Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)
The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Α	For the	2005 calendar year, or tax year beginning , and ending			······································
В	Check if a	applicable: Please C Name of organization use IRS Collaboration Field and Inches Mini	, ,		Identification no.
	Address	change label or Salama rellowship ordan Mini		198012	
	Name cha	ange print or Inc.		E Telephon	e number
三	Initial retu	type. Number and street (or P.O. box if mail is not delivered to street add	ress) Room/suite		
=		Specific 1203 oth Avenue South			ng method: Cash
₹.	Final retu	Instruc- City or town, state or country, and ZiP + 4	_	X Accrual	Other (specify)
	Amended		T	<u></u>	
	Application	 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). 	H and I are not applicable to s	-	
			H(a) Is this a group return fo		Yes X No
		:: ▶ N/A	H(b) If "Yes," enter number		
J		ation type	H(c) Are all affiliates include		Yes No
	(check o	only one) X 501(c) (3) < (insert no.) 4947(a)(1) or 527	(If "No," attach a list. S	· ·	
K	Check he	transf	H(d) Is this a separate retur	•	Yes X No
	organizat	ion need not file a return with the IRS; but if the organization chooses to file a return, be	organization covered by Group Exemption N		Tes A NO
	sure to fi	e a complete return. Some states require a complete return.	M Check ▶ if th		is not required
	_	eceints: Add lines 6h. 8h. 9h. and 10h to line 12		-	
L		eceipts: Add lines 6b, 8b, 9b, and 10b to line 12 459, 582 Revenue, Expenses, and Changes in Net Assets or Fund B			2, 01 990-1-1).
	art I		alances (Oce the mon	dollons./	
	1	Contributions, gifts, grants, and similar amounts received:	1a 458,94	11	
	a	Direct public support	1b	' 	
	Ь	Indirect public support	10		
	С	Government contributions (grants)		1d	458,941
	d	Total (add lines 1a through 1c) (cash \$ 448,686 noncash \$ 448,686	line (12)	2	450,541
	2	Program service revenue including government fees and contracts (from Part VII,		1 . 1	
	3	Membership dues and assessments		·· 	641
	4	Interest on savings and temporary cash investments		0-1-1	
	5	Dividends and interest from securities		·· ••	
	6a	Gross rents	6a		
	b	Less: rental expenses			
	C	Net rental income or (loss) (subtract line 6b from line 6a)		6c 7	
ā	7	Other investment income (describe	(B) Other	·· · ·	
Revenue	8a	Gross amount from sales of assets other (A) Securities	(B) Other		
Şe,		than inventory	8b		
-	b	Less: cost or other basis and sales expenses	8c		
	c	Gain or (loss) (attach schedule)		8d	
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))		00	
	9	Special events and activities (attach schedule). If any amount is from gaming, ch	leck ner		
	а	Gross revenue (not including \$ of	1 0-1		
		contributions reported on line 1a)	9a 9b		
	b	Less: direct expenses other than fundraising expenses		9c	
	C	Net income or (loss) from special events (subtract line 9b from line 9a)	10a		
	10a	Gross sales of inventory, less returns and allowances	10b		
	þ	Less: cost of goods sold		10c	
	C	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b		1	
	11	Other revenue (from Part VII, line 103)		• • •	459,582
_	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		''' 	368,145
u	, 13	Program services (from line 44, column (B))			59,660
Fynonsos	14	Management and general (from line 44, column (C))		· · ·	650
à	15	Fundraising (from line 44, column (D))			
Ţ		Payments to affiliates (attach schedule)			428,455
_	17	Total expenses (add lines 16 and 44, column (A))			31,127
4	2 18	Excess or (deficit) for the year (subtract line 17 from line 12)			681,247
	18 19 20 21	Net assets or fund balances at beginning of year (from line 73, column (A))	e Statement 1	20	21,935
1	20	Other changes in net assets or fund balances (attach explanation)		20	734,309
2	² 21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		41	, 5 - 2 , 5 0 3

7296 07/06/2006 8:27 AM Page 2 Form 990 (2005) Salama Fellows Urban Ministries, 58-2198 Part II Statement of All c. __nizations must complete column (A). Columns (B), (Cn and (D) are required for section 501(c)(3) and (4) Functional Expenses organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.) Do not include amounts reported on line (B) Program (C) Management (A) Total (D) Fundraising services and general 6b, 8b, 9b, 10b, or 16 of Part I. 22 Grants and allocations (attach schedule) non-cash \$ 22 If this amount includes foreign grants, check here 23 Specific assistance to individuals (attach 23 schedule) 24 Benefits paid to or for members (attach 24 25 Compensation of officers, directors, etc. 25 52,898 20,111 32,787 26 26 Other salaries and wages 27 27 Pension plan contributions 28 Other employee benefits 28 1,539 1,034 2,573 29 29 Payroll taxes 30 Professional fundraising fees 30 31 31 Accounting fees 32 Legal fees 15,958 <u>15,958</u> 33 Supplies 4.166 3 958 208

34 Telephone	34	- 1,100		200	
35 Postage and shipping	1 1	5,111	4,855	256	
36 Occupancy		3,472	3,338	134	
37 Equipment rental and maintenance		8,066	7,896	170	
38 Printing and publications		4,341	4,124	217	
39 Travel	39				
40 Conferences, conventions, and meetings	40				
41 Interest		4,023	3,822	201	
42 Depreciation, depletion, etc. (attach schedule)	42	34,651	32,919	1,732	
43 Other expenses not covered above (itemize):					
a See Statement 2	43a	293,196	269,625	22,921	650
b	1401				
c					
d					
е	1 40 1				···
f	1 400				
g	140-1				
44 Total functional expenses. Add lines 22					
through 43. (Organizations completing					
columns (B)-(D), carry these totals to lines					
13-15)	44	428,455	368,145	59,660	650
Joint Costs. Check ▶ if you are following SOP 98-2.				_	
Are any joint costs from a combined educational campaign	and fundrais	sing solicitation reporte	ed in (B) Program servi		Yes X No
if "Yes," enter (I) the aggregate amount of these joint costs		; (ii) the amount	allocated to Program serv	rices \$;
			t allocated to Fundraising\$		
(iii) the amount allocated to Management and genera\$					

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

٧h	at is the organization's primary exempt purpose?	Program Service
>	CHRISTIAN SUPPORT FOR YOUTH	Expenses
All (organizations must describe their exempt purpose achievements in a clear and concise manner. State the number	(Required for 501(c)(3) &
of c	lients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4)	(4) orgs., & 4947(a)(1)
orga	anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	trusts; but optional for others.)
а	See Statement 3	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	368,145
b	•••••••••••••••••••••••••••••••••••••••	1
		ļ
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	
С		
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	
d	Totalis and anotations \$\psi\$ in this amount includes lotely in grains, the killing in the state of the state	
ŭ		
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
е	Other program services (attach schedule) See Stmt 4	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	368,145
		Form 990 (2005)

Form 990 (2005) Salama Fellowsl . ي Urban Ministries, 58-2198 ي 2

Page 4

Part IV					
Note:	Where required, attached schedules and amounts w column should be for end-of-year amounts only.	ithin the description	(A) Beginning of year		(B) End of year
45	Cash-non-interest-bearing		82,274	45	116,625
46	Savings and temporary cash investments			46	
47a	Accounts receivable	47a			
b	Less: allowance for doubtful accounts	47b		47c	
48a	Pledges receivable	48a			
Ь	Less: allowance for doubtful accounts	48b		48c	
49	Grants receivable			49	
50	Receivables from officers, directors, trustees, and ke	ey employees			
	(attach schedule)		50		
51a	Other notes and loans receivable (attach				
1	schedule)	51a			
b	Less: allowance for doubtful accounts	51b		51c	
52	Inventories for sale or use			52	
53	Prepaid expenses and deferred charges		498	53	484
54	Investments-securities			54	<u> </u>
55a	Investments-land, buildings, and				
	equipment: basis	55a			
b	Less: accumulated depreciation (attach				
	schedule)	55b		55c	
56	investments-other (attach schedule)	See Stmt 5	5,000	56	8,030
57a	Land, buildings, and equipment: basis	57a 895,879			
b	Less: accumulated depreciation (attach				
	schedule) See Statement 6	57b 207,528			688,351
58	Other assets (describe See Stateme	nt 7)	99,615	58	99,615
			000 466		010 105
59	Total assets (must equal line 74). Add lines 45 thro		875,169		913,105
60	Accounts payable and accrued expenses		13,922	1	18,796
61	Grants payable			61	
62	Deferred revenue			62	
63	Loans from officers, directors, trustees, and key em	ployees (attach			
64a	schedule)			63	
64a	Tax-exempt bond liabilities (attach schedule)			64a	
Ь		le)	100 000	64b	160 000
65	Other liabilities (describe > See Stateme	ent 8	180,000	65	160,000
1	Tatal liabilities Add lines 60 through 65		193,922	2 66	178,796
06	Total liabilities. Add lines 60 through 65 anizations that follow SFAS 117, check here ▶ X	and complete lines			
Orga	67 through 69 and lines 73 and 74.	and complete into			
			583,52	7 67	633,929
67	Unrestricted		97,72		100,380
68	Temporarily restricted			69	
69	Permanently restricted	a D and			
67 68 69 Org.	complete lines 70 through 74.				
				70	
70 71 72 73	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, building, and equ	inment fund		71	
71	Retained earnings, endowment, accumulated inco			72	
72	Total net assets or fund balances (add lines 67 th				
73		oagii oo oi iiiloo			
I	70 through 72; column (A) must equal line 19; column (B) must e	qual line 21)	681,24	7 73	734,30
\	Total liabilities and net assets/fund balances. Ac	dd lines 66 and 73	875,16		913,10
74	I Viai navinties and het assetsituile balances. At		<u> </u>		Form 990 (200

	n 990 (2005) Salama Fellows Urban Mir art IV-A Reconciliation of Revenue per Audited Fi	nistries, nancial State	58-2 ments	198、_2 With Revenue r	er Retu	rn (Se	Page 5
	instructions.)					(00	, c (110
а	Total revenue, gains, and other support per audited financial stateme	nts			а		733,703
b	Amounts included on line a but not on Part I, line 12:						
1	Net unrealized gains on investments	• • • • • • • • • • • • • • • • • • • •	b1				
2	Donated services and use of facilities		b2	274,12	21		
3	Recoveries of prior year grants		b3				
4	Other (specify):						
			b4				
	Add lines b1 through b4		. 	• • • • • • • • • • • • • • • • • • • •	. <u>b</u>		274,121
С	Subtract line b from line a			• • • • • • • • • • • • • • • • • • • •	<u> </u>		459,582
d	Amounts included on Part I, line 12, but not on line a:					_	
1	Investment expenses not included on Part I, line 6b		d1				
2	Other (specify):						
			d2				
	Add lines d1 and d2				d		
е	Total revenue (Part I, line 12). Add lines c and d				e		459,582
P	nt IV-B Reconciliation of Expenses per Audited F	inancial State	ements	With Expenses		turn	
а	Total expenses and losses per audited financial statements				а		683,301
b	Amounts included on line a but not Part I, line 17:						
1	Donated services and use of facilities		b1	254,8	46	į	
2	Prior year adjustments reported on Part I, line 20		b2			Í	
3	Losses reported on Part I, line 20		b3				
4	Other (specify):				\neg		
			b4				
	Add lines b1 through b4				Ъ	ĺ	254,846
С	Subtract line b from line a						428,455
ď	Amounts included on Part I, line 17, but not on line a:		• • • • • • • •	• • • • • • • • • • • • • • • • • • • •			
1	Investment expenses not included on Part I, line 6b		d1				
2	Other (specify):						
_			d2			l	
	Add lines d1 and d2				ď	ĺ	
e	Total expenses (Part I, line 17). Add lines c and d				▶ e		428,455
P	Current Officers, Directors, Trustees, and or key employee at any time during the year even if the	Key Employ	ees (List	t each person who w		er, dire	
	(A) Name and address	(B) Title and average week devoted to	hours per position	(C) Compensation (If not paid, enter -0)	(D) Con employee plans & d compensa	trib. to benefit leferred tion plans	(E) Expense account and other allowances
 S	ee Statement 9						
~		<u> </u>	 -				
		<u> </u>					
		•					

AAAABAAAAAAA	990 (2005) Salama Fellowsi. ر Urban Mi			· · · · · · · · · · · · · · · · · · ·	Page 6
	tV-A Current Officers, Directors, Trustees, and				Yes No
	Enter the total number of officers, directors, and trustees permitted	-	business at board	:	
	meetings			•••••	
	Are any officers, directors, trustees, or key employees listed in For		•		
	employees listed in Schedule A, Part I, or highest compensated pro		•		
	contractors listed in Schedule A, Part II-A or II-B, related to each ot relationships? If "Yes," attach a statement that identifies the individ				75L V
,	relationships? It ites, attach a statement that identifies the individ	uais anu explains the rei	ationship(s)	•••••	75b X
ا م	Do any officers, directors, trustees, or key employees listed in Form	000 Part V-A or highe	et componented		
	employees listed in Schedule A, Part I, or highest compensated pro		•		
	contractors listed in Schedule A, Part II-A or II-B, receive compensate		•		
	tax exempt or taxable, that are related to this organization through	, ,	•		75c X
	Note. Related organizations include section 509(a)(3) supporting or	·		•••••	700
	(γ, γ, γ	•			
i	If "Yes," attach a statement that identifies the individuals, explains	the relationship between	this		
(organization and the other organization(s), and describes the comp	ensation arrangements,			
i	including amounts paid to each individual by each related organization	tion.			
<u>d [</u>	Does the organization have a written conflict of interest policy?				75d X
Par	t V-B Former Officers, Directors, Trustees, and				
	(If any former officer, director, trustee, or key employee		•	, ,	
	the year, list that person below and enter the amount o	f compensation or other	benefits in the appro	opriate column. See the	В
	instructions.)	<u> </u>		(m)	
	(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contrib. to employee benefit plans & deferred compensation plans	(E) Expense account and other
N/A				compensation plans	allowances
.734.55	·				
					Ì
				,	
		Į			
					
				 	
• • • • • •		•			
		1			
Pai	Other Information (See the instructions.)				Yes No
76	Did the organization engage in any activity not previously reported	to the IRS? If "Yes," atta	ach a detailed		
	description of each activity				76 X
77	Were any changes made in the organizing or governing document	s but not reported to the	IRS?		77 X
	If "Yes," attach a conformed copy of the changes.				
	Did the organization have unrelated business gross income of \$1,0				78a X
b	If "Yes," has it filed a tax return on Form 990-T for this year?				78b
	Was there a liquidation, dissolution, termination, or substantial cor	ntraction during the year	? If "Yes," attach		
	a statement				79 X
	Is the organization related (other than by association with a statew	-		.m2	000
	common membership, governing bodies, trustees, officers, etc., to		mexempt organization	on f	80a X
b	If "Yes," enter the name of the organization ▶		is avenut or	nonexempt	
81a	Enter direct and indirect political expenditures. (See line 81 instruc	•		nonevenibr	
	Did the organization file Form 1120-POL for this year?			N/A	1 _{81b}

*****	990 (2005) Salama Fellowsh Urban Ministries, 58-2198 _2		F	age 7
Pa	rt VI Other Information (continued)		Yes	No
32a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge			
	or at substantially less than fair rental value?	82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this			
	amount as revenue in Part I or as an expense in Part II.			
	(See instructions in Part III.) See Stmt 10 82b 274,121			
83a		83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a		84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible? N/A	84b		
B5		85a		
b		85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization			
	received a waiver for proxy tax owed for the prior year.			
С	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures 85d			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
q	/- 1	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f			
••	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the			
	- · · · · ·	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on			
-	line 12 86a			
b	Gross receipts, included on line 12, for public use of club facilities			
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders			
b.	Gross income from other sources. (Do not net amounts due or paid to other			
-	sources against amounts due or received from them.)			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or			
•	partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2			
	and 301.7701-3? If "Yes," complete Part IX	88		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction			
_	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach		1	
	a statement explaining each transaction	89b	Ì	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year			
Ū				(
d	sections 4912, 4955, and 4958 Enter: Amount of tax on line 89c, above, reimbursed by the organization			(
90a	List the states with which a copy of this return is filed None			
b	Number of employees employed in the pay period that includes March 12, 2005 (See			
_	instructions.)			Ę
91a	instructions.) The books are in care of ► Hal Andrews Telephone no. ►			
	1205 8th Avenue S			
	Located at ▶ Nashville, TN ZIP+4▶ 37203			
b	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		Ye	s No
	account)?	91b		X
	If " Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
	At any time during the calendar year, did the organization maintain an office outside of the United States?	91c	1	X
С	15 Mary Hardan the many of the foreign country			
92	Section 4947(aV1) nonexempt charitable trusts filling Form 990 in lieu of Form 1041- Check here			▶ [
34	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92			_ `
	and office the amount of the events interest reserved or decided among the many and interest in the interest of the events of the event of the events of the events of the events of the event			90 (200

(See Gen. Instr. W)

no. ▶ 615-385-0686

P00037312

▶ 62-1016830

7/06/06 self-employed

EIN

Phone

Paid

Preparer's

Use Only

Preparer's

signature

Firm's name (or yours

address, and ZIP + 4

if self-employed),

THOMAS M. PRICE

Price CPAs, PLLC

3825 Bedford Ave Ste 202

Nashville, TN 37215-2507

OMB No. 1545-0047

SCHEDULE A (Form 990 or 990-EZ)

Orsanization Exempt Under Section 5. (c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),

or 4947(a)(1) Nonexempt Charitable Trust

2005

Department of the Treasury internal Revenue Service

Supplementary Information-(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the organization Employer identification number Salama Fellowship Urban Ministries, Inc. 58-2198012 Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (d) Contrib. to (b) Title and average hours (e) Expense (a) Name and address of each employee paid more empl, ben, plans & deferred comp (c) Comp. account & other than \$50,000 per week devoted to position allowances Total number of other employees paid over \$50,000 Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of other contractors receiving over \$50,000 for other services

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

Schedule A (Form 990 or 990-EZ) 2005

SCITE	uuie .	4 (Folini aad di aad-EZ) 2005 Bataniz Fettowship Giban Finiscite, , 36-2136012			age 2
Pa	rt III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	atter	ng the year, has the organization attempted to influence national, state, or local legislation, including any npt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid curred in connection with the lobbying activities \$ (Must equal amounts on line 38, VI-A, or line i of Part VI-B.)			•
2	Orga orga the I Duri subs	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other nizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of obbying activities. In the year, has the organization, either directly or indirectly, engaged in any of the following acts with any stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or any taxable organization with which any such person is affiliated as an officer, director, trustee, majority	1		X
	own tran	er, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the sactions.)			
a		, exchange, or leasing of property?	2a		X
b	Len	ding of money or other extension of credit?	2b		X
С.	Furr	hishing of goods, services, or facilities?	2c		X
d	ray	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	_	X
e	Tmr	sfer of any part of its income or assets?	1		x
3a		isfer of any part of its income or assets? /ou make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how	2e		A
Ju		determine that recipients qualify to receive payments.) See Statement 11	3a	х	
b		ou have a section 403(b) annuity plan for your employees?	3b		х
С		ng the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		X
4a		you maintain any separate account for participating donors where donors have the right to provide advice on			
	the	use or distribution of funds?	4a		X
b	Do y	ou provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		X
Pa	rt I\	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
The 6 5 6 7 8 9	X	ization is not a private foundation because it is: (Please check only ONE applicable box.) A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). A school. Section 170(b)(1)(A)(ii). (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. 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. Section 170(b)(1)(A)(III)			
11a		(Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(on		
11b		170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12	H	A community trust. Section 176(b) (1)(α)(α). (Also complete the Support Schedule in Fart 19-A.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross rec	eints		
-		from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support	Сіріз		
		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). (Also complete the Support Schedule in Part IV-A.)			
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations			
		described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check			
		the box that describes the type of supporting organization: Type 1 Type 2 Type 3			
		Provide the following information about the supported organizations. (See page 6 of the instructions.)			
		(a) Name(s) of supported organization(s)	b) Line from a		
			HU(II)	anove.	
14	П	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)			

7296 07/06/2006 8:27 AM Schedule A (Form 990 or 990-EZ) 2005 Salam Fellowship Urban Ministrie, 58-2198012 Page 3 Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. (a) 2004 (b) 2003 (d) 2001 (e) Total Calendar year (or fiscal year beginning in) (c) 2002Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) Membership fees received . 16 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 Net income from unrelated business activities not included in line 18 Tax revenues levied for the organization's benefit and either paid to it or expended on The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 23 Total of lines 15 through 22 Line 23 minus line 17 24 25 Enter 1% of line 23 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26 26a b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 26b c Total support for section 509(a)(1) test: Enter line 24, column (e) 26c Add: Amounts from column (e) for lines: 18 _____ 19 26b 26d e Public support (line 26c minus line 26d total) 26e 27

f	Public support percentage (line 26e (num	erator) divided by line 26c (denomina	ator))	▶ 2	26f	%
27	Organizations described on line 12: a	For a	mounts included in lines 15, 16,	and 17 that were received from a "c	disqualif	ied	
	person," prepare a list for your records to sl	now the	e name of, and total amounts red	ceived in each year from, each "disq	ualified	perso	o n."
	Do not file this list with your return. Enter	the su	m of such amounts for each yea	ar:			N/A
	(2004) (200	3)	(20	02)	(2001)		
b	For any amount included in line 17 that was						
	show the name of, and amount received for	each	year, that was more than the larg	ger of (1) the amount on line 25 for	the year	or (2	!) \$5,000.
	(Include in the list organizations described	n lines	5 through 11b, as well as individ	duals.) Do not file this list with you	r return	. Afte	er computing
	the difference between the amount received	d and t	he larger amount described in (1) or (2), enter the sum of these diffe	rences	(the e	excess
	amounts) for each year:						N/A
	(2004) (200	3)	(20	002)	(2001)		
C	Add: Amounts from column (e) for lines:	15	16				
	17	_ 20	21		▶ 2	27c	
d	Add: Line 27a total.	_	and line 27b total		▶ 2	27d	
е	Public support (line 27c total minus line 27c			***************************************	▶ 2	27e	
f	Total support for section 509(a)(2) test: Ent	er amo	ount from line 23, column (e)	▶ 27f			
g	Public support percentage (line 27e (nun	nerator	r) divided by line 27f (denomina	itor))	▶ [:	27g	<u>%</u>
h	Investment income percentage (line 18,					27h	%
28	Unusual Grants: For an organization desc	ribed ir	line 10, 11, or 12 that received	any unusual grants during 2001 three	ough 20	04,	

prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief

description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Р	aq	е	4

Part V Private School Questionnaire (See page 7 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	(10 be completed ONE) by schools that directed the box of the only at 14)				
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,	N/A_		res	No
	other governing instrument, or in a resolution of its governing body?		29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its				
	brochures, catalogues, and other written communications with the public dealing with student admissions,				
	programs, and scholarships?	L	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during				
	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way				
	that makes the policy known to all parts of the general community it serves?	L	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)				
32	Does the organization maintain the following:				
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	L <u>.</u>	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory				
	basis?		32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	Г Г			
	with student admissions, programs, and scholarships?		32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)				
33	Does the organization discriminate by race in any way with respect to:				
а	Students' rights or privileges?		33a		
			1		
b	Admissions policies?		33b		
			1		
C	Employment of faculty or administrative staff?		33c		
d	Scholarships or other financial assistance?		33d		—
					ļ
е	Educational policies?		33е		-
		1			
f	Use of facilities?	····· }	33f		-
		Ì	22-		1
g	Athletic programs?	· · · · · · · · · · · · · · · · · · ·	33g		\vdash
	Other sufficients positivities?		33h		1
h	Other extracurricular activities?				
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)				
	•				
	••••••	• • • • • • • • • • • • • • • • • • • •			
	••••••		********	::::::::::::::::::::::::::::::::::::::	4*****
240	Does the organization receive any financial aid or assistance from a governmental agency?		34a		
34a	Dues the organization receive any financial aid of assistance from a governmental agency:		-ru	\vdash	T
b	Has the organization's right to such aid ever been revoked or suspended?		34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.				
	Jon and the second of the second				
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05				
55	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		35		

Page 5

	ditures by Electin I ONLY by an eligi	-		_	•	
	ongs to an affiliated gro			necked "a" and "lim	ited control"	provisions apply.
Limits or	n Lobbying Exper	nditures		(a) Affiliated group totals		(b) To be completed for ALL electing organizations
	itures" means amounts					organizations
36 Total lobbying expenditures to influence						
37 Total lobbying expenditures to influence				· · · · · · · · · · · · · · · · · · ·		
38 Total lobbying expenditures (add lines	36 and 37)					· · · · · · · · · · · · · · · · · · ·
39 Other exempt purpose expenditures						
40 Total exempt purpose expenditures (ad			40			
41 Lobbying nontaxable amount. Enter the		=				
If the amount on line 40 is-		ntaxable amount is-	¬			
Not over \$500,000		on line 40	10000000			
Over \$500,000 but not over \$1,000,000	•		1 1			
Over \$1,000,000 but not over \$1,500,000	•		200000000			
Over \$1,500,000 but not over \$17,000,000.	·		10000000000			
Over \$17,000,000	\$1,000,000		ا			
42 Grassroots nontaxable amount (enter	25% of line 41)		42			
43 Subtract line 42 from line 36. Enter -0-						
44 Subtract line 41 from line 38. Enter -0-	if line 41 is more than	line 38	44			
O C Kill to a some out on other	B 40 B 44	4700				
Caution: If there is an amount on either		aging Period Unc	or Section El)4/b)		
(0)				• •		
(Some organizati	ons that made a section		•		umns below	<i>'</i> .
	See the instructions for	or lines 45 through 50 t	ni page i i oi ine	instructions.)		
		Lobbying Expe	nditures During	4-Year Averaging F	Period	
Calendar year (or	(a)	(b)	(c)	(d)		(e)
fiscal year beginning in)	2005	2004	2003	2002		Total
AP 1 d by the manufacturable amount		H				
45 Lobbying nontaxable amount						
46 Lobbying ceiling amount (150% of						
line 45(e))						
47 Total lobbying expenditures						
47 Total lobbying expenditures						
48 Grassroots nontaxable amount						
49 Grassroots ceiling amount (150% of						
line 48(e))						
50 Grassroots lobbying expenditures						
	y by Nonelecting	Public Charities				
	ly by organization		plete Part VI	-A) (See page	11 of the	instructions.)N/2
During the year, did the organization atter				v		
attempt to influence public opinion on a le	gislative matter or refer	rendum, through the u	se of:	Ye	s No	Amount
a Volunteers						
b Paid staff or management (Include	compensation in expen	ses reported on lines	hrough c h.)			
c Media advertisements						
d Mailings to members, legislators, or	the public					
e Publications, or published or broade	ast statements					
f Grants to other organizations for lot	bying purposes					
g Direct contact with legislators, their	staffs, government offi	cials, or a legislative b	ody			
h Rallies, demonstrations, seminars,						
i Total lobbying expenditures (Add lir If "Yes" to any of the above, also at	nes through c h.)					

Schedule A (Form 990 or 990-EZ) 2005 Salam Fellowship Urban Ministric , 58-2198012

Schedule A (Form 990 or 990-EZ) 2005 Salam Fellowship Urban Ministrie, 58-2198012 Page 6 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.) Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting organization to a noncharitable exempt organization of: Yes No X 51a(i) Cash X a(ii) Other assets _____ Other transactions: Sales or exchanges of assets with a noncharitable exempt organization b(i) X (ii) Purchases of assets from a noncharitable exempt organization b(ii) (iii) Rental of facilities, equipment, or other assets b(iii) (iv) Reimbursement arrangements b(iv) (v) Loans or loan guarantees b(v) X (vi) Performance of services or membership or fundraising solicitations b(vi) Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: Line no. Amount involved Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements N/A 52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule: (b) (c) (a) Name of organization Type of organization Description of relationship N/A

Form **4562** (Rev. January 2006)

Depreciation and Amortization

(Including Information on Listed Property)

2005

Department of the Treasury Internal Revenue Service Name(s) shown on return

► See separate instructions. ► Attach to your tax return.

Salama Fellowship Urban Ministries,

| Sequence No.

Inc. 58-2198012 Business or activity to which this form relates Indirect Depreciation Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount. See the instructions for a higher limit for certain businesses 105,000 1 Total cost of section 179 property placed in service (see instructions) 2 2 Threshold cost of section 179 property before reduction in limitation 420,000 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instr. (a) Description of property (b) Cost (business use only) 6 Listed property. Enter the amount from line 29 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2004 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 12 Carryover of disallowed deduction to 2006. Add lines 9 and 10, less line 12. 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Part II Special allowance for certain aircraft, certain property with a long production period, and qualified NYL or GO Zone property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 91 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) 32,905 MACRS deductions for assets placed in service in tax years beginning before 2005 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2005 Tax Year Using the General Depreciation System (c) Basis for depreciation (d) Recovery (b) Month and (business/investment use (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property year placed in period only-see instructions) 19a 3-year property 17,752 5.0 MQ 200DB 888 b 5-year property 17,465 200DB MQ 767 7-year property d 10-year property 15-year property 20-year property 25-year property 25 yrs. S/L 27.5 yrs. MM S/L Residential rental property 27.5 vrs. MM S/L Nonresidential real 39 yrs. MM S/L property MM Section C-Assets Placed in Service During 2005 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs. 40-year 40 yrs. MM S/L Part IV Summary (see instructions) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 34,651 Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr. For assets shown above and placed in service during the current year,

enter the portion of the basis attributable to section 263A costs

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58-2198012

7296 Salama Fellowship Urbar nistries, Federal Statements

FYE: 12/31/2005

Statement 1 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	 Amount
Donated Services and Use of Facilities Increase in Temporarily Restricted Assets	\$ 19,275 2,660
Total	\$ 21,935

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58-2198012

FYE: 12/31/2005

nistries, Federal Statements

Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
Expenses	\$ \$	\$	\$	
ACTIVITY	1,971	1,971		
CHRISTMAS	1,342	1,342		
COMPUTER EXPENSE	4,407	4,187	220	
COSTUME COMPANY EXPENSE	454	454	220	
DONATIONS AND BENEVOLENCE	10,674	10,674		
DUES AND SUBSCRIPTIONS	1,069	10,011	1,069	
FIELD TRIPS	768	768	1,005	
FUNDRAISING	650			650
INSURANCE	1,592	1,512	80	050
INTERNET EXPENSE	-, 552	1,010		
MAKE AND TAKE	103	103		
MISCELLANEOUS	3,250	1,180	2,070	
MISSIONS	-,	_,	2,0.0	
MOTHER'S DAY CELEBRATION	1,562	1,562		
MUSIC	1,506	1,506		
PICTURES	2,280	2,280		
PROFESSIONAL FEES	82,550	72,459	10,091	
PROFESSIONAL FEES - OTHER	53,240	53,240	,	
PROMOTION	7,100	1,401	5,699	
REFRESHMENTS	8,855	8,855	,	
REPAIRS & MAINTENANCE	17,611	16,730	881	
RETREATS / CAMPS	6,937	6,937		
SCHOLARSHIPS				
SET UP / TEAR DOWN	5,399	5,399		
STAFF DEVELOPMENT	5,966	5,668	298	
STUDENT INCENTIVES				
T-SHIRTS	2,377	2,377		
TAXES AND LICENSES	4,479	4,255	224	
TEACHER EXPENSES	405	405		
TRANSPORTATION	35,244	34,326	918	
UTILITIES	16,587	15,758	829	
VOLUNTEER EXPENSE	2,534	2,448	86	
Group Insurance	1,683	1,599	84	
Office Supplies	7,447	7,075	372	
Service Groups	545	545		
Closing Program	192	192		
Schools - OLAC	2,269	2,269		
Countdown to Success	148	148		
Total	\$ 293,196 \$	269,625	22,921 \$	650

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58-2198012

Federal Statements

FYE: 12/31/2005

Statement 3 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

Description

SALAMA URBAN MINISTRIES IS A COMMUNITY-BASED CHURCH-SPONSORED YOUTH ORGANIZATION IN THE EDGEHILL COMMUNITY IN NASHVILLE, TENNESSEE, WHICH DEVELOPS AND NURTURES JUDEO-CHRISTIAN FAMILY VALUES AND DISCIPLESHIP. EDGEHILL YOUTH AND THEIR FAMILIES ARE INSTRUCTED AND ENCOURAGED TO EMBRACE CHRIST-HONORING LIFESTYLES AND TO PURSUE TRAINING AND EDUCATION TO PREPARE FOR THE FUTURE. THIS TRAINING AND EDUCATION WILL EQUIP THEM TO BECOME PRODUCTIVE CITIZENS AND FUTURE LEADERS IN THE EDGEHILL COMMUNITY AND IN ANY COMMUNITY IN THE WORLD. THE ORGANIZATION WILL SERVE AS A SUPPORT SYSTEM FOR THE YOUTH AND WILL ASSIST THEM IN DEVELOPING SELF-CONFIDENCE, SELF-ESTEEM AND ULTIMATELY SELF-SUFFICIENCY IN CHRIST JESUS.

Statement 4 - Form 990, Part III, Line e - Other Program Services

Description

Same

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Federal Statements

FYE: 12/31/2005

Statement 5 - Form 990, Part IV, Line 56 - Othe	<u>r Investments</u>
---	----------------------

Description	eginning of Year	 End of Year	Basis of Valuation
OTHER RECEIVABLES	\$ 5,000	\$ 8,030	
Total	\$ 5,000	\$ 8,030	

Statement 6 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	_	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
EQUIPMENT	\$	48,993 \$	37,962 \$	55,009 \$	•
FURNITURE & FIXTURES		33,894	17,886	46,304	23,284
BUILDING IMPROVEMENTS		709,792 51,808	56,653 47,395	709,793	74,933
VEHICLES COSTUMES	_	16,175	12,984	68,598 16,175	51,933 14,952
Total	\$_	860,662 \$	172,880 \$	895,879 \$	207,528

Statement 7 - Form 990, Part IV, Line 58 - Other Assets

Description	E	 End of Year		
1203 Building	\$	99,615	\$ 99,615	
Total	\$	99,615	\$ 99,615	

Statement 8 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year		
LINE OF CREDIT NOTE PAYABLE	\$ 150,000 30,000	\$	130,000 30,000	
Total	\$ 180,000	\$_	160,000	

Federal Statements

FYE: 12/31/2005

58-2198012

Statement 9 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key <u>Employees</u>

1	Name Address		Address							
		City, Sta	ite, Zip			Title	Average Hours	Compensation	Benefits	Expenses
Carlyle Carroll			1205	8TH	AVENUE	S.				
-	NASHVILLE	TN				President	0	0	0	0
Harold Shannon			1205	8TH	AVENUE		_	_		
	NASHVILLE	TN	1005			_ Vice Preside	0	0	0	0
Lisa Morgan			1205	8TH	AVENUE		•	0	0	•
77 3 70 - 3	NASHVILLE	TN	1205	Omii	יין זון און און און	Secretary	0	0	0	0
Hal Andrews	NIA CHILITE E ID	TTN	1205	8TH	AVENUE	Treasurer	0	0	0	0
Fred Allen	NASHVILLE	1 1/4	1205	ятн	AVENUE		O	U	U	U
ried Allen	NASHVILLE	TN	1200	0111	11111101	Director	0	0	0	0
Mark Berends			1205	8TH	AVENUE	S.				
	NASHVILLE	TN				Director	0	0	0	0
Dan Daniel			1205	8th	Avenue			_	_	_
	Nashville	TN	7.005	0.1	_	Director	0	0	0	0
Dejuan Daniels	N 1 1 7 7 -	TT N	1205	8th	Avenue		0	0	0	. 0
mem Douglas	Nashville	TN	1205	Q+h	Avenue	Director	U	U	U	U
Tom Douglas	Nashville	TN	1203	0 011	Avenue	Director	0	0	0	0
Joyce Harris	Nashviiic	114	1205	8th	Avenue		·	· ·	J	v
ooyee marris	Nashville	TN				Director	0	0	0	0
Jeff Orr			1205	8th	Avenue	S.				
	Nashville	TN				Director	0	0	0	0
Barby White			1205	8th	Avenue	S.				
-	Nashville	TN				Director	0	0	0	0

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FYE: 12/31/2005

nistries, Federal Statements

Statement 10 - Form 990, Part VI, Line 82b - Donated Services

	Description	Amount
DONATED SERVICES		\$ 274,121
Total		\$ 274,121

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FYE: 12/31/2005

Federal Statements

Statement 11 - Schedule A, Part III, Line 3a - Explanation of Grant / Loan Qualifications

Description

SCHOLARSHIP GIVEN BASED ON ACADEMIC REQUIREMENTS AND FINANCIAL NEED

58-2198012

FYE: 12/31/2005

rnistries,
TN Asset Report
Form 990, Page 1

07/06/2006 8:26 AM

	 							
Asset	Description	Date In Service	Cost	Basis for Depr	TN Prior	TN Current	Federal Current	Difference Fed - TN
<u>5-yea</u> 77 82	r GDS Property: Dell Computer (2.8GHz) 2004 Honda Accord	10/27/05 11/10/05	962 16,790 17,752	962 16,790 17,752	0 0	48 840 888	48 840 888	0 0
7-vea 78 79 80 81	r GDS Property: Refrigerator/Freezer/Warmer Laminated Shelves Mural Painting Casework	12/19/05 2/12/05 11/07/05 12/05/05	5,055 665 8,175 3,570 17,465	5,055 665 8,175 3,570 17,465	, 0 0 0 0 0	181 166 292 128 767	181 166 292 128 767	0 0 0 0 0
12 13 16 17 18 19 60 61 62 63 64 65 66	Powerite 5300 LCD Projector Epson Scanner 6 Black Leather Executive Chairs 3 Back Mesh-Back Chairs 150 Stack Chairs 145 Teal/Wild Cherry Chairs Costumes New Shower - 1203 Bldg 1203 Remodeling 1203 Remodeling Carpet - 1203 Bldg Canon Digital Camera Dell Computer - Dimension 3000 Powershot Digital Camera 60 Black Chairs	6/30/96 1/16/97 6/23/97 6/30/97 6/30/97 10/15/03 1/29/03 10/27/03 9/25/03 9/25/03 12/13/03 12/13/03 7/07/03 9/30/04 3/11/04 3/29/04 1/29/04 9/15/04 7/12/04 3/30/04	0 0 0 0 0 7,050 1,000 225 468 335 5,640 12,452 1,175 8,830 2,161 750 750 750 675 2,952 380 600 930	0 0 0 0 0 7,050 1,000 225 468 335 5,640 12,452 1,175 8,830 2,161 750 750 675 2,952 380 600 930	0 0 0 0 0 2,194 610 97 170 121 1,755 3,875 576 66 44 15 107 135 590 76 86 133	0 0 0 0 0 1,388 156 51 85 62 1,110 2,451 239 226 55 19 184 216 945 122 147 228	0 0 0 0 0 1,388 156 51 85 62 1,110 2,451 239 226 55 19 184 216 945 122 147 228	
1 2 3 3 4 4 5 5 6 6 7 7 8 8 9 1 0 1 1 1 1 4 1 5 2 0 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Desk Credenza Conference Chairs (6) Office Chairs (3) Office Chairs (3) Office Chairs (4) RAMP ARCHITECT SERVICES PRINTER CARPET HP LASERJET 6LSE CAMCORDER CAMERA PENTAX COMPUTER MONITOR EPSON PRINTER MONITOR AND SCANNER STACKING CHAIRS AND STORAGE C G.E. 31" TV CONCRETE SLAB Paper Shredder Gateway Computer 27" TV and VCR	10/16/96 10/16/96 6/30/96 6/30/96 6/30/96 6/30/96 6/30/96 1/26/96 1/30/96 10/08/96 5/16/97 5/13/97 6/11/98 6/11/98 12/15/98 12/15/98 12/15/98 12/15/98 2/26/98 2/11/99 5/05/99 8/12/99	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(((((((((((((((((((0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

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		32 32 33 33 34 35 36 37 38 38 39 40 41 41 42 43 44 45 47 48 48 48 48 48 48 48 48 48 48 48 48 48	1000
Grand Totals Less: Dispositions Net Grand Totals	Total ACRS and Other Depreciation	2 Dell Computers Gateway Computer Color Copier Paper Cutter Dell Computer Telephone System Table & Chairs ELECTRIC PIANO CD WRITER PAPER SHREDDER PRINTER PAPER SHREDDER PRINTER PRINTER PRINTER PRINTER CABINETS BOOKCASE FORD VAN Fax Machine 2 Chadwood Wall Cabinets & 2 Base Cabin 1999 Ford XL Van Costumes Dell Dimension 2300 Epson Stylus Printer Fax Machine Windows XP Refrigerator & Stove 2 U-Stations w/ Hutch & Bookcase 10' Conference Table Building Renovation Total Other Depreciation	Description
11 1	ciation =		Date In Service
81,590 0 81,590	0		7
81,590 0 81,590	0		Basis for Depr
10,650 0 10,650	0		P T
9,339 0 9,339	0	Current	TN
34,651 0 34,651	25,312	Current 0 0 0 0 0 625 173 126 177 5 5 76 18 2,270 35 46 1,429 1,728 20 20 20 20 21 208 73 40 17,698	Federal
25,312 0 25,312	25,312	760 - IN 0 0 0 0 0 0 0 625 173 1126 177 5 112 9 76 1,429 1,429 1,728 290 290 91 1,728 290 91 1,728 35 46 1,429 1,728 35 46 1,429 1,728 35 46 1,429 1,728 35 46 1,429 1,728 35 46 1,429 1,728 35 46 1,429 1,728 35 40 17,698	Difference

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Asset	Description	Date In Service	Cost	TN	
Prior M	ACRS:				
		10/16/07	•	£	
1 2	SURGE PROTECTOR 46X60 CHAIR MAT	10/16/96 10/16/96	0	0	
3	Desk	6/30/96	ŏ	ő	
4 5	Credenza Conference Chairs (6)	6/30/96 6/30/96	0	0	
6	Office Chairs (3)	6/30/96	0	0	
7	Office Chair	6/30/96	Ö	ŏ	
8 9	Table and Chairs (4) RAMP	6/30/96 1/26/96	0	0	
10	ARCHITECT SERVICES	1/20/96	0	0	
11	PRINTER	10/08/96	0	0	
12 13	Computer HP lazer Jet Printer	6/30/96 1/16/97	0	0	
13	CARPET	5/16/97	0	0 0	
15	HP LASERJET 6LSE	5/13/97	0	0	
16 17	Refrigerator Two Drawer File Cabinet	6/23/97 6/30/97	0	0	
17	Laminator	6/30/97	0	0	
19	Laminator Cabinet	6/30/97	0	0	
20 21	CAMCORDER CAMERA PENTAX	6/11/98 6/11/98	0	0 0	
21 22	COMPUTER MONITOR	6/22/98	0	0	
23	EPSON PRINTER	12/15/98	0	0	
24 25	MONITOR AND SCANNER STACKING CHAIRS AND STORAGE CABIN	12/15/98 3/06/98	0	0	
25	G.E. 31" TV	11/06/98	0	0	
27	CONCRETE SLAB	2/26/98	0	0	
28 29	Paper Shredder Gateway Computer	2/11/99 2/11/99	0	0	
30	27" TV and VCR	5/05/99	0	0	
31	Printer	8/12/99	0	0	
32 33	2 Dell Computers Gateway Computer	9/30/99 7/30/99	0	0	
34	Color Copier	11/04/99	0	0	
35	Paper Cutter	12/09/99	0	0	
36 37	Dell Computer Telephone System	12/16/99 11/11/99	0	0	
38	Table & Chairs	11/22/99	ő	0	
39	ELECTRIC PIANO	3/07/00	0	0	
40 41	CD WRITER PAPER SHREDDER	2/23/00 4/20/00	0	0	
42	PRINTER	10/12/00	ŏ	ő	
43	PRINTER	2/17/00	0	0	
45 46	CABINETS BOOKCASE	2/28/00 3/03/00	0	0	
47	FORD VAN	3/31/00	0	0	
48	Fax Machine 2 Chadwood Well Cobinets & 2 Resp Cobinet	3/21/01	0	0	
49 50	2 Chadwood Wall Cabinets & 2 Base Cabinet 1999 Ford XL Van	3/12/01 4/12/01	0	0	
51	Costumes	9/15/01	, 0	0	
52	Dell Dimension 2300	9/04/02	0	0	
53 54	Epson Stylus Printer Fax Machine	4/08/02 5/14/02	0	0	
56	Refrigerator & Stove	2/05/02	0	0	
57	2 U-Stations w/ Hutch & Bookcase	3/08/02	0	0	
58 59	10' Conference Table Building Renovation	4/11/02 3/01/02	0	0	
60	Telephone System	10/15/03	7,050	991	
61 62	Powerite 5300 LCD Projector Epson Scanner	1/29/03 10/27/03	1,000 225	110 31	
63	6 Black Leather Executive Chairs	9/25/03	468	61	
64	3 Back Mesh-Back Chairs	9/25/03	335	43	
65	150 Stack Chairs	12/13/03	5,640 12,452	793	
66 67	145 Teal/Wild Cherry Chairs Costumes	12/13/03 7/07/03	12,452 1,175	1,750 144	
68	New Shower - 1203 Bldg	9/30/04	8,830	227	
69	1203 Remodeling	3/11/04	2,161	56	

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		Date in		
Asset	Description	Service	Cost	TN
70	1203 Remodeling	3/29/04	750	20
71	Carpet - 1203 Bldg	12/29/04	750	131
72	Canon Digital Camera	1/29/04	675	130
73	Dell Computer - Dimension 3000	9/15/04	2,952	567
74	Powershot Digital Camera	7/12/04	380	73
75	60 Black Chairs	3/30/04	600	105
76	89 Black Chairs	6/30/04	930	162
77	Dell Computer (2.8GHz)	10/27/05	962	366
78	Refrigerator/Freezer/Warmer	12/19/05	5,055	1,392
79	Laminated Shelves	2/12/05	665	143
80	Mural Painting	11/07/05	8,175	2,252
81	Casework	12/05/05	3,570	983
82	2004 Honda Accord	11/10/05	16,790	6,380
			81,590	16,910
Other L	Depreciation:			
55	Windows XP	9/11/02	0	0
	Total Other Depreciation		0	0
	Total Other Depreciation		<u>_</u>	
	Total ACRS and Other Depreciation		0	0
	Grand Totals		81,590	16,910

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58-2198012 Federal Statements

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Form 990, Part I, Line 1a - Direct Public Support

Description		Cash		Noncash		Total	
Contributions from Schedule B	\$	234,273 214,413	\$	10,255	\$	234,273 224,668	
Total	\$	448,686	\$	10,255	\$	458,941	