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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 private foundations)

OMB No 1545-0047

Open to Public Inspection

▶ Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a> tax year beginning JUL 1, 2013 and ending JUN 30, 2014 A For the 2013 calendar year, or tax year beginning

	B c	heck if	C Name of organization		D Employer (dent	tification number
		⊣Addr	SS TIDDAN I PACITE OF DODMI AND THE			
	H	_ chan∈  Name			0.2	0395590
	늗	_ chan <sub>:</sub>   Initial	Doing Business As			
		_ returr □Term	Number and street (or P.U. box if mail is not delivered to street address)	om/suite	E Telephone num	
	<u> </u>	Jated ☐Amer	10 NORTH ROBBELL BIREET			-280-2600
	<u> </u>	returi ∏Appli	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,931,525.
		tion pend	PORTHAND, OR 3/22/		H(a) Is this a group	return
			F Name and address of principal officer.MICHAEL ALEXANDER		for subordinat	
			SAME AS C ABOVE		H(b) Are all subordinate	
	<u> 1 T</u>	ax-ex	empt status X 501(c)(3)	527		a list. (see instructions)
			te: ► WWW.ULPDX.ORG	T	H(c) Group exemp	
			forganization: X Corporation	L Year	of formation: 1945	M State of legal domicile; OR
	Ра	irt I	Summary	~		
	ø	1	Briefly describe the organization's mission or most significant activities: SEE SC	CHEDU	LE O	
	Activities & Governance		- <del></del>			
	eru	2	Check this box  if the organization discontinued its operations or disposed	d of more	than 25% of its net	
	ŏ	3	Number of voting members of the governing body (Part VI, line 1a)		<u> </u>	3 21
	8	4	Number of independent voting members of the governing body (Part VI, line 1b)		<u>_</u>	4 21
	es	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		<u> </u>	5 31
	Viti	6	Total number of volunteers (estimate if necessary)		L	6 110
	Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7	'a 0.
		b	Net unrelated business taxable income from Form 990-T, line 34		7	ъ 0.
					Prior Year	Current Year
	ā	8	Contributions and grants (Part VIII, line 1h)		1,167,107	1,846,904.
	nua	9	Program service revenue (Part VIII, line 2g)		0	1
	Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		34	
	<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		16,150	. 25,490.
		12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), [ine 12)		1,183,291	
		13	Grants and similar amounts paid (Part IX, column A) lines (3)		109,118	. 118,727.
		14	Benefits paid to or for members (Part IX, column (A)-line 4)		0	
	Se	15	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)		784,257	
	In Se	16a	Professional fundraising fees (Part IX, column (A): line (i) e) 2015		38,000	. 18,500.
	Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)	2.		
	ш	17	Other expenses (Part IX, column (A), lines 11a 140 11424)	_ [	297,972	
		18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,229,347	. 1,503,688.
		19	Revenue less expenses. Subtract line 18 from line 12		-46,056	. 369,119.
	s or			Be	ginning of Current Yea	r End of Year
	sets	20	Total assets (Part X, line 16)		301,420	638,539.
2015	t Assets d Balar	21	Total liabilities (Part X, line 26)		150,064	. 114,244.
	Pet	22	Net assets or fund balances. Subtract line 21 from line 20		151,356	524,295.
00	Pa	art II	Signature Block			•
<del>~~</del> √	Und	er pen	alties of perury, I declare that I have examined this return, including accompanying schedules ai	nd statem	ents, and to the best of	my knowledge and belief, it is
			ct, and complete. Declaration of preparer (other than officer) is based on all information of which			1
(2) [L] [L]		-	Direction Cilebourde		2/4/	2015
	Sign	n	Signature of officer	-	Date /	
- 1	Her		MICHAEL ALEXANDER, CHIEF EXECUTIVE OFFI	ICER		
			Type or print name and title		_,;;	
5			Print/Type preparer's name Preparer's signature		Date Check	PTIN
	Paid	1	YEE LEE MCGEE	_	1/30/15 self em	P01294356
O	Prep	arer	Firm's name GARY MCGEE & CO. LLP		Firm's EIN	
$\mathbb{Q}$		Only	Firm's address 808 S.W. THIRD AVENUE, SUITE 700			
			PORTLAND, OR 97204		Phone no. (	503) 222-2515
	May	the	RS discuss this return with the preparer shown above? (see instructions)			Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2013)

	990 (2013) URBAN LEAGUE OF PORTLAND, INC. 93-0395590	Page 2
Par	t III Statement of Program Service Accomplishments	THE STATE OF THE S
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	TO HELP EMPOWER AFRICAN AMERICANS AND OTHERS TO ACHIEVE EQUALITY IN	
	EDUCATION, EMPLOYMENT, AND ECONOMIC SECURITY.	
2	Did the organization undertake any significant program services during the year which were not listed on	
_	the prior Form 990 or 990-EZ?	X No
	If "Yes," describe these new services on Schedule O.	
3		X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, a	nd
	revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$ 418,429 · including grants of \$ 113,367 · ) (Revenue \$	)
	ADVOCACY AND CIVIC ENGAGEMENT - THE PROGRAM WORKS TO ACHIEVE POLICY	
	COMMUNITY CHANGE THAT ADVANCES EQUALITY, SOCIAL AND ECONOMIC JUSTICE	<u> </u>
	AND CIVIL RIGHTS FOR AFRICAN AMERICANS AND OTHERS IN OREGON. THE	707
	PROGRAM WORKS TO ADVANCE THE LEAGUE'S MISSION OF ECONOMIC EMPOWERMEN	
	AND CIVIL RIGHTS THROUGH ADVOCACY, OUTREACH AND COMMUNITY ORGANIZING RESEARCH, POLICY ANALYSIS, ISSUE CAMPAIGNS AND PUBLICATIONS THAT	<del>,</del>
	ELEVATE THE ISSUES OF ITS COMMUNITY AND PROPOSES SOLUTIONS FOR POLICE	v
	AND SOCIAL CHANGE.	
	THE BOOTHE CHARGE.	
4b	(Code ) (Expenses \$ 294,768 · including grants of \$ 870 · ) (Revenue \$	)
	SENIOR SERVICES - THE LEAGUE HAS SERVED SENIORS FOR MORE THAN A QUAI	RTER
	OF A CENTURY PROVIDING ONE OF THE ONLY AFRICAN AMERICAN CULTURALLY	
	SPECIFIC SENIOR SERVICE PROGRAMS IN THE STATE. IT PROVIDES OR CONNEC	
	SENIORS WITH SERVICES THAT ALLOW THEM TO REMAIN SAFELY IN THIER HOME	<u> </u>
	AND COMMUNITIES, INCLUDING SERVICES SUCH AS: PREVENTATIVE HEALTH SERVICES, CRISIS/EMERGENCY COUNSELING, TELEPHONE REASSURANCE TO	
	HOME-BOUND ELDERLY, CASE MANAGEMENT SERVICES, TRANSPORTATION, ADVOCA	NOV.
	AND OTHER PROGRAMS AND ACTIVITIES FOR HUNDREDS OF SENIORS LIVING ON	ACI,
	FIXED INCOMES IN THE NORTH AND NORTHEAST SECTIONS OF PORTLAND.	
	TIME INCOMES IN THE NORTH INFO NORTH END TO LONG OF TORIBLES.	<del></del>
4c	(Code ) (Expenses \$ 244,316 · including grants of \$ 4,490 · ) (Revenue \$	)
	WORKFORCE AND YOUTH SERVICES - THE LEAGUE'S WORKFORCE DEVELOPMENT	
	PROGRAM WORKS TO INCREASE AFRICAN AMERICAN EMPLOYMENT AND QUALITY OF	?
	LIFE BY OFFERING COMPREHENSIVE JOB TRAINING AND PLACEMENT SERVICES.	
	THESE SERVICES INCLUDE CONNECTING PEOPLE WITH CAREER OPPORTUNITIES,	
	MENTORING, COACHING, AND LONG-TERM RETENTION STRATEGIES.	
	MURITER ALGO HAG AN DADANDING MODULODGE DEDADENDING MUAM CONTENTION	1 50
	THE LEAGUE ALSO HAS AN EXPANDING WORKFORCE DEPARTMENT THAT CONTINUES	
	FIND EMPLOYMENT FOR PROFESSIONALS AND EXECUTIVES, THOSE IN THE TRADIAND SKILLED LABOR MARKETS, AND ENTRY-LEVEL INDIVIDUALS AND STUDENTS	
	IT HAS SUCCESSFULLY DONE FOR THE LAST SIX DECADES.	, AS_
	TI MID DOCUMENT DOME TON THE HADT DIN DECADED.	<del></del>
	THE LEAGUE'S SUMMER YOUTH EMPLOYMENT PROGRAM PROVIDES JOB READINESS	<del></del>
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ 96,352 • including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ► 1,053,865.	
222001	Form <b>9</b> 9	90 (2013)

	rt IV. Checklist of Required Schedules	<u> </u>	Pi	age o
	The one of the quite a contradict		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_1_	X	
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			
	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	X	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			٠,,
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		х
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7		
8	Schedule D. Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
3	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, VIII, 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 secunties 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			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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	444		х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	the organization's separate or consolidated inflancial statements for the tax year monde 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		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
	Schedule D, Parts XI and XII	12a	X	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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			l
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			<b>.</b>
40	foreign organization? 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	40		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		┢弃
17	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	<del>  ''</del>	<del></del>	$\vdash$
. •	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
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		Х

Form **990** (2013)

20a

20b

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule  ${\cal H}$ 

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

Form 990 (2013) URBAN LEAGUE OF PORTLAND, INC.
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		,,	
	government 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 of grants or other assistance to individuals in the United States on Part IX,			х
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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	00		х
	Schedule J	23		Α.
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			X
	Schedule K If "No", go to line 25a	24a		A_
	, , , , , , , , , , , , , , , , , , , ,	24b	-	-
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
_	any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24u		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	25a		х
	disqualified person during the year? If "Yes," complete Schedule L, Part I  Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
D	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	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		X
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		X
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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			۱,,
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
	Schedule N, Part II	32		_ <u>^</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			х
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33	<del> </del>	
34	Part V, line 1	34		X
250	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	$\vdash$	X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	<del></del>		
	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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		_	000	10040

Page 5

Form **990** (2013)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	19			
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 r	eportal	ole gaming			
	(gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					_
	filed for the calendar year ending with or within the year covered by this return	2a	31			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other		ty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accour	nts			
5a	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	action?		5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	ne orga	nızatıon solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions or	gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	rovided to the payor?	7 <u>a</u>	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as requ	ured	_		v
	to file Form 8282?	1 1		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d				х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		τ,	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		00 aa waasuurad2	7f	N/	
g	If the organization received a contribution of qualified intellectual property, did the organization file F if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7g 7h	N/	
н 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. C			711	217	
0	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at			8		
9	Sponsoring organizations maintaining donor advised funds.	,	- ag ,			
а	Did the organization make any taxable distributions under section 4966?		N/A	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		N/A	9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a				1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			l	
11	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders N/A	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them)	11b				ļ
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b	_			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		37 / 3	<u> </u>	-	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?		N/A	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	ا .مدا				
_	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	13c	<del></del>	14-	-	X
	If "Yes" has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedu	le O		14a	<del>                                     </del>	<del>  **</del>

Form 990 (2013) URBAN LEAGUE OF PORTLAND, INC. 93-0395590 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if School In O contains a response or note to any line in this Bort VI			X
800	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			
Sec	tion A. Governing body and Management		Yes	No
4	Enter the number of voting members of the governing body at the end of the tax year 21		162	NO
ıa	Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
_	Enter the number of voting members included in line 1a, above, who are independent  1b 21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
~	officer, director, trustee, or key employee?	2		х
3	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	х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	х	
	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	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		X
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
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).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		_X_
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
<u> </u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed OR			
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) a	ıvaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
40	Own website Another's website W 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	ıcıal	
00	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 organiza $MR$ . $MICHAEL$ $ALEXANDER$ – $503-280-2600$	ion 🕨		
	10 NORTH RUSSELL STREET, PORTLAND, OR 97227			

rm 990 (2013) •	URBAN	LEAGUE	OF	PORTLAND,	INC

93-0395590

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	Τ		((	C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos	ntion	) than	one	Reportable	Reportable	Estimated
	hours per	box	, unie	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week	_	1		1	J., u u.	1	from the	from related	other
	(list any hours for	direct				Ļ		organization	organizations (W-2/1099-MISC)	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC)	(	organization
	organizations	1 trust	nal tru		oyee	E.				and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) KIMBERLIN BUTLER	1.00	<u>B</u>	<u> </u>	E	ā	울.	ট্র			
DIRECTOR	1.00	X						0.	0.	0.
(2) KEVIN CHURCH	1.00	<del>  ^</del>	-	-	├	┢	├		0.	
DIRECTOR	1.00	$\mathbf{x}$						0.	0.	0.
(3) ANGELA DOWLING	1.00	<del> </del>		$\vdash$	$\vdash$			<del>                                     </del>		
DIRECTOR	1 2000	x						0.	0.	0.
(4) THERESSA DULANEY	1.00									
DIRECTOR		x						0.	0.	0.
(5) MARCUS EASTLAND	1.00									
DIRECTOR		X						0.	0.	0.
(6) LAKECIA GUNTER	1.00									
DIRECTOR		X						0.	0.	0.
(7) CARLA KELLEY	1.00									
DIRECTOR		X					L_	0.	0.	0.
(8) MICHAEL MONTGOMERY	1.00	ļ								
DIRECTOR		X		<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
(9) HIROMI PIPER OGAWA	1.00	١								
DIRECTOR	1	X		_		_	<u> </u>	0.	0.	0.
(10) TRACI ROSE	1.00	۱								_
DIRECTOR	1 00	X	┞	L.	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(11) LISA SMALLEY	1.00	١,,	1							_
DIRECTOR	1.00	X	-			-	<u> </u>	0.	0.	0.
(12) KARIS STOUDAMIRE-PHILLIPS DIRECTOR	1.00	x	ļ					0.	0.	0.
(13) BILL TOLBERT	1.00	1	⊢	-		-	_	0.	0.	<u> </u>
DIRECTOR	1.00	X					l	0.	0.	0.
(14) BRUCE WATTS	1.00	1	╁	-	-	-	├		0.	<u> </u>
DIRECTOR	1.00	$\mathbf{x}$						0.	0.	0.
(15) BILL J. WILLIAMS	1.00	+	╁		-	$\vdash$	<del>                                     </del>			
DIRECTOR		x	ł			1		0.	0.	0.
(16) KAREN WILLIAMS	1.00		T	<u> </u>	<b> </b>	1				
DIRECTOR		X						0.	0.	0.
(17) LOLENZO POE	1.00			<u> </u>		Г				·
CHAIR		X		Х	L		L	0.	0.	0.
000003 40 00 40								-		E 000 (0040)

URBAN LEAGUE OF PORTLAND, INC.

Part VIJ Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	(do		Pos heck		ገ s than	one	Reportable	Reportable			tımate	
	hours per week					is bot or/trus		1	compensation			nount	of
	(list any	la la	T	Γ	Г	Т	Ė	from the	from related organization		ŀ	other pensa	tion
	hours for	director	ŀ			٦		organization	(W-2/1099-MIS		l	om the	
	related	trustee or	stee			nsate		(W-2/1099-MISC)	(	,		anızat	
	organizations	T Tas	la tr		o yee	E .					and	d relat	ed
	below	Individual	Institutional trustee	Officer	Кеу етрюуее	Highest compensated employee	Former				orga	ınızatı	วทร
	line)	Ξ.	Ē	튱	Ře	훒툽	호				├─		
(18) GEORGE JONES	1.00	١,,		,,						_			^
CO-CHAIR	1 00	X	-	X		-	<u> </u>	0.		0.	<u> </u>	•	0.
(19) AMY WAYSON	1.00	<b>↓</b>		<b>.</b>									Λ
SECRETARY	1 00	X	<del> </del>	X	-	├	┝	0.		0.	<u> </u>		0.
(20) DAVID BARTZ, JR	1.00	x		x				0.		0.			Λ
ASSISTANT SECRETARY	1.00	^	┢	1	<u> </u>	-		0.		<u> </u>	<u> </u>		0.
(21) BRYCE HELGERSON	1.00	<b>↓</b>		x						0.			^
TREASURER	40 00	X	<u> </u>	^	-	-	⊢	0.		<u> </u>	<u> </u>		0.
(22) MICHAEL ALEXANDER	40.00	-		x		ļ	l	00 151		0.		7 2	17
PRESIDENT & CEO	40.00	<del> </del>	-	1		╁	$\vdash$	89,151.		<u> </u>	<u> </u>	7,3	4 / .
(23) MYLEN SHENKER	40.00	┨	Ì	x				0.		0.			0.
CFO (EFF. FEB. 2014 TO PRESENT)	40.00	┝	├	^	⊢	╁	├			<u> </u>			
(24) KEVIN ROGERS	40.00	-		x				66,200.		0.		6,6	1 Q
COO & CFO (EFF. JUL. 2013-JAN. 2014)		⊢	┢	<u> </u>	╁	╁		00,200.		<u> </u>	-	0,0	<u> </u>
		1											
		├	├	├	┢╌	╁	┝				<del> </del>		
		┨		l									
4h Cub assal	1	<u> </u>	<u> </u>			<u> </u>		155,351.		0.	1	3,9	66
1b Sub-total	II Castian A							0.		0.	<del></del>	3,3	0.
c Total from continuation sheets to Part V	ii, Section A							155,351.		0.	1	3,9	
d Total (add lines 1b and 1c)  2 Total number of individuals (including but n	ot limited to th		Licte	ad a	bow	٠, ١٠٠	bor		L L			<del>5 , 5</del>	-
compensation from the organization	iot iiimited to ti	1036	i ii Ste	su a	DOV	G) W	110 1	eceived more than \$100	,000 or reportab	10			(
Compensation from the organization												Yes	No
3 Did the organization list any former officer,	director or tri	iste	e ka	ov er	mnle	3V66	or	highest compensated e	mnlovee on	ľ	$\Box$		
line 1a? If "Yes," complete Schedule J for s			٠, ٠.٠	., o.		,,,,	, 0.	mgmoot componicated c	mpioyee en		3	1	X
4 For any individual listed on line 1a, is the su			omo	ensa	atior	n an	d ot	her compensation from	the organization		٣		
and related organizations greater than \$15	•							•	and organization		4		X
5 Did any person listed on line 1a receive or a									idual for services	,			
rendered to the organization? If "Yes," com											5		X
Section B. Independent Contractors	•												
Complete this table for your five highest co	mpensated in	dep	ende	ent c	ont	ract	ors t	that received more than	\$100,000 of con	npens	ation	rom	
the organization. Report compensation for	•									•			
(A)								(B)			(0	<del></del> >)	
Name and business	address	N	INC	E				Description of s	services	C	Compe	nsatio	n
<del></del>							I						
	=	_					ļ						
2 Total number of independent contractors (i	-	not li	mite	d to		_	stec	d above) who received n	nore than				
\$100,000 of compensation from the organi	zation -					0						000	
											Form	uon "	1010

		Check if Schedule O cont	ains a response	or note to any lir	ne in this Part VIII		_	
		-		-	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts s	1 a	Federated campaigns	1a	7,500.				
oun o		Membership dues	1b	33,253.				
S,E	С	Fundraising events	1c	211,618.				
a iii	d	Related organizations	1d	<del></del>		İ		
S,E		Government grants (contribut	tions) 1e	794,645.				
rion Sign	f	All other contributions, gifts, gran	ts, and					
<b>E</b>		similar amounts not included abo	ve 1f	799,888.				
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions included in lines	1a-1f \$	5,589.				
<u>2</u> <u>F</u>	h	Total. Add lines 1a-1f		,	1,846,904.		·····	
	0.0			Business Code				-
Š	2 a b						<u>-</u>	<del>                                     </del>
Ser	C							+
E S	d	<del></del>						†
Program Service Revenue	e		<del></del>					1
P.	_	All other program service reve	enue -					
		Total. Add lines 2a-2f	7140	<b>•</b>				
$\neg$	3	Investment income (including	dividends, intere	est. and				
	-	other similar amounts)		<b>&gt;</b>	413.	ļ		413.
	4	Income from investment of ta	x-exempt bond p	roceeds				
	5	Royalties		<b>•</b>				
1		·	(i) Real	(iı) Personal				
İ	6 a	Gross rents						]
	b	Less: rental expenses						1
	С	Rental income or (loss)						
	d	Net rental income or (loss)		<b></b>				
	7 a	Gross amount from sales of	(ı) Securities	(II) Other				
		assets other than inventory						
	b	Less cost or other basis						
		and sales expenses						
		Gain or (loss)						
1		Net gain or (loss)					<del></del>	<u> </u>
e l	8 a	Gross income from fundraisin						
enne		including \$ 211, 6						
Re		contributions reported on line		   EE E7E				
Other Re		Part IV, line 18	a	55,575. 58,718.				
₹		Less direct expenses	b	30,710.	-3,143.			-3,143.
		Net income or (loss) from fund		<b>—</b>	-3,143.			-3,143.
ļ	эa	Gross income from gaming ac Part IV, line 19						1
ļ	<b>L</b>	Less: direct expenses	a b	<del></del>	1			
1		Net income or (loss) from gan	=					1
- 1		Gross sales of inventory, less	•					<del>                                     </del>
		and allowances	а					
	b	Less: cost of goods sold	b		1			
		Net income or (loss) from sale	=		İ			
		Miscellaneous Revenu		Business Code			<del></del>	
İ	11 a	MISCELLANEOUS		900099	28,633.			28,633.
	b				<u> </u>			<del>                                     </del>
	С							
	d	All other revenue	<del>_</del>					
	е			<b>&gt;</b>	28,633.			
30000	12	Total revenue. See instructions.			1,872,807.	0.	0	
33200 10-29-	13							Form <b>990</b> (2013)

Section 501(c)(3) and 501(c)(4) organizations must of	complete all columns. All oth	ner organizations must co	mplete column (A)	<del></del>
Check if Schedule O contains a res				
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1 Grants and other assistance to governments and		440		
organizations in the United States. See Part IV, line	21 118,727.	118,727.		
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				<del></del>
4 Benefits paid to or for members				
5 Compensation of current officers, directors,	157,099.	26,634.	109,289.	21,176.
trustees, and key employees	137,033.	20,034.	109,209.	21,170.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)				
7 Other salanes and wages	668,441.	563,379.	88,220.	16,842.
8 Pension plan accruals and contributions (include	000,111.	300,0.50	00,220.	20,042.
section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	80,279.	63,158.	14,762.	2,359.
10 Payroll taxes	84,760.	61,139.	19,857.	2,359. 3,764.
11 Fees for services (non-employees):		,		
a Management				
<b>b</b> Legal				· · · · · · · · · · · · · · · · · · ·
c Accounting	55,635.		55,635.	
d Lobbying				
e Professional fundraising services. See Part IV, line	17 18,500.			18,500.
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25,				
column (A) amount, list line 11g expenses on Sch (		56,420.	23,560.	500.
12 Advertising and promotion	2,341.	1,769.	479.	93.
13 Office expenses	83,485.	17,820.	64,677.	988.
14 Information technology				
15 Royalties	60 255	10 000	40.000	
16 Occupancy	60,357.	12,277.	48,080.	440
17 Travel	46,506.	38,582.	7,811.	113.
18 Payments of travel or entertainment expense	s			
for any federal, state, or local public officials	7 511	5,165.	1 004	F 4 2
19 Conferences, conventions, and meetings	7,511.	5,105.	1,804.	542.
20 Interest		<del> </del>		<del></del>
21 Payments to affiliates	1,354.	-	1,354.	
<ul><li>Depreciation, depletion, and amortization</li><li>Insurance</li></ul>	10,680.		10,680.	
24 Other expenses. Itemize expenses not covered	10,000.		10,000	
above. (List miscellaneous expenses in line 24e. If 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	line			
a MISCELLANEOUS	17,024.	8,785.	8,128.	111.
b MEMBERSHIP DUES	10,509.	100.	1,909.	8,500.
c ALLOCATION OF INDIRECT	0.	79,910.	-91,114.	11,204.
d		· · · · · ·		· · · · · · · · · · · · · · · · · · ·
e All other expenses				
25 Total functional expenses. Add lines 1 through 24	e 1,503,688.	1,053,865.	365,131.	84,692.
26 Joint costs. Complete this line only if the organizat	ion			-
reported in column (B) joint costs from a combined	i			
educational campaign and fundraising solicitation.				
Check here following SOP 98-2 (ASC 958-720	)			

	•	Check if Schedule O contains a response or note to any line in	this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		43,246.	1	125,519.
	2	Savings and temporary cash investments		24,850.	2	255,876.
	3	Pledges and grants receivable, net		178,200.	3	213,218.
	4	Accounts receivable, net			4	"
	5	Loans and other receivables from current and former officers, d	rectors,			
		trustees, key employees, and highest compensated employees				
		Part II of Schedule L		5		
	6	Loans and other receivables from other disqualified persons (as				
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), a				
		employers and sponsoring organizations of section 501(c)(9) vo	luntary			
ţ	1	employees' beneficiary organizations (see instr). Complete Part	II of Sch L		. 6	
Assets	7	Notes and loans receivable, net			7	
ď	8	Inventones for sale or use			8	
	9	Prepaid expenses and deferred charges		3,082.	9	19,384.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a	215,265.			
	ь	Less: accumulated depreciation 10b	208,558.	6,061.	10c	6,707. 17,835.
	11	Investments - publicly traded securities		14,016.	11	17,835.
	12	Investments - other securities See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		31,965.	15	0.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		301,420.	16	638,539.
	17	Accounts payable and accrued expenses		75,103.	17	96,744.
	18	Grants payable		25 000	18	45.500
	19	Deferred revenue		35,000.	19	17,500.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Sched	F		21	
es	22	Loans and other payables to current and former officers, direct	ors, trustees,			
ij		key employees, highest compensated employees, and disqualif	ied persons.			
Liabilities		Complete Part II of Schedule L	L		22	
_	23	Secured mortgages and notes payable to unrelated third partie	s	20 061	23	
	24	Unsecured notes and loans payable to unrelated third parties		39,961.	24	0.
	25	Other liabilities (including federal income tax, payables to relate				
	1	parties, and other liabilities not included on lines 17-24) Compli	ete Part X of			
		Schedule D	}	150,064.	25	114 244
	26	Total liabilities. Add lines 17 through 25	<u> </u>	130,004.	26	114,244.
		Organizations that follow SFAS 117 (ASC 958), check here	► X and			
Ses		complete lines 27 through 29, and lines 33 and 34.		-52,509.		288,787.
lan	27	Unrestricted net assets	-	203,865.	27	235,508.
Ba	28	Temporarily restricted net assets	-	203,003.	28	233,300.
Net Assets or Fund Balances	29	Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check	, <sub>bara</sub>		29	
Ē			THEIR PLAN			
S O	20	and complete lines 30 through 34.			20	
set	30	Capital stock or trust principal, or current funds			30	<del>_</del> -
t As	31	Paid-in or capital surplus, or land, building, or equipment fund	funds		31	
Se	32	Retained earnings, endowment, accumulated income, or other	iuiius	151,356.	32 33	524,295.
	33	Total lightly and not assets (fund balances	<u> </u>	301,420.	$\overline{}$	638,539.
	34	Total liabilities and net assets/fund balances		JUI, 42U.	34	030,339.

	990 (2013) URBAN LEAGUE OF PORTLAND, INC.	93	-039 <u>5</u>	<u> 590</u>	Pag	ge 12	
Pai	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
			_				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	,87	2,8	<u>07.</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	,50	3,6	88.	
3	Revenue less expenses. Subtract line 2 from line 1	3				19.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				56.	
5	Net unrealized gains (losses) on investments	5			3,8	20.	
6	Donated services and use of facilities	6					
7	/ Investment expenses 7						
8	8 Prior period adjustments 8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					_	
	column (B))					<u>95.</u>	
Pa	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					<u> </u>	
					Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Ì			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		1	2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a					
	separate basis, consolidated basis, or both						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis	s,				
	consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis			- 1			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audi	t,	1			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		į.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	udit				
	Act and OMB Circular A-133?		ļ	3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	ıdıt				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		Щ_	
				Form	990	(2013)	

10-29-13

#### **SCHEDULE A**

(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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number 93-0395590

		URBAN L	EAGUE OF POR	TLAND	, INC				9	3-0395590
Part I	Reason		ity Status (All organiz				t.) See inst	ructions.		
The organ	ization is not a	a private foundation	because it is. (For lines 1	through	11, check	only one b	oox)		•	
1 🗀	A church, co.	nvention of churche	s, or association of chur	ches desc	ribed in <b>se</b>	ction 170	(b)(1)(A)(i)			
2	A school des	pol 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 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		,		•				•	•
5 🗀	•		benefit of a college or ur	niversity of	wned or or	perated by	a governi	nental uni	t describ	ped in
	•	(b)(1)(A)(iv). (Compl	•	•	•	•	J			
6 🗀				t described	d in sectio	n 170(b)(	1)(A)(v).			
7 X	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in									
	•	b)(1)(A)(vi). (Comple	<u>-</u>			<b>3</b>			3	, , , , , , , , , , , , , , , , , , , ,
в 🗀			section 170(b)(1)(A)(vi).	(Complete	Part II.)					
9	-		eives (1) more than 33 1		•	rom contri	butions in	nembershi	n fees a	nd gross receipts from
-	-	•	nctions - subject to certa		• •					- '
		•	axable income (less sect	•		•				•
		509(a)(2). (Complete	,		. ,			, <b>g</b>		
10 🔲			perated exclusively to te	st for publ	ıc safety. S	See <b>sect</b> io	n 509(a)(4	I).		
11	-		perated exclusively for th		-			•	v out the	purposes of one or
	-	•	ations described in section						•	• •
			organization and comple				•	•	, ,	
	a Type I	· · · · · · · · · · · · · · · · · · ·	·	pe III - Fu	-		C	I 🔲 Typ	e III - No	n-functionally integrated
е 🗀	By checking	this box, I certify that	at the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified	persons other than
	foundation m	nanagers and other t	han one or more publicly	y supporte	d organiza	ations des	cnbed in s	ection 509	9(a)(1) or	section 509(a)(2)
f	If the organiz	ation received a writ	tten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		
	supporting o	rganization, check tl	nis box							
9	Since Augus	t 17, 2006, has the o	organization accepted ar	ny gift or c	ontributior	from any	of the follo	owing pers	sons?	
	(ı) A perso	n who directly or inc	lirectly controls, either al	one or tog	ether with	persons o	described	ın (II) and (	ııı) below	, Yes No
	the gove	erning body of the s	upported organization?							11g(i)
	(ii) A family	member of a perso	n described in (i) above?							11g(ii)
	(iii) A 35% (	controlled entity of a	ı person described in (i) d	or (II) above	e?					11g(iii)
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s).					
			<u></u>				···			
(i) Name	of supported	(ii) EIN	(III) Type of organization	, ,	rganization	, , ,		(vi) Is organizatio		(vii) Amount of monetary
org	anızatıon		(described on lines 1-9		sted in your document?		ion in col.	l (i) organız	ed in the	support
		1	above or IRC section (see instructions))		,		Support	U.S	. '	
			\	Yes	No	Yes	No	Yes	No	
				<del>  -</del>	<del></del>			ļ		
		<del> </del>	·	<del> </del> -			<del> </del>	ļ		
				<del> </del>						
Total		!	1		į .	]				

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

Schedule A (Form 990 or 990-EZ) 2013

## Schedule A (Form 990 or 990-EZ) 2013 URBAN LEAGUE OF PORTLAND, INC. 93-0395590 Page 2 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.)

Sec	tion A. Public Support		·	<u> </u>			
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	993,668.	1,084,394.	1,177,630.	1,167,107.	1,846,904.	6,269,703.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						<u></u>
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	993,668.	1,084,394.	1,177,630.	1,167,107.	1,846,904.	6,269,703.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly			}			
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						409,965.
	Public support. Subtract line 5 from line 4						5,859,738.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	993,668.	1,084,394.	1,177,630.	1,167,107.	1,846,904.	6,269,703.
8	Gross income from interest,	-					
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	1,131.	305.	75.	34.	413.	1,958.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain			İ			
	or loss from the sale of capital				4		
	assets (Explain in Part IV.)	26,415.	15,645.	15,348.	14,953.	28,633.	100,994.
11	Total support. Add lines 7 through 10		<u> </u>				6,372,655.
12	•	•	•			12	232,885.
13	First five years. If the Form 990 is for	-	s first, second, thire	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3)	
<u>C</u>	organization, check this box and store tion C. Computation of Publ	here	voontooo				
	•						01 05
	Public support percentage for 2013 (	= = =	•	olumn (f))		14	91.95 %
	Public support percentage from 2012	•	•			15	91.86 %
16a	33 1/3% support test - 2013. If the				14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	. ,	· ·				► X
ь	33 1/3% support test - 2012. If the	-			line 15 is 33 1/3%	or more, check the	nis box
<b>4</b> -	and stop here. The organization qual	•	• • •				▶∟
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					rt IV how the organ	nization
	meets the "facts-and-circumstances"	-			•		▶□
b	10% -facts-and-circumstances tes	_					
	more, and if the organization meets the				•		,
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 160, 1/a, or 17b	, check this box a	ina see instruction	<u>s</u> ▶∟∟

## Schedule A (Form 990 or 990-EZ) 2013 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)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")						
2	Gross receipts from admissions,						;
	merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the					}	
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to				İ		
	the organization without charge				ļ		
6	Total. Add lines 1 through 5						
72	Amounts included on lines 1, 2, and						
	3 received from disqualified persons				ļ		
t	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)	l			<u> </u>		
	ction B. Total Support				· · · · · ·		
Cale	endar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						<del></del>
10a	Gross income from interest, dividends, payments received on			i			
	securities loans, rents, royalties					1	
	and income from similar sources			·	1		
Ł	Unrelated business taxable income		Ì				
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,		1				<b>!</b>
	whether or not the business is						1
	regularly carried on			] 		<del> </del>	ļ
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV)				<del> </del>		<del>                                     </del>
	Total support. (Add lines 9, 10c, 11, and 12)	<u></u>	l		1		
14	First five years. If the Form 990 is for	r the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3) organı	zation,
_	check this box and stop here		<del></del>				▶└
	ction C. Computation of Publ					T T	<del></del>
15	Public support percentage for 2013 (		<del>=</del> '	column (f))		15	<u>%</u>
16				<del></del> -		16	<u>%</u>
	ction D. Computation of Inve					1471	
17	, ,	•	• •	ne 13, column (t))		17	<u>%</u>
18	, ,			an line 4.4 - 1.11	. 45	18	<u>%</u>
19	a 33 1/3% support tests - 2013. If the						17 IS not
	more than 33 1/3%, check this box a						▶∟
1	b 33 1/3% support tests - 2012. If the	•					. —
<b>-</b> -	line 18 is not more than 33 1/3%, che					<del>-</del>	
20	Private foundation. If the organization	on did not check a	Dox on line 14, 19	a, or 19b, check t	inis box and see in	structions	

Schedule A (Form 9	990 or 990-EZ) 201:	3 URBAN LE	AGUE OF POR	LLAND, INC	40.00 + 11 + 47	93-0395590 Page
Also o	omnlete this part f	r <b>mation.</b> Provide	the explanations requiformation. (See instruc	ired by Part II, line ' tions)	10, Part II, line 1/a o	r 17b, and Part III, line 12.
71300	ompiete this part it	or any additional in	normation: (Occ instruc	uonaj.		-
SCHEDULE A	A, PART II	, LINE 10	, EXPLANATION	ON FOR OTH	ER INCOME:	
AT CORT I AND	TOTIC THOOM	rm / 6100 0	0.4.)			
MISCELLANE	EOUS INCOM	E (\$100,9	94)			
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#### **SCHEDULE C**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

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

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

OMB No 1545-0047

Open to Public Inspection

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes." to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Section 501(c)(4), (5), or (6) organizations: Complete Part III   Name of organization   URBAN LEAGUE OF PORTLAND, INC.   93 – 0 3 9 5 5 9 0     Part I-A   Complete if the organization is exempt under section 501(c) or is a section 527 organization.    Provide a description of the organization's direct and indirect political campaign activities in Part IV.   Political expenditures		Contrar 501/a)/4) (5) or (6) organize	stions: Complete Part III		, . a ,	ax, mon				
Part I-A   Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1			ations: Complete Part III		Emn	lover identification number				
Part I-A   Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures 3 Volunteer hours  Part I-B   Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  2 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  4 If "Yes," describe in Part IV  Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's denoting organization's funds. Also enter the amount of political contributions received and promptly and directly delivered to a separ	144111	_	EXCITE OF DODUTANT	TNC						
1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures 3 Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization's funds. If none, enter 0-  (a) Name (b) Address (c) EIN (d) Amount paid from file organization or separate political organization in Part IV	Pai	rt I-A   Complete if the or	nanization is exempt under	er section 501(c)	or is a section 527 o					
2 Political expenditures 3 Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization ande payments. For each organization isted, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter-0- contributions received and promptly and directly delivered to a separate political organization's funds. If none, enter-0- contributions received and promptly and directly delivered to a separate political organization's funds. If none, enter-0- contributions received and promptly and directly delivered to a separate political organization's funds. If none, enter-0- contributions received and promptly and directly delivered to a separate political organization.	ı aı	Complete if the or	gamzation is exempt und	3 30011011 00 1(0)	01 13 4 30011011 027 0	ngamzation.				
2 Political expenditures 3 Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization ande payments. For each organization isted, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter-0- contributions received and promptly and directly delivered to a separate political organization's funds. If none, enter-0- contributions received and promptly and directly delivered to a separate political organization's funds. If none, enter-0- contributions received and promptly and directly delivered to a separate political organization's funds. If none, enter-0- contributions received and promptly and directly delivered to a separate political organization.	_	B 1 1 1 1 1			- D - + B/					
Part I-B   Complete if the organization is exempt under section 501(c)(3).  1			zation's direct and indirect politica	ii campaign activities						
Part I-B   Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV  Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name (b) Address (c) EIN (d) Amount paid from filing organizations for enter organization. Such as a separate contributions received and promptly and directly delivered to a separate political organization. Such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name (b) Address (c) EIN (d) Amount paid from filing organization organization. Such as a separate political organization.		•			***					
1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  4 Was a correction made? 5 If Yes, describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0-dilutical contributions received and promptly and directly delivered to a separate political organization's funds. If none, enter -0-dilutical organization.	3	Volunteer nours								
1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  4 Was a correction made? 5 If Yes, describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0-dilutical contributions received and promptly and directly delivered to a separate political organization's funds. If none, enter -0-dilutical organization.	Dai	rt I-B Complete if the or	ganization is exempt unde	er section 501(c)	(3)					
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4a Was a correction made?    b   f "Yes," describe in Part IV     Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).    Enter the amount directly expended by the filing organization for section 527 exempt function activities		•								
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Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities   \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$						L Yes L No				
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political action committee (PAC) If additional space is needed, provide information in Part IV  (a) Name  (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- promptly and directly delivered to a separate political organization.			•			•				
(a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0-delivered to a separate political organization.		•	• •		•	ate segregated fund or a				
filing organization's contributions received and funds. If none, enter -0-promptly and directly delivered to a separate political organization.		political action committee (PAC) II	additional space is needed, provi	de information in Pan	: IV	<del></del>				
funds. If none, enter -0- promptly and directly delivered to a separate political organization.		(a) Name	(b) Address	(c) EIN		, , ,				
delivered to a separate political organization.			1							
					Turius. Il riorie, eriter -o-					
If none, enter -0-										
						If none, enter -0-				
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						<u> </u>				

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

Schedule C (Form 990 or 990-EZ) 2013 URBA	N LEAGU	E OF PORTLA	ND, INC.	93-(	0395590 Page 2
Part II-A Complete if the organization (election under section 5		mpt under sectio	n soricijaj and ni	ea romi 5700	
A Check ► ☐ if the filing organization be	longs to an aff		n Part IV each affiliated	group member's nar	me, address, EIN,
expenses, and share of ex  B Check   if the filing organization ch	-		weigne apply		
	obbying Expe	nditures		(a) Filing organization's totals	(b) Affiliated group totals
4 Tablish was an add as a file and a		(areas resta labburas)			<del></del>
Total lobbying expenditures to influence p     Total lobbying expenditures to influence a	-				<del> </del>
c Total lobbying expenditures (add lines 1a	J	dy (direct lobbyllig)	ŀ		-
d Other exempt purpose expenditures	and 1b)		ŀ	<del></del>	
e Total exempt purpose expenditures (add	lines 1c and 1	d)	ŀ		
f Lobbying nontaxable amount. Enter the a			h columns		<del>                                     </del>
If the amount on line 1e, column (a) or (b) is:	1	bying nontaxable am			
Not over \$500,000	<del></del>		ount is.		
Over \$500,000 but not over \$1,000,000					
Over \$1,000,000 but not over \$1,500,000		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000,000	ss over \$1,500,000				
Over \$17,000,000	\$1,000		00 0101 \$1,000,000		
Over \$17,000,000	ή ψί,ουυ,				
g Grassroots nontaxable amount (enter 259	6 of line 1f)				<u> </u>
h Subtract line 1g from line 1a. If zero or les	•				
i Subtract line 1f from line 1c. If zero or less				<del></del>	<del>                                     </del>
j If there is an amount other than zero on e	•	line 1i, did the organiz	ation file Form 4720		- <del>'</del>
reporting section 4911 tax for this year?		<b>, . .</b>			Yes No
	4-Year Av	eraging Period Under	Section 501(h)		
, _		• •	n do not have to comp es 2a through 2f on pa		
L	obbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					<del>-</del>
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013

### Schedule C (Form 990 or 990-EZ) 2013 URBAN LEAGUE OF PORTLAND, INC. 93-039559 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	a)	(1	(b)	
of the lobbying activity	Yes	No	Ame	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of				
a Volunteers?	X			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			
c Media advertisements?		Х		
d Mailings to members, legislators, or the public?		Х		
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?		X		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i Other activities?	X			2,140.
j Total. Add lines 1c through 1i				2,140.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c)	(5), or se	ction	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Part III-B Complete if the organization is exempt under section 501(c)(4), sec				
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere	d "No," O	R (b) Par	t III-A, lii	ne 3, is
answered "Yes."		1		
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	tical			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
expenditure next year?		4		<del>-</del>
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Dord IV   Complemental Information				
Part IV Supplemental Information		II-A, line 2; a	nd Part II-t	3, line 1.
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated gro	up list), Part I			
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated gro Also, complete this part for any additional information	up list), Part l			
	up list), Part I			
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated gro Also, complete this part for any additional information		ELOP A	N	
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated gro Also, complete this part for any additional information PART II-B, LINE 1, LOBBYING ACTIVITIES:	TO DEV			
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated gro Also, complete this part for any additional information PART II-B, LINE 1, LOBBYING ACTIVITIES:  EXPLANATION: THE ORGANIZATION WORKS WITH VOLUNTEERS  ANNUAL LEGISLATIVE AGENDA AND COORDINATES A LEGISLAT	TO DEV	Y EACH		
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated gro Also, complete this part for any additional information PART II-B, LINE 1, LOBBYING ACTIVITIES:  EXPLANATION: THE ORGANIZATION WORKS WITH VOLUNTEERS	TO DEV	Y EACH		
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated gro Also, complete this part for any additional information PART II-B, LINE 1, LOBBYING ACTIVITIES:  EXPLANATION: THE ORGANIZATION WORKS WITH VOLUNTEERS  ANNUAL LEGISLATIVE AGENDA AND COORDINATES A LEGISLAT	TO DEVI	Y EACH		

Schedule C (Form	990 or 990-EZ) 2013 plemental infor	matic	BAN I	LEAGUE (	OF PORT	LAND, IN	٠.	<del></del> .	93-03955	O Page
Part IV, Sup	piementai inion	maur	UII (CON	unuea)					<del></del>	
COMMUNITY	EDUCATION	ON	THE	PUBLIC	HEALTH	IMPACTS	OF	MATTERS	RELATING	то
A LOCAL DI	EFERENDUM.									
LOCAL K	EFERENDUM.						•			_
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#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

URBAN LEAGUE OF PORTLAND, INC.

Employer identification number 93-0395590

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	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	wnting that the assets held in donor advise	ed funds			
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No			
6	Did the organization inform all grantees, donors, and donor a		used only			
	for chantable purposes and not for the benefit of the donor of					
	impermissible private benefit?		Yes No			
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Pa	art IV, line 7.			
1	Purpose(s) of conservation easements held by the organizat		••			
	Preservation of land for public use (e.g., recreation or e		torically important land area			
	Protection of natural habitat	Preservation of a certif	fied historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	of a conservation easement on the last			
	day of the tax year.					
			Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements	2b				
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c			
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structu	ire .			
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax					
	year ▶					
4	Number of states where property subject to conservation ea	sement is located >				
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements i	t holds?	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements du	unng the year 🕨			
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	the year ► \$			
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(	h)(4)(B)(ı)			
	and section 170(h)(4)(B)(ii)?		☐ Yes ☐ No			
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense	statement, and balance sheet, and			
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes t	the organization's accounting for			
	conservation easements.					
Pa	rt III Organizations Maintaining Collections o	of Art, Historical Treasures, or Ot	ther Similar Assets.			
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8				
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statem	nent and balance sheet works of art,			
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherar	nce of public service, provide, in Part XIII,			
	the text of the footnote to its financial statements that descri					
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical			
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	olic service, provide the following amounts			
	relating to these items					
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$			
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$			
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial				
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:				
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$			
b	Assets included in Form 990, Part X		<b>&gt;</b> \$			

		EAGUE OF PO	RTLAND,	INC.		93-0	395590 Page 2	
Par	t III Organizations Maintaining C	ollections of Art	t, Historical T	reasures, o	or Other	Similar Ass	ets(continued)	
3	Using the organization's acquisition, accessi	on, and other records	s, check any of th	e following tha	at are a sign	ificant use of it	s collection items	
	(check all that apply):							
а	Public exhibition	d	Loan or ex	kchange progra	ams			
þ	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	how they further	the organizati	ion's exemp	ot purpose in Pa	art XIII	
5	During the year, did the organization solicit o	r receive donations o	f art, historical tre	easures, or oth	er sımılar as	ssets		
	to be sold to raise funds rather than to be ma						Yes No	
Par	t IV Escrow and Custodial Arran	<b>gements.</b> Complet	te if the organizat	ion answered	"Yes" to Fo	rm 990, Part IV	, line 9, or	
	reported an amount on Form 990, Par	rt X, line 21		_				
1a	Is the organization an agent, trustee, custod	an or other intermedi	ary for contribution	ons or other as	ssets not inc	cluded		
	on Form 990, Part X?							
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table.					
	Amount							
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
<b>2</b> a	Did the organization include an amount on Fe	orm 990, Part X, line 2	21?			L	_ Yes       No	
	If "Yes," explain the arrangement in Part XIII.							
Par	t V Endowment Funds. Complete i	f the organization ans	wered "Yes" to F					
		(a) Current year	(b) Prior year	(c) Two year	rs back (d)	Three years bac	(e) Four years back	
1a	Beginning of year balance		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
b	Contributions		<del></del>	1				
C	Net investment earnings, gains, and losses	,	<u>.                                    </u>					
d	Grants or scholarships			_				
е	Other expenditures for facilities			1				
	and programs		·					
f	Administrative expenses				<del></del>		ļ	
g	End of year balance						1	
2	Provide the estimated percentage of the cur	rent year end balance	· .	(a)) held as.				
а	Board designated or quasi-endowment		_%					
b	Permanent endowment	%						
С	Temporanly restricted endowment	%						
	The percentages in lines 2a, 2b, and 2c should							
За	Are there endowment funds not in the posse	ssion of the organiza	tion that are held	and administe	ered for the	organization	( <del></del>	
	by:						Yes No	
	(i) unrelated organizations						3a(i)	
_	(ii) related organizations		0-1-1 1 50				3a(ii)	
	If "Yes" to 3a(ii), are the related organizations	•					3b	
4 D2:	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		vment funds.					
Par	<del></del>		D-+ N/ 1 44-	0 5 000	N Dood V Lo	- 10		
	Complete if the organization answere						(A) D (	
	Description of property	(a) Cost or oth	. 1 11	st or other	, ,	umulated	(d) Book value	
		basis (investm	ent) Dasi	s (other)	debte	ciation	1,000.	
	Land	<del></del>		Ι, Ο Ο Ο •		<del></del>	Ι,000.	
b	•							
C 	Leasehold improvements			14,265.	<u>ე</u> ი	8,558.	5,707.	
d	Equipment		<del>-   - 2</del>	14,203.		, , , , , , , ,	3,101.	
	Other	qual Form 990 Part )	( column (R) line	10(c) )			6.707.	

Part X	Other Liabilities.
--------	--------------------

(1) Financial derivatives

(3) Other (A) (B) (C) (D) (E) (F) (G) (H)

> (1) (2) (3)(4) (5) (6)(7)(8) (9)

> (1) (2)(3)(4) (5) (6) (7) (8) (9)

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

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

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

Schedule D (Form 990) 2013

URBAN LEAGUE OF PORTLAND, INC.

Schedule D (Form 990) 2013

#### **SCHEDULE G**

(Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990 or Form 990-EZ. Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990.

Open To Public Inspection

Name of the organization	71.6VP 07 D0D#V 11VD	737	_				ntification number
Francisco A effection	EAGUE OF PORTLAND,  Complete if the organization answer	_		Form 990 Part IV 1	ine 17	93-0395 Form 990-FZ	· · · · · · · · · · · · · · · · · · ·
Part I required to complete this par		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7 01111 930,1 210 14,1		. 1 01111 330-122	
<ul> <li>1 Indicate whether the organization rais a X Mail solicitations</li> <li>b X Internet and email solicitations</li> <li>c X Phone solicitations</li> <li>d X In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, F</li> <li>b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the</li> </ul>	e X Solicitat f X Solicitat g X Special  or oral agreement with any individual Part VII) or entity in connection with p  ividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-g gover tising ding o tional f	overnment grants nment grants events fficers, directors, tru fundraising services?	stees	X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have cu or con contribu	ustody	(iv) Gross receipts from activity	to (o	Amount paid or retained by) fundraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization
SAMANTHA SWAIM FUNDRAISING,		Yes	No				<u> </u>
LLC - P.O. BOX 17191,	FUNDRAISING		Х	267,193.		18,500.	248,693.
				<u>.</u>			
					-	<del> </del>	
-							
	-						
				267 103		10 500	040 600
Total  3 List all states in which the organization	on is registered or licensed to solicit	contrib	ution	267,193.		18,500.	
or licensing.	or is registered of illustrated to solicit	COITAIL	ulion.	o nas been notine	J IL 15	exempt nomin	gistration
OR							
				·			
							<del></del>
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Schedule G (Form 990 or 990-EZ) 2013

b If "Yes," explain \_

332082 09-12-13

Schedule G (Form 990 or 990-EZ) 2013 URBAN LEAGUE OF PORTLAND, INC. 9	3-0395590 Page 3
11 Does the organization operate gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity operated in:	
a The organization's facility	13a %
<b>b</b> An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records	
Name ▶	
Address >	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount	t
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party:	
Name ►	
Address ►	
16 Gaming manager information	
Name	
Gaming manager compensation  \$	
Description of services provided	
Director/officer Employee Independent contractor	
47. Manudatan, Joseph Mana	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes No
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the state of the state gaming licenses.	
organization's own exempt activities during the tax year > \$	110
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part IV Supplemental Information.	t III. lines 9, 9b, 10b, 15b
15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instruction	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAI	SERS:
<u> </u>	
(I) NAME OF FUNDRAISER: SAMANTHA SWAIM FUNDRAISING, LLC	
(1) Mand of Forbiditonic binding builting builting, and	
(I) ADDRESS OF FUNDRAISER: P.O. BOX 17191, PORTLAND, OR 9721	7
	<del> </del>

Schedule (Form 990 or 990-E2) UKDAN LEAGUE OF PURILLAND, INC. 933-0393390 Page Part IV   Supplemental Information (continued)				
	Part IV   Supplemental In	formation (continued)		
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

▶ Attach to Form 990.

OMB No 1545-0047	2013	Open to Public	Inspection

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

Name of the organization URBAN LEAGUE OF PORTLAI	GUE OF PO	RTLAND, INC					Employer identification number 93-0395590
Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount	o substantiate the		or assistance, the	grantees' eligibility	for the grants or ass	of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
	stance?	,	:				X Yes No
꺐	cedures for moni	toring the use of grant	funds in the Unite	d States			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments an	d Organizations in the	e United States. C	complete if the orga	inization answered "\	res" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated it additional space is needed	55,000 Part II can	be duplicated if addit	ional space is need	ged	70 100 100 100		
1 (a) Name and address of organization or government	( <b>b</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASIAN PACIFIC AMERICAN NETWORK OF							PARTNERSHIP FORMED TO AID
OREGON - 240 NORTH BROADWAY, SUITE							RESEARCH IN THE FIELD OF
215 - PORTLAND, OR 97227	80-0252850	501(C)3	31,000.	0.			HEALTHCARE
OREGON LATING HEALTH COALITION							DARTNERSHIP FORMED TO AID
315 amilia vamuanda pmann 015							ac diata and MI hodradad
	26-1530127	501(C)3	18 500.	0,			RESEARCH IN THE FIELD OF HEALTHCARE
. 1							
UPSTREAM PUBLIC HEALTH							PARTNERSHIP FORMED TO AID
240 NORTH BROADWAY, SUITE 215							RESEARCH IN THE FIELD OF
PORTLAND, OR 97227	42-1579435	501(C)3	18,500.	0.			HEALTHCARE
CENTER FOR INTERCULTURAL							
ORGANIZING - 700 NORTH							PARTNERSHIP FORMED TO AID
KILLINGSWORTH STREET - PORTLAND,							RESEARCH IN THE FIELD OF
OR 97217	74-3098100	501(C)3	18,500.	0.			HEALTHCARE
HEA							PARTNERSHIP FORMED TO AID
3430 S.E. POWELL BOULEVARD							RESEARCH IN THE FIELD OF
PORTLAND, OR 97202	93-1192100	501(C)3	14,000.	0.			HEALTHCARE
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government or	ganizations listed in th	e line 1 table				5.
-1	listed in the line	- 1					<b>A</b>
LHA For Paperwork Reduction Act Notice, see the Instructions for	see the Instruct	ions for Form 990.					Schedule I (Form 990) (2013)

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Schedule I (Form 990) (2013) URBAN LEAGUE OF PORTLAND, INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. EXPLANATION: THE LEAGUE SCHEDULES REGULAR MEETINGS WITH PARTNER AGENCIES RECEIVING GRANT FUNDS TO CHECK IN ON PROGRESS ACHIEVING SHARED GOALS AND (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance WORK PLAN ACTIVITIES. PART I, LINE 2: Part IV

Schedule I (Form 990) (2013)

332102 10-29-13

Page 2

93-0395590

URBAN LEAGUE OF PORTLAND, INC.

#### **SCHEDULE Q** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Attach to Form 990 or 990-EZ.

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

Open to Public

OMB No 1545-0047

Inspection

Name of the organization URBAN LEAGUE OF PORTLAND, INC. Employer identification number 93-0395590

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE URBAN LEAGUE OF PORTLAND HELPS EMPOWER AFRICAN AMERICANS AND OTHERS
TO ACHIEVE EQUALITY IN EDUCATION, EMPLOYMENT, AND ECONOMIC SECURITY.
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
TRAINING ON FUNDAMENTAL SKILLS REQUIRED TO OBTAIN AND MAINTAIN
EMPLOYMENT. SEPARATE PROGRAMS ARE CONDUCTED FOR MIDDLE SCHOOL STUDENTS,
AS WELL AS A HIGH SCHOOL AND YOUNG ADULTS PROGRAM. AS PART OF THIS
PROGRAM, PARTICIPANTS GO ON SITE VISITS TO LOCAL EMPLOYERS AND HIGHER
EDUCATION INSTITUTIONS.
FINALLY, THE LEAGUE PROVIDES JOB-RELATED EVENTS, SUCH AS ITS CAREER
FAIR, HELD ANNUALLY FOR 20 YEARS (AND COUNTING).
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
COVER OREGON - THE LEAGUE IS ONE OF A SELECT GROUP OF
CULTURALLY-SPECIFIC ORGANIZATIONS CONTRACTED BY THE OREGON HEALTH
AUTHORITY TO PROVIDE OUTREACH AND PROMOTE AWARENESS AND ENROLLMENT OF
AFRICAN AMERICANS AND OTHER UNDERSERVED COMMUNITIES IN THE RECENTLY
CREATED COVER OREGON HEALTH INSURANCE PROGRAM.
EXPENSES \$ 90,353. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
YOUNG PROFESSIONALS - THE URBAN LEAGUE OF PORTLAND YOUNG PROFESSIONALS
(ULPDXYP) ARE A VOLUNTEER AUXILIARY OF THE URBAN LEAGUE OF PORTLAND
THAT ENCOURAGES YOUNG PROFESSIONALS, AGES 21 TO 40, TO EMPOWER THEIR
COMMUNITIES AND CHANGE LIVES THROUGH THE URBAN LEAUGE MOVEMENT. THE
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  Schedule O (Form 990 or 990-EZ) (2013) 332211 09-04-13

ULPDXYP HOSTS MONTHLY PROFESSIONAL AND PERSONAL DEVELOPMENT PROGRAMS

FOR ITS MEMBERS AND CONNECTS THEM TO THE URBAN LEAGUE'S WORK IN

ADVOCACY, CIVIC ENGAGEMENT AND WORKFORCE DEVELOPMENT.

**EXPENSES \$ 5,999.** INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 4:

EXPLANATION: THE URBAN LEAGUE OF PORTLAND'S BYLAWS WERE AMENDED AND RESTATED WITH A MAXIMUM NUMBER OF BOARD MEMBERS SET AT 25 ALONG WITH A PROVISION TO ALLOW CURRENT OFFICERS TO CONTINUE TO TO SERVE ONE ADDITIONAL YEAR IN ORDER TO ENSURE CONTINUITY OF BOARD LEADERSHIP THOUGH THE PERIOD OF TRANSITION OF THE EXECUTIVE DIRECTOR. THE AMENDED AND RESTATED BYLAWS WERE UNANIMOUSLY APPROVED BY THE BOARD ON JUNE 19, 2014.

FORM 990, PART VI, SECTION A, LINE 6:

EXPLANATION: ANY PERSON OR ORGANIZATION SUBSCRIBING TO THE GOALS OF THE URBAN LEAGUE OF PORTLAND AND MAKING AN ANNUAL MEMBERSHIP CONTRIBUTION (AS WILL BE ANNUALLY SPECIFIED BY THE BOARD OF DIRECTORS) IS A MEMBER OF THE LEAGUE FOR THE ONE-YEAR PERIOD FOLLOWING THE DATE ON WHICH THE CONTRIBUTION EACH MEMBER HAS ONE VOTE IN MEMBERSHIP MEETINGS, IRRESPECTIVE OF WAS MADE. THE AMOUNT OF THEIR CONTRIBUTION.

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

EXPLANATION: THE MEMBERSHIP SHALL VOTE ON PERSONS NOMINATED BY THE NOMINATING COMMITTEE TO SERVE 3-YEAR TERMS ON THE BOARD OF DIRECTORS.

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

EXPLANATION: THE EXECUTIVE COMMITTEE HAS AUTHORITY TO TAKE ACTION ON ALL

MATTERS ON WHICH IT DEEMS NECESSARY THAT ACTION BE TAKEN BEFORE THE NEXT

### Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

• If you a						
-	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			► X
<ul><li>If you a</li></ul>	re filing for an Additional (Not Automatic) 3-Month Ex	ctension, c	complete only Part II (on page 2 of	this form)		
Do not co	implete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sly filed Fo	orm 8868.	
Electroni	c filing (e-file). You can electronically file Form 8868 if t	you need a	a 3-month automatic extension of tir	ne to file (	6 months for a co	orporation
required to	arrho file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 8	868 to request a	n extension
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers	Associated With	Certain
Personal I	Benefit Contracts, which must be sent to the IRS in par	er format	(see instructions). For more details	on the ele	ctronic filing of th	ıs form,
visit www.	irs gov/efile and click on e-file for Charities & Nonprofits				<del></del>	
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).		
A corpora	tion required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete		
Part I only	·					
All other c	orporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to reques	st an exter	nsion of time	
to file inco	me tax returns.			Enter file	er's identifying r	umber
Type or	Name of exempt organization or other filer, see instru	ictions.		Employe	r identification nu	imber (EIN) or
print						
	URBAN LEAGUE OF PORTLAND,	INC.			93-0395	590
File by the due date for	Number, street, and room or suite no. If a P.O box, s	ee instruc	tions	Social se	curity number (S	SN)
filing your return See	10 NORTH RUSSELL STREET					
instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions	_	-	
	PORTLAND, OR 97227					
Enter the i	Return code for the return that this application is for (file	e a separa	te application for each return)	•		0 1
Application	on.	Return	Application			Return
ls For	•••	Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-		02	Form 1041-A			08
	) (individual)	03	Form 4720 (other than individual)			09
Form 990-		04	Form 5227			10
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	T (trust other than above)	06	Form 8870			12
OIII 550°	MR. MICHAEL ALI					1 12
	oks are in the care of <b>&gt;</b> <u>10 NORTH RUSSEI</u>		REET, PORTLAND, OR	9	7227	
•	one No. ► 503-280-2600		Fax No.			. $\square$
	rganization does not have an office or place of business					<b>▶</b> ∟
If this is	s for a Group Return, enter the organization's four digit (					
	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	all memb	ers the extension	is for
box ▶ [	<del>-</del> ···					
oox ▶ ☐ 1 Ireq	uest an automatic 3-month (6 months for a corporation			until		
oox ▶ ☐ 1 Ireq	<del>-</del> ···			until	The extension	
oox ▶ ☐ 1 Ireq	west an automatic 3-month (6 months for a corporation $FEBRUARY\ 17,\ 2015$ , to file the exemptor the organization's return for:			until	The extension	
1 I req	uest an automatic 3-month (6 months for a corporation FEBRUARY 17, 2015 , to file the exempter the organization's return for:  calendar year or	t organizat	tion return for the organization name	until	The extension	
1 I req	west an automatic 3-month (6 months for a corporation $FEBRUARY\ 17,\ 2015$ , to file the exemptor the organization's return for:	t organizat		until	The extension	
1 I req	rulest an automatic 3-month (6 months for a corporation FEBRUARY 17, 2015 , to file the exempter the organization's return for:    calendar year or	t organizat	d ending <u>JUN 30, 2014</u>	until ed above.		
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1 I req	ruest an automatic 3-month (6 months for a corporation FEBRUARY 17, 2015 , to file the exempter the organization's return for:    calendar year or	t organizat	tion return for the organization name  d endingJUN_30 , _2014  on: Initial return	until ed above.		
1 I require is for its	rulest an automatic 3-month (6 months for a corporation FEBRUARY 17, 2015, to file the exempter the organization's return for:  calendar year or x tax year beginning JUL 1, 2013  e tax year entered in line 1 is for less than 12 months, class of the control of t	t organizat	tion return for the organization name  d endingJUN_30 , _2014  on: Initial return	until ed above. Final retur	· n	
1 I require is for its	rulest an automatic 3-month (6 months for a corporation FEBRUARY 17, 2015, to file the exempter the organization's return for:    calendar year	, and heck reason or 6069, e	d ending JUN 30, 2014  Initial return lenter the tentative tax, less any	until ed above.		0.
1 I required is for its formula is for its for its formula is for its for its formula is for its formula is for its formula is for its formula is for its formula is for its formula is for its formula is for its formula is for its formula is for its formula is for its formula is for its formula is for its formula is for its foreither its formula is for its formula is for its formula is for i	puest an automatic 3-month (6 months for a corporation FEBRUARY 17, 2015, to file the exempter the organization's return for:    calendar year	, and heck reason or 6069, and	d ending JUN 30, 2014  on: Initial return enter the tentative tax, less any	until ed above.  Final retur	· n \$	
1 I required is for a second of the second o	refundable credits. See instructions.  see tax payments for Forms 990-PF, 990-T, 4720, or 6069 nated tax payments made. Include any prior year overpression.	, and heck reason or 6069, enter any ayment al	d endingJUN_30_,2014  on: Initial return !  enter the tentative tax, less any refundable credits and lowed as a credit.	until ed above. Final retur	· n	0.
1 I req is for is for 2 If the 3a If this nonr b If this estin c Bala	puest an automatic 3-month (6 months for a corporation FEBRUARY 17, 2015, to file the exempter the organization's return for:    calendar year	, and heck reason or 6069, enter any ayment all yment with	d endingJUN_30 ,2014  on: Initial return interest the tentative tax, less any refundable credits and lowed as a credit.  on this form, if required,	until ed above.  Final retur	· n \$	