

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Department of the Treasury

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

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

A For the 2014 calendar year, or tax year beginning JUL 1, 2014 and ending JUN 30, 2015 Open to Public

B	Check if	C Name of organization		D Employer identific	cation number		
_	Addres	.					
F	change	URBAN LEAGUE OF PORTLAND, INC.			205500		
닏	change			93-0395590			
느	return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite				
L	Final return/ termin-	10 NORTH RUSSELL STREET		503-	280-2600		
_	ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,891,376.		
느	Ameno	PORTLAND, OR 9/22/		H(a) Is this a group re			
L_	Application pendin	F Name and address of principal officer INCENGE TIARMON DOTTING	SON	for subordinates	? Yes X No		
	perion	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No		
		empt status X 501(c)(3) 501(c) () ((Insert no.) 4947(a)(1)	or 527	If "No," attach a	list (see instructions)		
		e:▶ WWW.ULPDX.ORG		H(c) Group exemption			
		organization: X Corporation Trust Association Other ▶	L Year	of formation: 1945 N	State of legal domicile: OR		
P	art I	Summary					
ø	1	Briefly describe the organization's mission or most significant activities: SEE	SCHEDU	JLE O			
Governance		,					
E.	2	Check this box 🕨 📖 if the organization discontinued its operations or dispo	sed of mor	e than 25% of its net as			
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	22		
	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	22		
es	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	40		
Ξ	6	Total number of volunteers (estimate if necessary)		6	125		
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.		
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.		
			Prior Year	Current Year			
ē	8	Contributions and grants (Part VIII, line 1h)	1,846,904.	1,837,239.			
en	9	Program service revenue (Part VIII, line 2g)	0.	0.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	413.	524.			
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		25,490.	-3,396.		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,872,807.	1,834,367.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	_	118,727.	198,270.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	_	990,579.	1,286,394.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		18,500.	18,000.		
ă	Ь	Total fundraising expenses (Part IX, column (D), line 25)	<u> 15. </u>		,		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	_	375,882.	483,956.		
	18	Total expenses Add lines 3-17 (must-equal Part IX, column (A), line 25)	<u>_</u>	1,503,688.	1,986,620.		
	19	Revenue less expenses Subtract line 18 from line 12		369,119.	-152,253.		
Ssets or	<u> </u>		В	eginning of Current Year	End of Year		
set	20	Total assets (Part X, line 16) DFC 0 7 2015	<u> </u>	638,539.	549,370.		
A S	2 21	Total liabilities (Part X, line 26)	<u> </u>	114,244.	173,937.		
		Net assets or fund balances. Subtract line-21-from-line-20_0.		524,295.	375,433.		
	art II	Signature Block UGDEN UT			<u> </u>		
		lities of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is		
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	hich prepare	er has any knowledge.	1117		
		Signature of other		Date Date	1//5		
Sig		, , , , , , , , , , , , , , , , , , ,			•		
He	re	NKENGE HARMON JOHNSON, CHIEF EXECUTIV Type or print name and title	E OFF	ICER			
_		Print/Type preparer's name Preparer's signature	^	Date / Check	PTIN		
Pai	id	YEE LEE MCGEE		11/23/1 self-employ	P01294356		
	parer	Firm's name GARY MCGEE & CO. LLP		Firm's EIN	<u></u>		
	e_Only	Firm's address 808 S.W. THIRD AVENUE, SUITE 70	0		·		
- '	-	PORTLAND, OR 97204		Phone no. (5	03) 222-2515		
Ma	v the l	RS discuss this return with the preparer shown above? (see instructions)		1:	Ves No		

432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

<u>Form</u>	990 (2014) URBAN LEAGUE OF PORTLAND, INC. 93-0395590 Page 2
Par	t III Statement of Program Service Accomplishments
_	Check if Schedule O contains a response or note to any line in this Part III
_	
1	Briefly describe the organization's mission.
	TO HELP EMPOWER AFRICAN AMERICANS AND OTHERS TO ACHIEVE EQUALITY IN
	EDUCATION, EMPLOYMENT, AND ECONOMIC SECURITY.
	Did the appropriate undertake any professor appropriate the user which was not leaded as
2	Did the organization undertake any significant program services during the year which were not listed on
	the pnor Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
	·
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code) (Expenses \$ 705,279 • including grants of \$ 172,288 •) (Revenue \$
	ADVOCACY AND CIVIC ENGAGEMENT - THE PROGRAM WORKS TO ACHIEVE POLICY AND
	COMMUNITY CHANGE THAT ADVANCES EQUALITY, SOCIAL AND ECONOMIC JUSTICE
	AND CIVIL RIGHTS FOR AFRICAN AMERICANS AND OTHERS IN OREGON. THE
	PROGRAM WORKS TO ADVANCE THE LEAGUE'S MISSION OF ECONOMIC EMPOWERMENT
	AND CIVIL RIGHTS THROUGH ADVOCACY, OUTREACH AND COMMUNITY ORGANIZING,
	RESEARCH, POLICY ANALYSIS, ISSUE CAMPAIGNS AND PUBLICATIONS THAT
	ELEVATE THE ISSUES OF ITS COMMUNITY AND PROPOSES SOLUTIONS FOR POLICY
	AND SOCIAL CHANGE.
	• • • • • • • • • • • • • • • • • • • •
	220 575
4b	(Code) (Expenses \$ 338,575. including grants of \$ 8,490.) (Revenue \$)
	SENIOR SERVICES - THE LEAGUE HAS SERVED SENIORS FOR MORE THAN A QUARTER
	OF A CENTURY PROVIDING ONE OF THE ONLY AFRICAN AMERICAN CULTURALLY
	SPECIFIC SENIOR SERVICE PROGRAMS IN THE STATE. IT PROVIDES OR CONNECTS
	SENIORS WITH SERVICES THAT ALLOW THEM TO REMAIN SAFELY IN THIER HOMES
	AND COMMUNITIES, INCLUDING SERVICES SUCH AS: PREVENTATIVE HEALTH
	SERVICES, CRISIS/EMERGENCY COUNSELING, TELEPHONE REASSURANCE TO
	HOME-BOUND ELDERLY, CASE MANAGEMENT SERVICES, TRANSPORTATION, ADVOCACY,
	AND OTHER PROGRAMS AND ACTIVITIES FOR HUNDREDS OF SENIORS LIVING ON
	FIXED INCOMES IN THE NORTH AND NORTHEAST SECTIONS OF PORTLAND.
4c	(Code) (Expenses \$ 299,348. including grants of \$ 17,492.) (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.
	THE LEAGUE ALSO HAS AN EXPANDING WORKFORCE DEPARTMENT THAT CONTINUES TO
	FIND EMPLOYMENT FOR PROFESSIONALS AND EXECUTIVES, THOSE IN THE TRADES
	AND SKILLED LABOR MARKETS, AND ENTRY-LEVEL INDIVIDUALS AND STUDENTS, AS
	IT HAS SUCCESSFULLY DONE FOR THE LAST SIX DECADES.
	THE LEAGUE'S SUMMER YOUTH EMPLOYMENT PROGRAM PROVIDES JOB READINESS
A -1	
40	Other program services (Describe in Schedule O)
<u>4e</u>	Total program service expenses ► 1,453,711.

•			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	_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		v	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u> X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			٠,
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
а	as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		m	1
a	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С				
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			7.5
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	-	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- ' ''		
	Schedule D, Parts XI and XII	12a	х	
ь	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the 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			- T
45	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		_X_
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
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	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
00	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	-20b-	000	(2014)

	rt IV Checklist of Required Schedules (continued)	3370	<u> </u>	age 4
•			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	<u> </u>	1	
	domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		ĺ	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a	ļ	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c	<u> </u>	<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ļ	Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		1	
	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	 	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	000		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26	-	
21	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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		\vdash	
	instructions for applicable filing thresholds, conditions, and exceptions).		*	١,
а		28a		x
	and the second s	28b		X
	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	1	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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	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			
	Schedule N, Part II	32	<u> </u>	Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	- [٠,
	Part V, line 1	34	<u> </u>	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	 	Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	1		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	├	X
٠,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	"	 	† <u></u>
-	5			

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

•	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	\dashv		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 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 40	*		l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	İ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	-		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	_		v
	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 contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	х	
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			_
Ŭ	to file Form 8282?	7c		х
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	<u>A</u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/A	`		
	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			ł
a	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
- b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9ь		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			1
11	Section 501(c)(12) organizations. Enter	Ī		
''a	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)	•		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	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.			
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	Ī		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			<u> </u>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	X
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b-	000	(2014)
		LOHII	ココリ	(2014)

Form 990 (2014) Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions X Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management							
						Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		22			ı	
	If there are material differences in voting rights among members of the governing body, or if the governing				- 1		ě	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				- 1			
b	Enter the number of voting members included in line 1a, above, who are independent	1b		22			4	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		'	\neg				
_	officer, director, trustee, or key employee?		,		2	j	X	
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	rt sunenvision		-	$\neg \neg$		
•	of officers, directors, or trustees, or key employees to a management company or other person?	J 4J	51 00po. 110.0.1	- 1	3		X	
4	Did the organization make any significant changes to its governing documents since the prior Form 9	390 w/:	as filad?	H	4		X	
5	Did the organization become aware during the year of a significant diversion of the organization's as:		25 111001	F	5		X	
6	Did the organization have members or stockholders?			_ t	6	\mathbf{x}		
	Did the organization have members, stockholders, or other persons who had the power to elect or a	anoint	one or	_	-			
, a	more members of the governing body?	JPOII II	One of		7a	x		
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockh	olders or	_ h	'a			
b								
	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year	e bu th	o following:	⊢	7b		<u>X</u>	
8		ıı uy u	e tollowing.		ا ۔	X	-	
	The governing body?				8a	^	X	
ь	Each committee with authority to act on behalf of the governing body?	_11		⊢	8b			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	cnea	at the		_ ا		x	
500	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		- Cada \		9			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code)			<u>,, </u>		
40-	Diddle a second a land about a boundary boundary as office to 0			Г	40	Yes	No X	
	Did the organization have local chapters, branches, or affiliates?		***	<u> </u>	10a			
D	If "Yes," did the organization have written policies and procedures governing the activities of such cl	napte	s, amiliates,					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			-	10b	х		
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y bero	ore tiling the form	'	11a	^		
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		8	—	12a	X		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			-	12b	<u> </u>		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es, " a	escribe			v.		
	in Schedule O how this was done			F	12c	X	-	
13	Did the organization have a written whistleblower policy?			-	13	Ţ	X	
14	Did the organization have a written document retention and destruction policy?			-	14	Х		
15	Did the process for determining compensation of the following persons include a review and approve	-	ndependent		-			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				- 1	η,		
a	The organization's CEO, Executive Director, or top management official				15a	Х	77	
b	Other officers or key employees of the organization			Ļ	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 arrange	ment v	vith a		-			
	taxable entity during the year?		_	-	16a		X	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation			ł				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nızatıc	n's	-				
	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-	(Sec	tion 501(c)(3)s or	ıly) av	allab	le		
	for public inspection. Indicate how you made these available. Check all that apply							
	Own website Another's website X Upon request Other (explain		•					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict	of interest policy,	and	fınan	cial		
	statements available to the public during the tax year							
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks a	nd-records:					
	MYLEN SHENKER - 503-280-2600							
	10 NORTH RUSSELL STREET, PORTLAND, OR 97227							

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

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

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

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

(A) Name and Title	(B) Average hours per week	box,	not c	ss pe	ition more rson	than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	insututional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) LISA BURDETTE	1.00	,,						0	•	•
DIRECTOR	1.00	Х						0.	0.	0
(2) KIMBERLIN BUTLER DIRECTOR	1.00	х						0.	0.	0
(3) ANGELA DOWLING	1.00	Ĥ					_	0.	· ·	U
DIRECTOR	1.00	x						0.	0.	0
(4) THERESSA DULANEY	1.00							•	•	
DIRECTOR	1	\mathbf{x}				ļ		0.	0.	0
(5) MARCUS EASTLAND	1.00	-				H		•		
DIRECTOR		x				ļ		0.	0.	0
(6) LAKECIA GUNTER	1.00				T					
DIRECTOR		X		ł				0.	0.	0
(7) CARLA KELLEY	1.00									
DIRECTOR		X						0.	0.	0
(8) MICHAEL LEWELLEN	1.00									
DIRECTOR		X				$oxed{oxed}$		0.	0.	0
(9) MICHAEL MONTGOMERY	1.00			İ						
DIRECTOR		Х			L		<u> </u>	0.	0.	0
(10) LORI MORGAN, M.D.	1.00									
DIRECTOR		Х						0.	0.	0
(11) HIROMI PIPER OGAWA	1.00	, ,								_
DIRECTOR	1.00	X	_	-	_	_	_	0.	0.	0
(12) TRACI ROSE DIRECTOR	1.00	x						0.	0.	0
(13) LISA SMALLEY	1.00	₽				┝		0.	<u> </u>	<u> </u>
DIRECTOR	1.00	x					Ì	0.	0.	0
(14) KARIS STOUDAMIRE-PHILLIPS	1.00	 		-		-	-	· · · · · · · · · · · · · · · · · · ·	0.	
DIRECTOR	1.50	x						0.	0.	0
(15) BILL TOLBERT	1.00	۳	H	T		t	\vdash	 		
DIRECTOR	<u> </u>	X						0.	0.	0
(16) BRUCE WATTS	1.00	Ī		T	T	T	T			
DIRECTOR		X			l _	<u> </u>		0.	0.	0
(17) BILL J. WILLIAMS	1.00			T	T -	Π	<u> </u>			
DIRECTOR		x						l 0.	0.	0

Form 990 (2014) URBAN LEX									93-03	3 9 5	590	Pa	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees/	, an	d Hi	ghe	st C	Compensated Employe	es (continued)				
· (A)	(B)		(C)					(D)	(E)		(F)		
Name and title	Average	(do	not c	Pos			one	Reportable	Reportable		Es	tımate	d
	hours per	box	, unle cer ar	ss pe	rson	ıs bot	h an	compensation	compensatio			ount o	of
	week	\vdash	Cerai	u a u	Tecto	y/uus	1	from	from related			other	
	(list any hours for	director		l	i			the	organizations			oensa	
	related	5	<u>8</u>		İ	sated		organization (W-2/1099-MISC)	(W-2/1099-MIS) (O	i	om the	
	organizations	ruste	Tas		 8	üədu		(44-2/1099-14113C)				anızatı İ relate	
	below	퍨	를 일		흫	st cor	<u></u>				ľ	nızatı	
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former						
(18) KAREN WILLIAMS	1.00				_								
DIRECTOR		Х						0.		0.			0.
(19) LOLENZO POE	1.00												
CHAIR		X		X				0.		0.			0.
(20) GEORGE JONES	1.00		Г	Г			П						
VICE CHAIR		Х		Х				0.		0.			0.
(21) AMY WAYSON	1.00	Π											
SECRETARY		X]	X				0.		0.			0.
(22) DAVID BARTZ, JR.	1.00												
ASSISTANT SECRETARY		X		Х		1		0.		0.			0.
(23) ROBERT COOK	1.00												
TREASURER		X	l	Х				0.		0.			0.
(24) NKENGE HARMON JOHNSON	40.00												
PRESIDENT & CEO (EFF. MAY 9, 2015)				X			ļ	0.	i	0.			0.
(25) MICHAEL ALEXANDER	40.00												
PRESIDENT & CEO (THRU MAY 10, 2015)				X	_	_		98,617.		0.		7,5	<u>54.</u>
(26) MYLEN SHENKER	40.00	1								_		_	
CFO	<u> </u>	<u>L</u>	<u>L</u>	X	L	<u> </u>	L	57,077.		0.			64.
1b Sub-total							ightharpoons	155,694.		0.		8,5	
c Total from continuation sheets to Part V	II, Section A							0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	155,694.		0.		3,5	18.
2 Total number of individuals (including but r	ot limited to th	nose	liste	ed al	bov	e) wi	ho r	eceived more than \$100	0,000 of reportable	le			_
compensation from the organization												1	0
												Yes	No
3 Did the organization list any former officer,	•		e, ke	ey er	nplo	yee	, or	highest compensated e	mployee on	İ			7.
line 1a? If "Yes," complete Schedule J for s										İ	3		X
4 For any individual listed on line 1a, is the si	•		•					•	the organization				37
and related organizations greater than \$15											4		X
5 Did any person listed on line 1a receive or	•				•		relat	ted organization or indiv	idual for services		١٠_	.	· x
rendered to the organization? If "Yes," com Section B. Independent Contractors	ipiete Scriedui	e J	or s	ucn	pers	son					5		
Complete this table for your five highest co	mpopeated in	don	onde	nt c	ont	ract	ore 1	that recoved more than	\$100,000 of com			rom	
the organization Report compensation for	-	•							•	iperis	ation	10111	
(A)	the calchear y	Cui	Cila	iiig t	*1611	<u> </u>	1	(B)	year T		(C		
Name and business	address	N	ON	E				Description of s	services	C	Comper		n
			•				T		-				
							\dashv						
							\dashv						

\$100,000 of compensation from the organization

0

Total number of independent contractors (including but not limited to those listed above) who received more than-

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (B) (C) Total revenue Related or Unrelated exempt function business revenue revenue 30,065 1 a Federated campaigns 10,325. 1b b Membership dues 240,374 c Fundraising events 1c d Related organizations 1e 1,074,059. e Government grants (contributions) f All other contributions, gifts, grants, and 482,416 similar amounts not included above 38,129 g Noncash contributions included in lines 1a-1f \$ 1,837,239 h Total. Add lines 1a-1f **Business Code** Program Service All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 524. 524. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ii) Personal (ı) Real 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$240,374.ofcontributions reported on line 1c). See 50,625. Part IV, line 18 57,009. b Less direct expenses -6,384 -6,384. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 900099 2,988. 2,988. 11 a MISCELLANEOUS INCOME d All other revenue 2,988. e Total. Add lines 11a-11d 1,834,367. 0. Total revenue. See instructions. -2,872.

Form 990 (2014) URBAN LEAGUE (Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must co	mplete column (A)	
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	100 070	100 070		
	and domestic governments. See Part IV, line 21	198,270.	198,270.		
2	Grants and other assistance to domestic				
_	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	Individuals See Part IV, lines 15 and 16 Benefits paid to or for members				
5	Compensation of current officers, directors,				
3	trustees, and key employees	183,140.	977.	173,914.	8,249.
6	Compensation not included above, to disqualified		· · · · · ·	,,,,,,	
	persons (as defined under section 4958(f)(1)) and			1	
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	887,767.	768,132.	101,384.	18,251.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	18,006.	15,142. 64,996.	2,746. 20,165.	118.
9	Other employee benefits	85,161.	64,996.	20,165.	
10	Payroli taxes	112,320.	80,721.	28,898.	2,701.
11	Fees for services (non-employees)				
а	Management				
b	Legal	FC 201		F.C. 201	
С	Accounting	56,301.		56,301.	
d	, ,	18,000.			18,000.
	Professional fundraising services. See Part IV, line 17	10,000			10,000.
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)	101,901.	76,235.	22 096	3,570.
12	Advertising and promotion	11,571.	7,464.	22,096. 4,107.	3,370.
13	Office expenses	103,672.	49,206.	52,284.	2,182.
14	Information technology	200,0121		,	
15	Royalties				
16	Occupancy	61,737.	9,685.	52,052.	
17	Travel	63,279.	53,346.	9,623.	310.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	19,448.	15,547.	3,901.	
20	Interest	40 886		10 550	·
21	Payments to affiliates	10,750.		10,750.	
22	Depreciation, depletion, and amortization	1,720. 11,296.		1,720.	
23	Insurance	11,490.		11,270.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				· ,
а	MISCELLANEOUS	38,582.	26,301.	6,678.	5,603.
b	MEMBERSHIP DUES	3,699.	1,735.	1,110.	854.
c	ALLOCATION OF INDIRECT	0.	85,954.	-93,931.	7,977.
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,986,620.	1,453,711.	465,094.	67,815.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2014)
	0 11-07-14				

Form 990 (2014)
Part X Balance Sheet URBAN LEAGUE OF PORTLAND, INC. 93-0395590 Page 11 Check if Schedule O contains a response or note to any line in this Part X

<u> </u>		Check if Schedule O contains a response or not	e to any line in	this Part X			ı .	
					(A) Beginning d	of year		(B) End of year
	1	Cash - non-interest-bearing			125	,519.	1	99,611.
	2	Savings and temporary cash investments			255	,876.	2	276,634.
	3	Pledges and grants receivable, net		213	,218.	3	129,730.	
	4	Accounts receivable, net			-	4	-	
	5	Loans and other receivables from current and fo	ormer officers, o	directors.			,	,
		trustees, key employees, and highest compensations	ated employees	s. Complete				ı
		Part II of Schedule L		,	-		5	
	6	Loans and other receivables from other disquali	ified persons (a	s defined under				
		section 4958(f)(1)), persons described in section		i i				·
		employers and sponsoring organizations of sect		- 1				
S		employees' beneficiary organizations (see instr).		· [-			6	Property of the control of the contr
Assets	7	Notes and loans receivable, net					7	
Ą	8	Inventories for sale or use		ľ			8	
	9	Prepaid expenses and deferred charges	F	19	,384.	9	17,182.	
	10a	Land, buildings, and equipment: cost or other	1 1	ŗ		-		
		basis Complete Part VI of Schedule D	10a	188,295.				*
	Ь	Less: accumulated depreciation	10b	183,308.	⁻ 6	,707.	10c	4,987.
	11	Investments - publicly traded securities	· · · · · · · · · · · · · · · · · · ·		,835.	11	21,226.	
	12	Investments - other securities See Part IV, line 1	ľ			12		
	13	Investments - program-related See Part IV, line	ľ			13		
	14	Intangible assets			14			
	15	Other assets. See Part IV, line 11			15			
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	F	638	,539.	16	549,370.
	17	Accounts payable and accrued expenses		· 1		,744.	17	124,358.
	18	Grants payable	<u> </u>		0.	18	23,750.	
	19	Deferred revenue		17	,500.	19	25,829.	
	20	Tax-exempt bond liabilities		Ī		·	20	
	21	Escrow or custodial account liability. Complete	Part IV of Sche	dule D			21	
s,	22	Loans and other payables to current and former		F				
Liabilities		key employees, highest compensated employee	es, and disqual	ified persons	*		,	* - :
ар		Complete Part II of Schedule L	•		~ ~ ~ * *		22	
=	23	Secured mortgages and notes payable to unrela	ated third partir	es			23	
	24	Unsecured notes and loans payable to unrelate	•	ſ			24	
	25	Other liabilities (including federal income tax, pa	yables to relate	ed third				
		parties, and other liabilities not included on lines	s 17-24) Comp	lete Part X of				
		Schedule D					25	
	26	Total liabilities. Add lines 17 through 25			114	,244.	26	173,937.
		Organizations that follow SFAS 117 (ASC 958	3), check here	X and	-			
S		complete lines 27 through 29, and lines 33 ar	nd 34.					
ĕ	27	Unrestricted net assets			288	787.	27	322,639.
<u>ala</u>	28	Temporarily restricted net assets			235	,508.	28	52,794.
Ā	29	Permanently restricted net assets					29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (A	SC 958), chec	k here 🕨 🔲				
ō		and complete lines 30 through 34.						
ets	30	Capital stock or trust principal, or current funds	i	ĺ			30	
\ss	31	Paid-in or capital surplus, or land, building, or ed	quipment fund	Ī			31	
•	32	Retained earnings, endowment, accumulated in	ncome, or other	r funds			32	
e								255 722
Ret	33	Total net assets or fund balances		1	524	,295.	33	375,433.

Form 990 (2014)

	990 (2014) URBAN LEAGUE OF PORTLAND, INC.	93-	<u>-0395590</u>	Pag	_{je} 12
Pa	t XI Reconciliation of Net Assets				
•	Check if Schedule O contains a response or note to any line in this Part XI				<u>Ш</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,834	1,3	<u>67.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,986	5,6	<u> 20.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	-152		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			95.
5	Net unrealized gains (losses) on investments	5		3,3	<u>91.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
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))	10	375	5,4	<u>33.</u>
Pa	rt 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				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	١. ا		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a		1	
	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	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis	i,	- 1	
	consolidated basis, or both:			- 1	
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,	_	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule () <u> </u>		
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	ıdıt		
	Act and OMB Circular A-133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ııred au	dit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 (2014)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number URBAN LEAGUE OF PORTLAND, INC. 93-0395590 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 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 section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations g Provide the following information about the supported organization(s) (iv) is the organization (III) Type of organization (v) Amount of monetary (vi) Amount of (i) Name of supported (in FIN listed in your organization (described on lines 1.9) support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes No (see instructions))

Total

Schedule A (Form 990 or 990-EZ) 2014 URBAN LEAGUE OF PORTLAND, INC. Part II | Support Schedule for Organizations Described in Sections 170/b/ 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						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and					, ,	
	membership fees received (Do not						
	ınclude any "unusual grants ")	1,084,394.	1,177,630.	1,167,107.	1,846,904.	1,837,239.	7,113,274.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1,084,394.	1,177,630.	1,167,107.	1,846,904.	1,837,239.	7,113,274.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly			i			
	supported organization) included			·			
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)				¥		343,910.
6	Public support. Subtract line 5 from line 4						6,769,364.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	1,084,394.	1,177,630.	1,167,107.	1,846,904.	1,837,239.	7,113,274.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	305.	75.	34.	413.	524.	1,351.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)	15,645.	15,348.	14,953.	28,633.	2,988.	77,567.
11	Total support. Add lines 7 through 10						7,192,192.
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12	258,510.
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	_
Sec	organization, check this box and stor ction C. Computation of Publ	here ic Support Per	rcentage	-			>
14	Public support percentage for 2014 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	94.12 %
15	Public support percentage from 2013	Schedule A, Part	II, line 14	-,,		15	91.95 %
	33 1/3% support test - 2014. If the			line 13, and line 1	14 is 33 1/3% or n		
	stop here. The organization qualifies					•	$\triangleright X$
b	33 1/3% support test - 2013. If the	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ition			ightharpoons
17a	10% -facts-and-circumstances tes	t - 2014. If the org	anızatıon dıd not c	heck a box on line	13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					•	▶□
t	10% -facts-and-circumstances tes					17a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the "facts-and-cire	cumstances" test	The organization of	ualifies as a public	ly supported orga	anization	ightharpoons
18	Private foundation. If the organization						s
_						dule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2014 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete	e on	ly ıf	you	che	ckec	i the	box c	n line 9	of	Part	l or ı	f the	orga	ınızatıc	on fa	ailed to	qualif	y und	er Pa	art II.	If the	orga	nızatı	on fai	ls to
							_		-																

Total
_

Total
,,, , , , , , , , , , , , , , , , , ,
▶ □
▶ □
▶ □
▶ □ % %
%
% %
% % %
% %
% % %
% % %

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section	A. All	Supporting	Organizations
		p	

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in part vi what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in part VI.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **part VI**.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
1	•	,
2		-
3a	-	
		3 .
3b		
3c	-	_
4a		
4b		
4c		,
5a		<u> </u>
5b 5c		
		,
6		
7		<u> </u>
8		
9a		
9b		<u> </u>
9c		
10a		-
10b 990 or 99	30-FZ	2014

	dule A (Form 990 or 990-EZ) 2014 URBAN LEAGUE OF PORTLAN			93-0395590 Page 6
Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov 20, 1970. See ins	tructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of pnor-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	ŀ		
	instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2_		
_3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C - Distributable Amount	—		Current Year
1_	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
_2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4	,	
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lvantear	ated Type III supporting	proprietion (coo

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Schedule A (Form 990 or 990-EZ) 2014 URBAN LEAGUE OF PORTLAND, INC. 93-0395590 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2014 from Section C, line 6 Line 8 amount divided by Line 9 amount (i) (11) (iii) **Excess Distributions** Underdistributions Distributable Section E - Distribution Allocations (see instructions) Pre-2014 Amount for 2014 Distributable amount for 2014 from Section C, line 6 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2014: а b С ď e From 2013 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2014 from Section D, a Applied to underdistributions of prior years b Applied to 2014 distributable amount c Remainder Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) Excess distributions carryover to 2015. Add lines 3₁ and 4c 8 Breakdown of line 7: а

Schedule A (Form 990 or 990-EZ) 2014

b

d Excess from 2013 e Excess from 2014

Schedule A (For	m 990 o	r 990-EZ	2014	JKRAN	LEA	GOE OF	PORTL	AND,	INC.		93-0395590 Page
Part VI Su	pplen	nental l	nform	ation. Pr	ovide th	ne explanat	ions required	by Part	II, line 10, Pa	art II, line 17a o	r 17b; and Part III, line 12
` Als	o comp	lete this p	part for a	iny additio	nal info	mation (S	ee instruction	ıs)			
SCHEDULE	Δ	рарт	тт	LINE	10	EXPLA	МАТТОМ	FOR	ОТНЕВ	TNCOME.	
<u>эспиронн</u>	Α,	IMIL	±±,	DINE	10,	DAL DI	MATTON	TOR	OTHER	INCOME.	
MISCELLA	NEOU	SIN	COME	(\$77,	,567)					
						•					
	_			_							
							,				
			-				_				
									-		
							· · · · · · · · · · · · · · · · · · ·				
											· · - · - · · - · · · · · · · · ·
 										-	
											
											
											,
											· · · · · · · · · · · · · · · · · · ·
							<u>-</u>			•	·
										-	
					_				_		
											· · · · · · · · · · · · · · · · · · ·

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Name of orga	01(c)(4), (5), or (6) organizat nization	tions: Complete Part III		Empl	oyer identification number
	URBAN L	EAGUE OF PORTLAN	D, INC		93-0395590
Part I-A	Complete if the org	janization is exempt und	ler section 501(c)	or is a section 527 o	rganization.
	expenditures	ation's direct and indirect politic	cal campaign activities	ın Part IV. ►\$	
Part I-B	Complete if the ord	anization is exempt und	ler section 501(c)	(3).	
		incurred by the organization und		▶ \$	
2 Enter th	e amount of any excise tax	incurred by organization manag	ers under section 4955	5 ▶\$	
3 If the or	ganization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a c	orrection made?				L Yes L No
	describe in Part IV.	janization is exempt und	lor postion E01/o	overnt poetion 501/	01/01
		<u> </u>			
		d by the filing organization for se			
	e amount of the filing organ function activities	ization's funds contributed to of	iner organizations for s	► ¢	
•			and on Form 1120-POL	- U	
line 17b		, ridd iiriod i dire z dirior rioro		-, ▶\$	
	filing organization file Form	1120-POL for this year?			Yes No
5 Enter th	e names, addresses and er	nployer identification number (E	IN) of all section 527 p	olitical organizations to whic	h the filing organization
•		ition listed, enter the amount pa			•
	•	omptly and directly delivered to additional space is needed, pro		·	te segregated fund or a
Political					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization
					If none, enter -0
				<u> </u>	

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

Schedule C (Form 990 or 990-EZ) 2014 UPart II-A Complete if the org				93- ed Form 5768(0395590 Page 2 election under
expenses, and share	e of excess lobbying		n Part IV each affiliated	group member's na	me, address, EIN,
Limit	s on Lobbying Expe	•		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion (grass roots lobbying)		 	
b Total lobbying expenditures to influ			T T		· · · · · · · · · · · · · · · · · · ·
c Total lobbying expenditures (add lii	•	, , , , ,	Ī		
d Other exempt purpose expenditure	•		Ī		***************************************
e Total exempt purpose expenditures		(Ł	Ī		
f Lobbying nontaxable amount Ente	r the amount from the	e following table in bot	th columns		
If the amount on line 1e, column (a) o		bying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000	,000 \$100,00	00 plus 15% of the exc	cess over \$500,000		
Over \$1,000,000 but not over \$1,50	00,000 \$175,00	00 plus 10% of the exc	cess over \$1,000,000		
Over \$1,500,000 but not over \$17,0	000,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000	\$1,000,	000			
g Grassroots nontaxable amount (en	ter 25% of line 1f)				
h Subtract line 1g from line 1a. If zero	•		Ī		
i Subtract line 1f from line 1c. If zero	or less, enter -0-			•	
j If there is an amount other than zer reporting section 4911 tax for this v		line 1i, did the organiz	ation file Form 4720		Yes No
(Some organizations th	at made a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all c	of the five columns	below.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(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 (150% of line 2d, column (e))	< /				
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2014 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	Amo	ount	
1 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)?	Х	37			
c Media advertisements?		X			
d Mailings to members, legislators, or the public?		X	·		
e Publications, or published or broadcast statements?	-	Х			
f Grants to other organizations for lobbying purposes?		Х			
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			0.00	
i Other activities?	Х			063.	
j Total Add lines 1c through 1i	1		Т.	3,063.	
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		/ <u>F</u> \ ====	-4!		
	tion 50 H(c)	(5), or se	ction		
501(c)(6).	· - ·	ľ	V	NI.	
			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? Part III-B Complete if the organization is exempt under section 501(c)(4), sec	tion 501/a	(5) 27 22	otion.		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere				. 2 io	
answered "Yes."	su 140, Oi	n (b) Part	. III-A, III	ie 3, 15	
Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of po	litical	- '-			
expenses for which the section 527(f) tax was paid).	iiticai				
a Current year		2a			
b Carryover from last year					
c Total		2b			
		2c			
33 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		3			
The second secon					
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an	a political	.			
expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)		4			
Part IV Supplemental Information		5		-	
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	no local Docal II	A 1 1 -			
-	oup list), Part II	-A, lines 1 a	na 2 (see		
instructions), and Part II-B, line 1. Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES:					
TIME II DI DIND I, BODDING MCIIVIIID.			·		
THE ORGANIZATION WORKS WITH VOLUNTEERS TO DEVELOP AN	ז בוואואב נ	. LEGI	מד. אחדז	7F	
THE CROSMITERITION WORKE WITH VORDRITHERD TO DEVELOP A	MINUAL	i DEGI,	SUATIV	<u> </u>	
AGENDA AND COORDINATES A LEGISLATIVE DAY EACH SESSION	N WHERE	PEOP	ਹਵਾੜ ਤਹ	M	
	VIII WIII KI	I FEOF	JE PRO	/M	
AROUND THE STATE COME TOGETHER ONE DAY IN SALEM AND	наук ти	म			
The same state of the same sta		<u> </u>			
OPPORTUNITY TO MEET WITH THEIR STATE REPRESENTATIVES	त्रमण ह	ORGAN	T 7. A TT C	NI.	
The state of the s	. 1111	OIGMI.	- 427 1 (/AT	
ALSO ENGAGED IN EFFORTS TO PROVIDE COMMUNITY EDUCAT	ON ON T	HE PU	BLIC		

Schedule C (Form 990 or 990	D-EZ) 2	1014 URBAN	DEAGUE OI	r P(ואכ	L'L'AND,	INC.	93-0395590	Page 4
raitiv	Supplement	aı in	iormation (co	ontinuea)						
HEALTH	IMPACTS	OF	MATTERS	RELATING	то	Α	LOCAL	REFERENDUM.		
										
									-	
				<u></u>						
		•								
										
									-	
										_
							•			
			•							
										
 .										
										
		-								
									 .	
										
										 .
							-			
									·	
									·	
	_									
				- · · · · · · · · · · · · · · · · · · ·						
										-

SCHEDULE D

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.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990)

Inspection

Mam	e of the organization URBAN LEAGUE OF PO	RTLAND, INC.	93-0395590
Par			
	organization answered "Yes" to Form 990, Part IV, lin		= =··· p··•·• ·· ···•
	Cigalization alternated 100 to	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	d funds
•	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor	_	sed only
_	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?	, , ,	Yes No
Pai		ganization answered "Yes" to Form 990, Par	t IV, line 7
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or		ically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form of	a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Yea
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re-	eleased, extinguished, or terminated by the c	organization during the tax
	year >		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements		Yes L N
6	Staff and volunteer hours devoted to monitoring, inspecting	-	
7	Amount of expenses incurred in monitoring, inspecting, and		· · · · · · · · · · · · · · · · · · ·
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170(h	
	and section 170(h)(4)(B)(ı)?		☐ Yes ☐ N
9	In Part XIII, describe how the organization reports conserva		
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes th	e organization's accounting for
D ₂	rt III Organizations Maintaining Collections	of Art Historical Treasures or Oth	ner Similar Assets
Га	Complete if the organization answered "Yes" to Forn		iei Siiiliai Assets.
та	If the organization elected, as permitted under SFAS 116 (A	· · · · · · · · · · · · · · · · · · ·	
	historical treasures, or other similar assets held for public ex		se of public service, provide, in Part XIII
.	the text of the footnote to its financial statements that desc		and halange sheet works of art, historia
Ь	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, or	education, or research in turtilerance of publi	ic service, provide the following amoun
	relating to these items: (i) Povenue included in Form 990, Part VIII, line 1		L ¢
	(i) Revenue included in Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X	onguros, or other similar sesses for financial	
2	If the organization received or held works of art, historical tr		jani, provide
_	the following amounts required to be reported under SFAS Revenue included in Form 990, Part VIII, line 1	TTO (AGO 950) relating to these items:	L \$
a	Revenue included in Form 990, Part VIII, line 1		\$

Sche	dule D (Form 990) 2014 URBAN L	EAGUE OF P	ORTL	AND,	INC.	_	93-	<u>-0395590</u>	Page 2
Par	t III Organizations Maintaining C	Collections of A	rt, His	torical T	reasures, o	or Other	Similar A	ssets(continu	ied)
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	e following tha	ıt are a sıgı	nificant use	of its collection	items
	(check all that apply):								
а	Public exhibition	C	, <u> </u>	Loan or ex	change progra	ams			
b	Scholarly research	•	• 📖	Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and expla	ın how th	ney further	the organizati	on's exem _l	pt purpose II	n Part XIII	
5	During the year, did the organization solicit of	or receive donations	of art, h	storical tre	asures, or oth	er sımılar a	ssets		
	to be sold to raise funds rather than to be m			_				Yes	No_
Par	t IV Escrow and Custodial Arran		ete if the	organizati	on answered	"Yes" to Fo	orm 990, Pai	t IV, line 9, or	
	reported an amount on Form 990, Pa								
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contributio	ons or other as	sets not in	cluded		
	on Form 990, Part X?							└── Yes	└─ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table					
								Amount	
С	Beginning balance						1c		
d	Additions during the year						1d		
е	Distributions during the year						1e		
f	Ending balance						1f	T-1,4	Т Т.
	Did the organization include an amount on F					-	<i>(</i> ''	└── Yes	⊢ No
	If "Yes," explain the arrangement in Part XIII. T V Endowment Funds. Complete		_						
Га	T V Endowment Funds. Complete	T-:	1) Three years	hook (-) Four	roore book
	December of the balance	(a) Current year	(6) F	nor year	(c) Two yea	IS DACK (C) Tillee years	Dack (e) Four y	ears back
1a	Beginning of year balance		 		+				
b	Contributions		 		+				
C	Net investment earnings, gains, and losses		 						
d	Grants or scholarships		 						
е	Other expenditures for facilities		1						
	and programs Administrative expenses				 			 	
1	End of year balance		<u> </u>						
g 2	Provide the estimated percentage of the cur	t rent vear end halan	ce (line 1	a column	(a)) held as				
a	Board designated or quasi-endowment	Terri year eria balari	%	g, column	(4), 11010 43				
	Permanent endowment	%	— ′°						
	Temporarily restricted endowment	 ,~							
Ŭ	The percentages in lines 2a, 2b, and 2c short								
За	Are there endowment funds not in the posse		zation th	at are held	and administe	ered for the	organizatio	n	
	by	-					J		Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	s listed as required	on Sche	dule R?				3b	
4	Describe in Part XIII the intended uses of the	e organization's end	owment	funds.					
Pa	rt VI Land, Buildings, and Equipn	nent.							
	Complete if the organization answere	ed "Yes" to Form 99	0, Part I\	/, line 11a	See Form 990), Part X, Iır	ne 10		
	Description of property	(a) Cost or	other	(b) Co:	st or other	(c) Acc	umulated	(d) Book	value
		basis (invest	ment)	bası	s (other)	depr	eciation		
1a	Land				1,000.] 1	,000.
b	Buildings								
С	Leasehold improvements .								
d	Equipment			1	87,295.	18	83,308	. 3	,987.
e	Other								
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Par	t X, colui	mn (B), lıne	10c)		>	4	.,987.

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

► 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 Inspection

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Name of the organization

URBAN L	EAGUE OF PORTLAND,	IN	c.		93-0395	590
Part I Fundraising Activities required to complete this pai	Complete if the organization answit	ered "Y	'es" to	Form 990, Part IV, I	ine 17 Form 990-EZ	filers are not
 1 Indicate whether the organization rais a X Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, F b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e X Solicita f X Solicita g X Special or oral agreement with any individua Part VII) or entity in connection with p ividuals or entities (fundraisers) pure	tion of tion of fundra (inclui	non-g gover alsing ding o ional f	overnment grants nment grants events fficers, directors, trus fundraising services?	stees or X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contrib	ustody	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
SAMANTHA SWAIM FUNDRAISING,		Yes	No X			
LLC - P.O. BOX 17191,	FUNDRAISING			290,999.	18,000.	272,999.
		<u> </u>				
Total 3 List all states in which the organization or licensing	on is registered or licensed to solicit	contrib	butions	290,999. s or has been notified	18,000.	272,999. egistration
OR						
						,
			.			
	 					·- <u></u>
						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2014

Schedule G (Form 990 or 990-EZ) 2014

432082 08-28-14

Schedule G (Form 990 or 990-EZ) 2014 URBAN LEAGUE OF PORTLAND, INC. 93	-0395590	Page 3
11 Does the organization conduct 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 chantable gaming?	Yes	☐ No
13 Indicate the percentage of gaming activity conducted in		
a The organization's facility	13a	%
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		
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 ▶ \$		
Garning manager compensation > 5		
Description of services provided		
		
Director/officer Employee Independent contractor		
17 Mandatory distributions		
a is the organization required under state law to make charitable distributions from the gaming proceeds to	 1	 1
retain the state gaming license?	└── Yes	U No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	ie	
organization's own exempt activities during the tax year ▶ \$		01 451
Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions)	III, lines 9, 9b, 10	Ub, 15b,
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAIS	ERS:	
(I) NAME OF FUNDRAISER: SAMANTHA SWAIM FUNDRAISING, LLC		
(I) ADDRESS OF FUNDRAISER: P.O. BOX 17191, PORTLAND, OR 97217		

Schedule G	(Form 990 or 990-EZ)	URBAN LEAGUE	OF	PORTLAND,	INC.	93-0395590 Page 4
Part IV	Supplemental Info	URBAN LEAGUE rmation (continued)			_	
•		(00				
•						
					· · · · · · · · · · · · · · · · · · ·	
		 				
		· · · · · · · · · · · · · · · · · · ·				
						
	 					
						· · · · · · · · · · · · · · · · · · ·
						
	 					
						
					<u></u>	

SCHEDULE

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

▶ Attach to Form 990.

Open to Public OMB No 1545-0047 Inspection **Employer identification number**

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

2 | 93-0395590 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection INC. URBAN LEAGUE OF PORTLAND, General Information on Grants and Assistance Part

X Yes criteria used to award the grants or assistance?

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. of that received more than \$5 000. Part II can be duplicated if additional space is needed. Part II

recipient that received more than \$5,000. Part II can be duplicated it additional space is needed	55,000. Part II can	n be duplicated if addit	ional space is need	led.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASIAN PACIFIC AMERICAN NETWORK OF OREGON - 240 NORTH BROADWAY, SUITE 215 - PORTLAND OR 97227	80-0252850	501(C)3	82,000.	0.			PARTNERSHIP FORMED TO AID RESEARCH IN THE FIELD OF HEALTHCARE
CENTER FOR INTERCULTURAL ORGANIZING - 700 NORTH KILLINGSWORTH STREET - PORTLAND, OR 97217	74-3098100	501(C)3	17,100.	0			PARTNERSHIP FORMED TO AID RESEARCH IN THE FIELD OF HEALTHCARE
UPSTREAM PUBLIC HEALTH 240 NORTH BROADWAY, SUITE 215 PORTLAND, OR 97227	42-1579435	501(0)3	17,100.	0.	;		PARTNERSHIP FORMED TO AID RESEARCH IN THE FIELD OF HEALTHCARE
OREGON LATINO HEALTH COALITION 240 NORTH BROADWAY, SUITE 215 PORTLAND, OR 97227	26-1530127	501(C)3	14,800.	0.			PARTWERSHIP FORMED TO AID RESEARCH IN THE FIELD OF HEALTHCARE
CAUSA OREGON 700 MARION STREE N.E. SALEM, OR 97301	61-1590160	501(C)3	5,250.	0.			PARTNERSHIP FORMED TO AID RESEARCH IN THE FIELD OF HEALTHCARE
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	nd government or s listed in the line	ganizations listed in the table	le line 1 table				2.
4	, see the Instruct	ions for Form 990.	:				Schedule I (Form 990) (2014)

432101 10-15-14

Page 2 Schedule I (Form 990) (2014) (f) Description of non-cash assistance 93-0395590 (e) Method of valuation (book, FMV, appraisal, other) THE LEAGUE SCHEDULES REGULAR MEETINGS WITH PARTNER AGENCIES RECEIVING GRANT Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed FUNDS TO CHECK IN ON PROGRESS ACHIEVING SHARED GOALS AND WORK PLAN (d) Amount of non-cash assistance (c) Amount of cash grant URBAN LEAGUE OF PORTLAND, (b) Number of recipients (a) Type of grant or assistance 2 Schedule I (Form 990) (2014) PART I, LINE ACTIVITIES. 432102 10-15-14 Part IV Part III

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

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

Open To Public

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Schedule M (Form 990) (2014)

	I Revenue Service Attach to Form 990 Information about 5		(Form 990) and it	ts instructions is	at www	irs govitorm990		en IOF nspect		IC
Name	e of the organization					Employ	er identif	ication	nur	nber
	URBAN LEAGUE	OF PO	RTLAND, I	NC.			93-03	3955	90	
Pai								-		
		(a)	(b)	(c)			(d)			
		Check if	Number of	Noncash contr			od of det			
		applicable	contributions or items contributed	amounts repor Form 990, Part V		noncash o	contribut	ion amo	ount	s
1	Art - Works of art				,		•			
2	Art - Historical treasures									
3	Art · Fractional interests	····								
4	Books and publications				•					
5	Clothing and household goods					<u> </u>				
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property		· ·					•		
9	Secunties - Publicly traded									
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
• •	trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation contribution -									
	Historic structures									
14	Qualified conservation contribution - Other	·	·							
15	Real estate - Residential									
16	Real estate · Commercial									
17	Real estate · Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies	1								
21	Taxidermy	-								
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts						- · · · · · · · · · · · · · · · · · · ·			
25	Other (TRANSPORTATIO)	X	3	20,	000.	FAIR MA	RKET	VAL	UE	
26	Other PRINTING	X	1	. 15,	195.	FAIR MA	RKET	VAL	UE	
27	Other (LAPTOPS)	Х	10	1,	875.	FAIR MA	RKET	VAL	UE	
28	Other (EQUIPMENT/FUR)	Х	1	1,	059.	FAIR MA	RKET	VAL	UE	
29	Number of Forms 8283 received by the organi	zation dunn	g the tax year for o	contributions						
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement	29					
	-							Y	es	No
30a	During the year, did the organization receive b	y contributio	on any property re	ported in Part I, lin	es 1 thr	ough 28, that it	Γ			
	must hold for at least three years from the date									, ,
	exempt purposes for the entire holding period	?		•				30a	_	X
b	If "Yes," describe the arrangement in Part II						Γ			
31	Does the organization have a gift acceptance	policy that re	equires the review	of any non-standa	ard cont	ributions?		31	_	X
32a	Does the organization hire or use third parties	or related or	ganizations to sol	icit, process, or se	II nonca	ısh				
	contributions?							32a	_	X
b	If "Yes," describe in Part II.								\neg	
33	If the organization did not report an amount in	column (c) t	or a type of prope	erty for which colum	nn (a) is	checked,			ĺ	
								- 1		

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

Schedulê	M (Form 99	0) (2014)	URBA	N LE	AGUE	OF	PORTL	AND,	INC.			93-0	395590	Page 2
Part II	Supple is report	ementa	I Inform	nation	Provide	the inf	ormation re	equired I	oy Part I, I	lines	30b, 32b, and 33, eceived, or a comb	and whe ination o	ther the organ of both. Also co	ızation
		. 101 411,7 4												
SCHED	ULE M	, PAR	гI,	COLU	MIN (в):								
THE N	UMBER	IN C	OLUMN	ВБ	EPRE	SENT	S THE	NUM	BER C	F	CONTRIBUT	IONS	RECEIVE	ED.
<u> </u>														
														·
	•						•							
													 	
		· · · · · -												
									-	<u> </u>				
			,						·		- -			
	-													
						-								
														_
										<u> </u>				
														 _
	.													
														

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

information.

Open to Pu

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

Open to Public Inspection

OMB No 1545-0047

Employer identification number Name of the organization 93-0395590 URBAN LEAGUE OF PORTLAND, INC. 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: HEALTHY FAMILY 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 HEALTHY FAMILY OREGON HEALTH INSURANCE PROGRAM. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. EXPENSES \$ 87,283. 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.
432211
08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

Employer identification number 93-0395590

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 \$ 23,226. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

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 WAS MADE.

EACH MEMBER HAS ONE VOTE IN MEMBERSHIP MEETINGS, IRRESPECTIVE OF THE AMOUNT OF THEIR CONTRIBUTION.

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

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:

THE EXECUTIVE COMMITTEE HAS AUTHORITY TO TAKE ACTION ON ALL MATTERS ON
WHICH IT DEEMS NECESSARY THAT ACTION BE TAKEN BEFORE THE NEXT REGULAR BOARD
MEETING AND MINUTES OF THIS COMMITTEE ARE NOT MAINTAINED.

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

THE FORM 990 IS PREPARED BY AN INDEPENDENT CPA FIRM, REVIEWED IN DETAIL BY

MANAGEMENT, AND EMAILED TO THE BOARD OF DIRECTORS FOR REVIEW PRIOR TO

FILING WITH THE IRS.