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SCANNED JUN 2 3 2013

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)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	A F	or th	e 2012 calendar year, or tax year beginning and e	ending				
	B c	heck if	C Name of organization		D Employer identifi	cation number		
		Addre	CHILDREN AND FAMILY URBAN MINISTRIES					
		Name chang	Doing Business As	· -	42-1396833			
		Initial return	· · · · · · · · · · · · · · · · · · ·	Room/suite				
	<u></u>	∐Termi ated □Amen	1.0. BOX 11123			282-3242		
	\vdash	return Apple	City, town, or post office, state, and ZIP code		G Gross receipts \$	840,544.		
		Jtion pendi	DES HOINES, IA 30311		H(a) Is this a group re			
			F Name and address of principal officer: LARS PETERSON P.O. BOX 41125, DES MOINES, IA 50311		for affiliates?	Yes X No		
			empt status: X 501(c)(3) 501(c) ()	r 527	H(b) Are all affiliates inc	luded? Yes No		
•			te: WWW.CFUM.ORG	1 <u> </u>	H(c) Group exemptio			
			organization	I Year		A State of legal domicile: IA		
		rt I	Summary	LE Tour	0110111141011	or otate of regardonnene. 222		
,			Briefly describe the organization's mission or most significant activities: SEE F	ORM 9	90, PART II	I, LINE 1		
	Activities & Governance							
	rua	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	ssets.		
	S S	3	Number of voting members of the governing body (Part VI, line 1a)		3	16		
	8	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	16		
	es	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		. 5	32		
	iš	6	Total number of volunteers (estimate if necessary)		6	1839		
	Act		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.		
-		b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.		
	- {	_	- · · · · · · · · · · · · · · · · · · ·	 	Prior Year	Current Year		
	ne		Contributions and grants (Part VIII, line 1h)	·	863,817.	837,700.		
(~V°)	Revenue		Program service revenue (Part VIII, line 2g)		0. 6.	<u>0.</u> 292.		
2013	g.		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		21,521.	2,552.		
	ŀ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u> </u>	885,344.	840,544.		
R) -			Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	040,544.		
7				<u> </u>	0.	0.		
JUN	s	15	Benefits paid to or for members flar (X) column (A), line 4) Salaries, other compensation, employee penefits (Part IX, column (A), lines 5-10)		283,887.	335,887.		
	Expenses		Professional fundresing fees (Part IX, column (A The 11e)	-	0.	0.		
\Box	be		Total fundraising expenses (Part 1X, 8012013D), Inc 25) > 47, 25	5.				
:ANNED	ற்		Other expenses (Part IX, column (A), lines 11a-1 (\$\mathbb{L}\$ 1f-24e)		426,416.	433,411.		
Z		18	Total expenses. Add In (13/1) (in 1st equal Part IX, column (A), line 25)		710,303.	769,298.		
$\ddot{\circ}$		19	Revenue less expenses. Subtract line 18 from line 2		175,041.	71,246.		
$\widetilde{\mathcal{O}}$	Sec			Beg	inning of Current Year	End of Year		
SC	alar	20	Total assets (Part X, line 16)		322,697.	382,429.		
2	10 P		Total liabilities (Part X, line 26)		12,615.	1,101.		
ī r	릴		Net assets or fund balances. Subtract line 21 from line 20 .		310,082.	381,328.		
		rt II	Signature Block			 		
			ities of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is		
Ī	rue,	correc	t, and complete Declaration of preparer (other than officer) is based on all information of whi	cn preparer				
	cian		Signature of officer		Date	/		
	Sign Here		LARS PETERSON, PRESIDENT		24(0			
•	icie	7	Type or print name and title					
-			Print/Type preparer's name Preparer's signature	D	ate Check	PTIN		
F	Paid		JAY A HORN, CPA Jay A. Joun O	PA 3	5-/0-/3 If self-employe	P01259887		
	Prepa	arer	Firm's name DENMAN & COMPANY / I/LP		Firm's EIN ▶	42-0794029		
	Jse C		Firm's address 1601 22ND STREET, SUITE 400					
			WEST DES MOINES, IA 50266-1453		Phone no 5	15-225-8400		
<u>1</u>	May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No		
_	2200	1 12 1	12 LHA For Panerwork Reduction Act Notice see the senarate instruction			Form 990 (2012)		

	1990 (2012) CHILDREN AND FAMILI ORBAN FINISIRIES 42-1390033 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check If Schedule O contains a response to any question in this Part III .
1	Briefly describe the organization's mission:
	TO CREATE A COMMUNITY TO SUPPORT THE POTENTIAL OF CHILDREN, YOUTH, AND
	FAMILIES THROUGH EDUCATIONAL SUCCESS, HEALTHY LIVING, AND COMMUNITY
	ENGAGEMENT.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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 X No
•	If "Yes," describe these changes on Schedule O.
4	
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	, , , , , , , , , , , , , , , , , , ,
	PROVIDED SEVERAL PROGRAMS, INCLUDING BEFORE SCHOOL CHILD CARE AND
	BREAKFAST, AFTER SCHOOL PROGRAM FOR CHILDREN, EVENING MEALS FOR
	CHILDREN AND THEIR PARENTS, AND OUT OF SCHOOL PROGRAMMING FOR YOUTH.
-	
4b	(Code) (Expenses \$
	······································
4	
4c	(Code) (Expenses \$
	· · · · · · · · · · · · · · · · · · ·
	Other and the second of the se
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 653,158.
	m 000 (00.40)

12-10-12

Form 990 (2012) CHILDREN AND
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)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	İ		
	public office? If "Yes," complete Schedule C, Part I	3		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? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did 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, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D,			
	Part VI	11a	х	
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? If "Yes," complete Schedule D, Part VII	11b		Х
С	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 167 If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d	1	Х
е	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e		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)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	ĺ	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		1	
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		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? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	j	Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	$\overline{}$	
			200 "	

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 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, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			ı
	Schedule J	23		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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
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? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	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? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			-
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	.		
	Schedule N, Part II	32	<u> </u>	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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	,)		1
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	i 1	1	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			ĺ
	Note. All Form 990 filers are required to complete Schedule O	_38	X_	
		Form	990 (2012)

Page 5

Form	990 (2012) CHILDREN AND FAMILY URBAN MINISTRIES 42-1396	833	P.	age 5
	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V		_	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . 1a 9			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			Ī
C	(gambling) winnings to prize winners?	1c		Ī
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
20	filed for the calendar year ending with or within the year covered by this return . 2a 32			-
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	İ
D		2.0		
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3a		X
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			X
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
b	If "Yes," enter the name of the foreign country:			Ì
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	_		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		_X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		ļ
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?	6a		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).			ŀ
а	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?	7a		_X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	i	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		Ī
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	- 55		
a	Initiation fees and capital contributions included on Part VIII, line 12			-
_	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
11	Gross income from members or shareholders			<u> </u>
a				[
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
40	amounts due or received from them)	40.		İ
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
_	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.	4.		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			•
b	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			
С	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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.

				X
	Check if Schedule O contains a response to any question in this Part VI			
Sec	tion A. Governing Body and Management		Vac	No
	Enter the number of voting members of the governing body at the end of the tax year 1a 16		Yes	No
1a	Enter the number of voting members of the governing zery at the entertainty	1		
	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 0. Forer the number of voting members included in line 1a, above, who are independent 16 16			f
b	Enter the number of retaing members instructed in the re-	{		ļ
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	2		Х
2	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		х
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 become aware daring the year of a significant diversion of the organization based on the organization have members or stockholders?	6		X
7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or			
<i>1</i> u	more members of the governing body?	7a		х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			-
a	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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		Х
Sec	tion 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
	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	Х	
b				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	l
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	Х	<u> </u>
13	Did the organization have a written whistleblower policy?	13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	X	L
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?			ŀ
а	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)			Ė
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1		ł
	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	1		[-
	exempt status with respect to such arrangements?	16b	<u> </u>	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filled ► NONE			
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)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X 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, an	d finar	icial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion: 🕨		
	LINDA DANIELSON - 515-282-3242			
	P.O. BOX 41125, DES MOINES, IA 50311			
23200 12-10-	6	Form	990	(2012)

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

Check if Schedule O contains a response to any question 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 organiz (A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos heck			one	Reportable	Reportable	Estimated
	hours per	box	, unle cer ar	ss pe	rson	ıs bot	h an	compensation	compensation	amount of
	week		1			T	1	from the	from related organizations	other compensation
	(list any hours for	director				70		organization	(W·2/1099-MISC)	from the
	related	, S	stee			nsate		(W-2/1099-MISC)	(organization
	organizations	1 trustee	nal tr		eg 6	ou a				and related
	below	Individual t	Institutional trustee	5	Key employee	Highest compensated employee	Former			organizations
	line)	힏	ISE.	Officer	<u>ş</u>	운통	臣			·
(1) LARS PETERSON	5.00									
PRESIDENT		X		Х		_	_	0.	0.	0
(2) KEVIN CHRISTENSEN	2.00									
VICE PRESIDENT		Х		Х	ļ	_	_	0.	0.	0
(3) DAVE DIXON	5.00									
TREASURER		Х		X	_	<u> </u>	_	0.	0.	0
(4) RENAE BANDSTRA	2.00]								
SECRETARY		Х		Х	_	_		0.	0.	0
(5) ANGELA JOHNSON	2.00									
PAST PRESIDENT		Х	<u> </u>	_	<u> </u>	_	_	0.	0.	0
(6) LAURA ALEXANDER	2.00									
BOARD MEMBER	2 00	X				_	_	0.	0.	0
(7) LAURA ALLEN	2.00	١,,							_	_
BOARD MEMBER		Х		_	_			0.	0.	0
(8) MEGAN AMDAHL	2.00	١,,							_	^
BOARD MEMBER	2 00	Х	_			-		0.	0.	0
(9) SCOTT GLIENKE	2.00	١,,							_	_
BOARD MEMBER	2 00	Х	_	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0.	0.	0
(10) RICK GRANT	2.00	.,							_	_
BOARD MEMBER	2 00	Х	_	_			_	0.	0.	0
(11) PAT GROTE	2.00	٠,						0.	0.	^
BOARD MEMBER	2.00	Х		<u> </u>			⊨	U •	· · · · · ·	0
(12) STACY LAGE	2.00	X						0.	0.	0
BOARD MEMBER	2.00	Λ	_				\vdash	<u> </u>	· · · · · · · · · · · · · · · · · · ·	0
(13) GARY LEWIS	2.00	Х	}					0.	0.	0
BOARD MEMBER	2.00	^	<u> </u>		 	-	-	<u> </u>		0
(14) ADRIENNE MCFARLAND	2.00	·						0.	0.	0
BOARD MEMBER	2.00	X				├	-	0.	0.	-
(15) DONNA RUSK	2.00	X						0.	0.	0
BOARD MEMBER	2.00	∤≏	-		-	\vdash	 	1	- 0.	
(16) JOYCE WEBB	2.00	₩.				1		0.	0.	
BOARD MEMBER	40.00	X	├		<u> </u>	\vdash		ļ	0.	0
(17) CARMEN LAMPE ZEITLER	40.00	Į.,						16 520	0.	0
EXECUTIVE DIRECTOR	<u> </u>	X	L_					46,528.	U •	Form 990 (201)

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Page	8

Turk III Section A. Onicers, Directors, Trus	tees, Ney Lin	pioy	ees	, and	4 1 11	gne	31 C	Joinpensated Employe	es (continueu)			
(A)	Name and title Average hours per Average hours pe			, , ,								
Name and title			1	compensation		amount						
	week (list any		cer an	d a d	recto	or/trus	tee)	from	from related		othe	
	hours for	r director	_			pa		the organization	organizations (W-2/1099-MISC)	Co	mpens from tl	
	related organizations	trustee or	trustee			pensal		(W-2/1099-MISC)			rganiza	
	below	Indiwdual tr	Institutional trustee	5	Key employee	Highest compensated employee	 		-		and rela ganizat	
	line)	a Per	Instit	Officer	Keye	돌를	Former					
										+		
										+		
										_		
						-				+		
							_			┷		
									P			
1b Sub-total	<u> </u>	1			,		L	46,528.	0			0.
c Total from continuation sheets to Part VI	l, Section A		•	•	·	>		0.	0			0.
d Total (add lines 1b and 1c)	.1					>		46,528.	0	<u>.</u>		0.
 Total number of individuals (including but no compensation from the organization 	ot limited to th	ose	liste	d ab	oove	e) wr	o re	eceived more than \$100	,000 of reportable			0
compensation from the organization											Yes	No
3 Did the organization list any former officer,		ıstee	, ke	y en	plo	yee,	or l	highest compensated er	mployee on			
line 1a? If "Yes," complete Schedule J for si 4 For any individual listed on line 1a, is the su		le co	mne	nea	tion	and	i otk	her compensation from t	the organization	3		X
and related organizations greater than \$150									··· · · · · · · · · · · · · · · · · ·	4		Х
5 Did any person listed on line 1a receive or a	=				-		elat	ed organization or indivi				
rendered to the organization? If "Yes," comp Section B. Independent Contractors	olete Schedule	<u>∍ J fc</u>	or su	ich p	oers	on				5	_l	X
Complete this table for your five highest core	mpensated inc	depe	nde	nt co	ontr	acto	rs t	hat received more than	\$100,000 of comper		from	
the organization. Report compensation for t									•			
(A) Name and business	address	NO	ME	,				(B) Description of s	envices		(C) ensatio	n.
		110	/11/	<u> </u>			+	23331,51131	-		onodiie	
							_	·	-		-	
							_					
							-					
							+					
2 Total number of independent contractors (in		ot lin	nited	d to t	_		ted	above) who received m	ore than			
\$100,000 of compensation from the organiz	ation >				<u>C</u>	,					990	'0040'
										-orn		21 1 1 'J\

Form	1990			FAMILY U	RBAN MINIS	TRIES	42-1396	833 Page 9
Pa	rt VI	III Statement of Reve	nue					
		Check if Schedule O con	tains a response	to any question				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1 8	a Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues	1b					
, G		c Fundraising events	1c					ţ
iifts ar /		d Related organizations	1d					
S,E		e Government grants (contribut						
Sign		f All other contributions, gifts, gran	' 					Ļ
he	-	similar amounts not included abo	l I	837,700.				
i o i		Noncash contributions included in lines		212,735.				Ē
Cor		h Total. Add lines 1a-1f		•	837,700.			
				Business Code				
e	2 a	a				1		
vic.		b						
Sei		·						
Program Service Revenue		d						
Page								
Pro		f All other program service reve	enue					
		Total. Add lines 2a-2f					· · · · · · · · · · · · · · · · · · ·	
	3	Investment income (including	dividends, intere	est, and				
	-	other similar amounts)		•	292.	292.		
	4	Income from investment of ta	x-exempt bond p	oroceeds ►				
	5	Royalties .		. ▶				
			(ı) Real	(II) Personal				
	6 a	a Gross rents						
	t	Less: rental expenses						1
		Rental income or (loss)						Ē
		d Net rental income or (loss)						
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	t	Less: cost or other basis						
		and sales expenses						į
		Gain or (loss)						
		d Net gain or (loss)		•				
o		Gross income from fundraising	ng events (not					
Other Revenue		including \$	of					
šev.		contributions reported on line	1c). See	(ţ
er F		Part IV, line 18	. а					É
ţ	Ŀ	Less: direct expenses	b					
ا ت	d	Net income or (loss) from fund	draising events	>				
	9 a	a Gross income from gaming a	ctivities. See					
		Part IV, line 19	а					
	t	Less: direct expenses	b					1
	c	Net income or (loss) from gan	ning activities	. •				
	10 a	 Gross sales of inventory, less 	returns					
		and allowances	. a					ĺ
		Less: cost of goods sold	b	L				ĺ
		Net income or (loss) from sale		.				
		Miscellaneous Revenu	ne	Business Code	2 552	2 552		
	11 a	ACTIVITIES		900099	2,552.	2,552.		
	t	·		ļ				
	C	·				 		
		d All other revenue			2 552			
		Total. Add lines 11a-11d			2,552. 840,544.	2,844.	0.	0.
23200	<u>12</u> 9	Total revenue. See instructions			040,344.	2,044.		
23200 12-10	-12							Form 990 (2012)

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			mpiete columni (A).	
	not include amounts reported on lines 6b,	(A)	(B) Program service	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	- 204 760	205 027	20 067	20.066
7	Other salaries and wages .	284,760.	205,027.	39,867.	39,866.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	00 111	00.000	4 075	4 076
9	Other employee benefits	29,111.	20,960.	4,075. 3,082.	4,076. 3,082.
10	Payroll taxes	22,016.	15,852.	3,082.	3,082.
11	Fees for services (non-employees):				
а	Management				
b	Legal .	4 100		4 100	
С	Accounting	4,100.		4,100.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	15 000	14 212	1 500	
16	Occupancy L	15,903.	14,313.	1,590.	
17	Travel .	2,236.	2,012.	224.	,
18	Payments of travel or entertainment expenses		1		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest .				
21	Payments to affiliates	7,242.	<i>E</i> 510	724.	
22	Depreciation, depletion, and amortization	1,242.	6,518.	124.	
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line				
	24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0)	315 000	308,328.	6,771.	
а	SUPPLIES	315,099.		5,752.	
b	CONTRACT LABOR	57,522.	51,770.	925.	221
С	PRINTING & PUBLICATIONS	11,557. 9,149.	10,401.	925.	231.
d	MISCELLANEOUS			860.	
	All other expenses	10,603. 769,298.	9,743.	68,885.	17 255
25	Total functional expenses. Add lines 1 through 24e	109,298.	653,158.	00,883.	47,255.
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)			<u> </u>	

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	Check if Schedule O contains a response to an	y question in	this Part X		·	
				(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing			309,766.	1	368,063.
2	Savings and temporary cash investments				2	
3	Pledges and grants receivable, net		3			
4	Accounts receivable, net			4		
5	Loans and other receivables from current and f					
	trustees, key employees, and highest compens	ated employ	ees. Complete	*		
	Part II of Schedule L				5	
6	Loans and other receivables from other disqual	lified persons	(as defined under			
	section 4958(f)(1)), persons described in section		· F			
	employers and sponsoring organizations of sec		-			
ς,	employees' beneficiary organizations (see instr)	. Complete F	art II of Sch L		6	
Assets 8	Notes and loans receivable, net		L		7	
8 A	Inventories for sale or use			****	8	
9	Prepaid expenses and deferred charges .	1 1	·		9	· · · · · · · · · · · · · · · · · · ·
10a	Land, buildings, and equipment: cost or other		26 404			
	basis. Complete Part VI of Schedule D	10a	36,494.	10 001		14 266
L		10b	22,128.	12,931.	·	14,366.
11	Investments - publicly traded securities	_		11		
12	Investments - other securities. See Part IV, line			12		
13	Investments - program-related See Part IV, line	-		13		
14	Intangible assets			14		
15	Other assets. See Part IV, line 11			222 607	15	202 420
16	Total assets. Add lines 1 through 15 (must equ	iai iine 34)		322,697. 12,615.	16	382,429. 1,101.
17	Accounts payable and accrued expenses		·· -	12,013.	17	1,101.
18	Grants payable	••	·· · -		18	
19	Deferred revenue	•			19	
ŀ	Tax-exempt bond liabilities	 Dank IV at Cal	·		20	
Liabilities 22	Escrow or custodial account liability. Complete Loans and other payables to current and forme		· -		21	··-
	key employees, highest compensated employee		1			
Ë	Complete Part II of Schedule L	es, and disqu	railled persons.		00	
23	Secured mortgages and notes payable to unrela	 otod third no			22	
24	Unsecured notes and loans payable to unrelate	•	· -		24	
25	Other liabilities (including federal income tax, pa	•	- · · · · · -		24	
-	parties, and other liabilities not included on lines		l.			
	Schedule D	3 17 2 17. 0011	iploto i die x oi		25	
26	Total liabilities. Add lines 17 through 25	•	"	12,615.	26	1,101.
	Organizations that follow SFAS 117 (ASC 958	3), check her	e ► X and			
S	complete lines 27 through 29, and lines 33 an					
ğ ₂₇	Unrestricted net assets			230,527.	27	279,027.
Net Assets or Fund Balances 2	Temporarily restricted net assets	•••	·	79,555.	28	102,301.
യ യ 29	Permanently restricted net assets	••		, , , , , , , , , , , , , , , , , , , ,	29	
5	Organizations that do not follow SFAS 117 (A	SC 958), che	eck here			<u> </u>
5	and complete lines 30 through 34.		_			
र् _ष 30	Capital stock or trust principal, or current funds			ĺ	30	
31	Paid-in or capital surplus, or land, building, or ed	quipment fun	a		31	
ਲ ਹ 32	Retained earnings, endowment, accumulated in				32	***
ž ₃₃	Total net assets or fund balances		<u> </u>	310,082.	33	381,328.
34	Total liabilities and net assets/fund balances	•		322,697.	34	382,429.
		***			· · ·	Form 990 (2012)

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

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

CHILDREN AND FAMILY URBAN MINISTRIES

Employer identification number 42–1396833

Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this par	t.) See ins	tructions		
The organ	nization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	oox)			
1 🔲	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)									
з 🔲	A hospital or	a cooperative hospi	ital service organization of	described	ın section	170(b)(1)	(A)(iii).			
4	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,									
	city, and stat	e:								
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
	section 170(b)(1)(A)(iv). (Complete Part II)									
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7 X			eives a substantial part					or from the	general	public described in
		b)(1)(A)(vi). (Comple		• •		•				•
8	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II)					
9			eives: (1) more than 33 1			rom contri	butions, n	nembershi	p fees. a	and aross receipts from
	=	-	nctions - subject to certa							• '
			axable income (less sect							
		509(a)(2). (Complete			,		,	,		,,,
10			perated exclusively to te	st for publ	ıc safetv. S	See sectio	n 509(a)(4	4).		
11 🖂	=		perated exclusively for th		-			-	v out the	e purposes of one or
	=	-	ations described in section		•					• •
	· · · · · · · · ·		organization and comple		' -		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-,,(-,-	
	a Type I	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		nctionally i			тур	e III - No	n-functionally integrated
e 🗌		•	at the organization is not		_	-		• • • • • • • • • • • • • • • • • • • •		· -
•	-		han one or more publicly		=	-	-		· ·	
f			tten determination from t						, (4)(1) 0.	
•		rganization, check th				pe i, Type	11, 01 1900	- III		
0		_	organization accepted an	· v aift or c	 ontribution	from any	of the follo	owing pers	cons?	—
9	-		irectly controls, either ale							Yes No
		•	upported organization?	-	Cirici Willi	perdoris e	occorribed (ir (ii) aria (11) DCIO44	11g(i)
	_		n described in (i) above?			• •		-		11g(ii)
		•	person described in (i) o	 ar (ii) above		•	•			11g(iii)
h	• •		about the supported org	• •			• •			119(11)
**	Flovide tite it	Showing imornation	about the supported of	garrization	(5).					
			T	(iv) to the o	raanization	(u) Did voi	ı notifi the	(vi) Is	the	
	of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) is the organization in col (i) listed in your				Lorganization in col. 1		(wii) Amount of monotone
orga					stea in vouri	organizat	ion in col	organizatio	m in coi.	(vii) Amount of monetary
					document?	organızat (i) of youi		(I) organiz U S	ed in the	support
				governing (document?	(i) of you	support?	(I) organiz U S	ed in the	
			above or IRC section					(i) organiz	ed in the	
			above or IRC section	governing (document?	(i) of you	support?	(I) organiz U S	ed in the	
			above or IRC section	governing (document?	(i) of you	support?	(I) organiz U S	ed in the	
			above or IRC section	governing (document?	(i) of you	support?	(I) organiz U S	ed in the	
			above or IRC section	governing (document?	(i) of you	support?	(I) organiz U S	ed in the	
			above or IRC section	governing (document?	(i) of you	support?	(I) organiz U S	ed in the	
			above or IRC section	governing (document?	(i) of you	support?	(I) organiz U S	ed in the	
			above or IRC section	governing (document?	(i) of you	support?	(I) organiz U S	ed in the	
			above or IRC section	governing (document?	(i) of you	support?	(I) organiz U S	ed in the	
			above or IRC section	governing (document?	(i) of you	support?	(I) organiz U S	ed in the	
			above or IRC section	governing (document?	(i) of you	support?	(I) organiz U S	ed in the	
otal			above or IRC section	governing (document?	(i) of you	support?	(I) organiz U S	ed in the	

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A: (Form 990 or 990-EZ) 2012 CHILDREN AND FAMILY URBAN MINISTRIES

Section A. Public Support

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.)

Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						'
	include any "unusual grants.")	452,406.	561,715.	667,881.	863,817.	837,700.	3383519.
2	Tax revenues levied for the organ-						
	ızatıon'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	452,406.	561,715.	667,881.	863,817.	837,700.	3383519.
5	The portion of total contributions						
	by each person (other than a					;	
	governmental unit or publicly	ľ					
	supported organization) included						
	on line 1 that exceeds 2% of the					i	
	amount shown on line 11,			-		-	
	column (f)					Ī	771,464.
6	Public support. Subtract line 5 from line 4						2612055.
	ction B. Total Support	<u> </u>					
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	452,406.	561,715.	667,881.	863,817.	837,700.	3383519.
	Gross income from interest,				· · · · · · · · · · · · · · · · · · ·		
•	dividends, payments received on	İ					
	securities loans, rents, royalties						
	and income from similar sources	917.	390.	99.	6.	292.	1,704.
a	Net income from unrelated business		0301				
J	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain				·-n·		·
10	· · · · · · · · · · · · · · · · · · ·						
	or loss from the sale of capital	3,284.	760.	16,044.	21,521.	2,552.	11 161
44	assets (Explain in Part IV.) Total support. Add lines 7 through 10	3/204.	700.	10,044.	21,321.	2,332.	<u>44,161.</u> 3429384.
	Gross receipts from related activities,	oto /oso (sotructio		J		12	3427304.
	First five years. If the Form 990 is for	•	•	d faurth ar fifth ta	i V voor oo a costio		
13	organization, check this box and stop		mst, second, tillio	a, lourni, or mai ta	x year as a section	11 50 1 (0)(3)	▶□
Sec	tion C. Computation of Publi		rcentage			.	
	Public support percentage for 2012 (I			olumn (fl)		14	76.17 %
	Public support percentage from 2011			Oldfill (I))		15	%
	33 1/3% support test - 2012. If the o			line 13 and line 1	l/ ie 33 1/3% arm		
100	stop here. The organization qualifies	_		•	14 5 00 1/0/0 01 11	iore, check this bo	►X
h	33 1/3% support test - 2011. If the c		_	•	 lina 15 io 33 1/3%	 or more check th	
	and stop here. The organization quali	-			iiile 13 i3 33 1/3 /	or more, check in	.s. box ▶ □
172	10% -facts-and-circumstances test			•	13 162 or 16b s	and line 14 is 10%	or more
174							
	and if the organization meets the "fac meets the "facts-and-circumstances"					try now the organ	Ladion -
L					_	 17a and line 15 is i	
0	10% -facts-and-circumstances test						
	more, and if the organization meets the						_
10	organization meets the "facts-and-circ				-		
10	Private foundation. If the organization	п ию пот спеск а в	box on line 13, 16a	a, 100, 1/a, or 1/b			
					Sche	dule A (Form 990	or 990-EZ) 2012

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

(Complete only if you checked the box on line 9 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.)

Se	ction A. Public Support						<u>-</u>
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not		1				
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services per-		l			-	
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3					-		-
Ŭ	are not an unrelated trade or bus-						
	iness under section 513						
4				-			
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
_	or expended on its behalf						
5	The value of services or facilities			ľ			
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5	 			ļ		
7 <i>a</i>	Amounts included on lines 1, 2, and	 		1			
	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	,			1		
	amount on line 13 for the year						
c	: Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6		'				
10a	Gross income from interest,						
	dividends, payments received on					Ì	
	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					1	
_	Add lines 10a and 10b		· · · · · · · · · · · · · · · · · · ·				
	Net income from unrelated business						
•	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain					<u> </u>	
. ~	or loss from the sale of capital						
	assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12)			<u></u>	l	<u> </u>	
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a section	on 501(c)(3) orga	nization,
	check this box and stop here		·				<u> </u>
	tion C. Computation of Publi						
	Public support percentage for 2012 (la			olumn (f))		15	%
	Public support percentage from 2011					16	%
Sec	tion D. Computation of Inves	tment Income	e Percentage			, , , , , , , , , , , , , , , , , , , ,	
17	Investment income percentage for 20	12 (line 10c, colum	nn (f) divided by lin	ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
19a	33 1/3% support tests - 2012. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	33 1/3%, and lin	e 17 is not
	more than 33 1/3%, check this box an						▶□
b	33 1/3% support tests - 2011. If the						
	line 18 is not more than 33 1/3%, chec						
	Private foundation. If the organization					-	. ▶□

SCHEDULE D

(Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Open to Public ► Attach to Form 990. ► See separate instructions. Inspection

Department of the Treasury Internal Revenue Service Name of the organization

CHILDREN AND FAMILY URBAN MINISTRIES

Employer identification number 42-1396833

OMB No 1545-0047

Pa	rt I Organizations Maintaining Donor Advise		Is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate 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 adv	ised funds
	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor a		
_	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pa		ganization answered "Yes" to Form 990,	
1	Purpose(s) of conservation easements held by the organizati		
-	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat	· —	rtified historic structure
	Preservation of open space	i roservation er a sei	Killod Historio Sirostaro
2	Complete lines 2a through 2d if the organization held a qualif	led conservation contribution in the form	of a conservation easement on the last
-	day of the tax year.	ica deliser varion contribution in the form	Tota conservation easement on the last
	day of the taxyour.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic stri		2c
d	Number of conservation easements included in (c) acquired a		
u	listed in the National Register	arter o/ 17700, and not on a mistoric struc	2d
3	Number of conservation easements modified, transferred, rel	eased extinguished or terminated by th	•• • • • • • • • • • • • • • • • • • • •
Ü	year	cased, extinguished, or terminated by th	le organization during the tax
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
•	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		· · · · · · · · · · · · · · · · · · ·
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abov		
Ū	and section 170(h)(4)(B)(ii)?	c satisfy the requirements of section 170	Yes No
9	In Part XIII, describe how the organization reports conservation	on essements in its revenue and expens	
•	include, if applicable, the text of the footnote to the organizat	· ·	•
	conservation easements.	ion 3 intaricial statements that describes	stile organization's accounting for
Par	t III Organizations Maintaining Collections of	Art. Historical Treasures, or C	Other Similar Assets
	Complete if the organization answered "Yes" to Form	-	The Chimai Alogets.
1a	If the organization elected, as permitted under SFAS 116 (AS		ment and balance sheet works of art
	historical treasures, or other similar assets held for public exh		·
	the text of the footnote to its financial statements that describ		and or passe service, provide, arr arrying
b	If the organization elected, as permitted under SFAS 116 (AS		at and balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	research, or research in further area or pe	solid service, provide the following amounts
	(i) Revenues included in 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 trea	asures or other similar assets for financia	al gain, provide
-	the following amounts required to be reported under SFAS 11		ω gaii, μιστια σ
_	Revenues included in Form 990, Part VIII, line 1	re producting to these items.	▶ ¢
a	Assets included in Form 990, Part X		\$
D	Masers included itt follti aan' Latt V		> \$

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

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

14,366.

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

2. FIN 48 (ASC 740) Footnote. 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.

▶

Schedule D (Form 990) 2012

(11)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)

Schedule D (Form 990) 2012

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Open to Public

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990.

Employer identification number

CHILDREN AND FAMILY URBAN MINISTRIES

42-1396833

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on	(d) Method of d noncash contrib	etermı	-	ts
1	Art - Works of art		items contributed	Form 990, Part VIII, line 1g				
2	Art - Historical treasures							
3	Art - Fractional Interests							
-	1		· · · · · · · · · · · · · · · · · · ·					
4	Books and publications						·	
5	Clothing and household goods Cars and other vehicles							
6	· ·							
7	Boats and planes		<u> </u>					
8	Intellectual property		<u> </u>					
9	Securities - Publicly traded							
10	Securities - Closely held stock				 			
11	Securities - Partnership, LLC, or		1					
	trust Interests			<u></u>				
12	Securities - Miscellaneous			<u> </u>				
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate • Residential							
16	Real estate - Commercial			 				
17	Real estate - Other							
18	Collectibles		405	164 710				
19	Food inventory	X	425	164,718.	FAIR MARKET	<u>' VA</u>	TOF	
20	Drugs and medical supplies				· · · · · · · · · · · · · · · · · · ·			
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (SUPPLIES)	X	101		FAIR MARKET			
26	Other (MISCELLANEOUS)	X	23	13,239.	FAIR MARKET	' VA	LUE	
27	Other ()							
28_	Other (l			<u> </u>			
29	Number of Forms 8283 received by the organiz	ation during	the tax year for c	ontributions				
	for which the organization completed Form 828	3, Part IV, D	Oonee Acknowledg	gement . 29				
							Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1-28 tha	at it must hold for			ļ
	at least three years from the date of the initial c	ontribution,	and which is not i	equired to be used for exem	pt purposes for			İ
	the entire holding period?				•	30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	olicy that re	quires the review	of any non-standard contrib	utions?	31		X
32a	Does the organization hire or use third parties of	or related org	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in o	column (c) fo	or a type of proper	ty for which column (a) is ch	ecked,			Ĺ
	describe in Part II.							
LHA	For Paperwork Reduction Act Notice, see t	he Instruct	ions for Form 99).	Schedule M	(Form	990) (2012)

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.

OMB No 1545-0047 Inspection

Name of the organization

Employer identification number

CHILDREN AND FAMILY ORBAN MINISTRIES 42-1396833
FORM 990, PART VI, SECTION B, LINE 11: THE BOARD OF DIRECTORS REVIEW THE
FORM 990 BEFORE FILING.
FORM 990, PART VI, SECTION B, LINE 12C: WRITTEN CONFLICT OF INTEREST
POLICIES ARE UPDATED AND REVIEWED ANNUALLY FOR EACH BOARD MEMBER.
FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE COMMITTEE REVIEWS THE
ANNUAL BUDGET. THE EXECUTIVE COMMITTEE ALSO REVIEWS THE TOTAL SALARY
EXPENSE BUDGETED FOR THE ORGANIZATION. SALARIES, INCLUDING THE EXECUTIVE
DIRECTOR, ARE REVIEWED BY THE EXECUTIVE COMMITTEE.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE
AVAILABLE TO THE PUBLIC UPON REQUEST, AT THE ORGANIZATION'S OFFICE.
FORM 990, PART XI, LINE 2C:
THE EXECUTIVE COMMITTEE ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE
AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT AUDIT
FIRM.