservation of an historically imp	oortant lar	nd area	
	_	ction of natural habitat	Preservation of certified historic s			
		rvation of open space	Treservation of destined historic s	il doldi C		
2		lines 2a–2d if the organization held a qualified conservation of	ontribution in the form of a conservation i	easement	•	
2		t day of the tax year	onthousen in the form of a conscivation	Jascinen	•	
	01 -110 100	. 45, 5, 4,5 14, ,5 2,		- 475	Held at the End	of the Vear
_	Tobl sum	ber of conservation easements		2a	Tield at the Lite	Of the Teal
a		age restricted by conservation easements		2b		
D				2c	· · · · · · · · · · · · · · · · · · ·	
C		f conservation easements on a certified historic structure inclu	•	2d		
ď		f conservation easements included in (c) acquired after 8/17/0			<u> </u>	
3		f conservation easements modified, transferred, released, ext	inguished, or terminated by the organizat	ion during	J	
	thetaxable					
4		f states where property subject to conservation easement is lo				
5		organization have a written policy regarding the periodic monit	oring, inspection, violations, and		п.,	т.,
	-	ent of the conservation easements it holds?			. L Yes	∐ No
6		lunteer hours devoted to monitoring, inspecting, and enforcing				
7		expenses incurred in monitoring, inspecting, and enforcing ea	· · · · · · · · · · · · · · · · · · ·			
8		conservation easement reported on line 2(d) above satisfy the	ne requirements of section		ГT	О.
		B)(i) and section 170(h)(4)(B)(ii)?				No
9		, describe how the organization reports conservation easeme				
		neet, and include, if applicable, the text of the footnote to the c	organization's financial statements that de	escribes		
		zation's accounting for conservation easements	Historiaal Tanaassaa as Otto	0::1	A ====================================	
Pa		Organizations Maintaining Collections of Art,		Similar	Assets.	
		Complete if the organization answered "Yes" to	Tom 990, Fait IV, line 0			
					_	
1a	-	nization elected, as permitted under SFAS 116, not to report i				
		cal treasures, or other similar assets held for public exhibition,		public ser	rvice,	
	provide, in	Part XIV, the text of the footnote to its financial statements th	at describes these items.			
b	_	nization elected, as permitted under SFAS 116, to report in its				
	historical ti	easures, or other similar assets held for public exhibition, edu	cation, or research in furtherance of publ	lic service) ,	
	provide the	following amounts relating to these items				
	(i) Reven	ues included in Form 990, Part VIII, line 1		>	\$	
	(ii) Assets	included in Form 990, Part X		>	\$	
2	If the organ	nization received or held works of art, historical treasures, or c	other similar assets for financial gain, pro-	vide the		
	•	mounts required to be reported under SFAS 116 relating to th	_			
_	_	included in Form 990. Part VIII. line 1		•	\$	

b Assets included in Form 990, Part X

	edus D (Form 990) 2008 UNITED METHODIST URBAN MINISTRIA		Page 4
P	art II Reconciliation of Change in Net Assets from Form 990 to Fin	ancial Statements	
1	T'4al revenue (Form 990, Part VIII, column (A), line 12)		1
2	T 4al expenses (Form 990, Part IX, column (A), line 25)		2
3	E ≵ess or (deficit) for the year Subtract line 2 from line 1		3
4	N € unrealized gains (losses) on investments		4
5	◆ Phated services and use of facilities		5
6	Ira estment expenses		6
7	P or period adjustments		7
8	Offer (Describe in Part XIV)		8
9	T Cal adjustments (net) Add lines 4-8		9
10	Ezess or (deficit) for the year per financial statements. Combine lines 3 and 9		10
<u>P</u>	rt III Reconciliation of Revenue per Audited Financial Statements	With Revenue per Re	turn
1	T Cal revenue, gains, and other support per audited financial statements		
2	Arounts included on line 1 but not on Form 990, Part VIII, line 12	,	,
а	Ne unrealized gains on investments	<u> </u>	
b	Doated services and use of facilities		199 199
C	Reoveries of prior year grants 2c		
d	Ofter (Describe in Part XIV)	<u> </u>	هُ الْمِيْ الْمُ
е	Act lines 2a through 2d		2e
3	Suitract line 2e from line 1	,	3
4	Arrounts included on Form 990, Part VIII, line 12, but not on line 1:		2 162 - 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
а	In estment expenses not included on Form 990, Part VIII, line 7b		
b	Otler (Describe in Part XIV)	<u> </u>	
С	Act lines 4a and 4b		4c
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)	1000	5
	rt III Reconciliation of Expenses per Audited Financial Statements	with Expenses per i	Keturn
1	Total expenses and losses per audited financial statements		.1
2	Arrounts included on line 1 but not on Form 990, Part IX, line 25	1	- '¿Ì
	Dotated services and use of facilities 2a		ু ু বু
	Prin year adjustments 2b		- <u>_</u>
	Loses reported on Form 990, Part IX, line 25		
	Other (Describe in Part XIV)		
_	Add lines 2a through 2d	_	2e
3	Sultract line 2e from line 1	, , }	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)		25 T
	Add lines 4a and 4b		4c
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	<u></u>	5
	TXIV Supplemental Information		
	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a		
ana z	b, Part V, line 4; Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b		
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