# 2009 Exempt Org. Return prepared for:

### URBAN LEAGUE OF MIDDLE TENNESSEE 2250 ROSA L. PARKS BLVD NASHVILLE, TN 37228

Hoskins & Company PC 1900 Church Street Suite 200 Nashville, TN 37203

## Form **990-EZ**

2009

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service

Short Form
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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form
990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year
may use this form.

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

Open to Public Inspection

Α	For	r the 2009 calendar year, or tax year beginning 7/01 , 2009, and	endin	ig 6/30	)		, 2010
B	Che	ck if applicable:			D	mployer	Identification number
$\vdash$	3	ress change   Please use RS   URBAN LEAGUE OF MIDDLE TENNESSEE		62-07	795167		
-	7	le change   label or print or   2250 ROSA L. PARKS BLVD		elephone			
┝	1	NASHVILLE, TN 37228				615-2	254-0525
-	1	nination Specific Instruc-			1		
F	3	tication pending tions.			F (	Proup E	xemption ►
	1 1 1 1 1 1	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts	G	Accountin			Cash X Accrual
_		<b>-</b>					
1	Ma.	bsite: ► N/A	Н	Check ►	X i	f the or	ganization is not
',			.	required to 990-EZ, o	o attac r ggn.i	:h Sche ∍F\	dule B (Form 990,
		exempt status (check only one) $  X $ 501(c) (3) $\triangleleft$ (insert no.) $ A $ 4947(a)(1) or $ A $ 527 eck $\triangleright$ if the organization is not a section 509(a)(3) supporting organization and its				•	
	\$25	,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to f	s gros file a r	ss receipts eturn, be si	are no ure to f	ormally ile a cor	not more than
L	Add	Lines 5b, 6b, and 7b, to line 9 to determine gross receipts: if \$500,000 or more, file	Form	990			inploto totalii.
	ınst	ead of Form 990-EZ				, ▶\$	396,838.
Pa	irtil		ices	(See the	insti	ruction	ns for Part I.)
	1	Contributions, gifts, grants, and similar amounts received				1	179,604.
	2	Program service revenue including government fees and contracts				2	
	3	Membership dues and assessments					
	4	Investment income				4	
		a Gross amount from sale of assets other than inventory5a					
D		b Less: cost or other basis and sales expenses					
Ë		c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a).				5c	
REVENUE	6	at a series of the series of t	ieck he	re •			
ũ		a Gross revenue (not including \$ of contributions		045			
E	,	reported on line 1)		217,			
		b Less: direct expenses other than fundraising expenses		43,	021.		474 050
	7	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	• • • • •	• • • • • • • • • • • • • • • • • • • •		6c	174,063.
		b Less: cost of goods sold				- 1	
Ì		c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)					
	8	00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				7c	150
ł	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8			–⁄∵		150.
	10	Grants and similar amounts paid (attach schedule).				1	353,817.
-	11	Benefits paid to or for members				10	
EXPENSE	12	Salaries, other compensation, and employee benefits			,	11 12	228,372.
P	13	Professional fees and other payments to independent contractors.				13	7,750.
N	14	Occupancy, rent, utilities, and maintenance				14	48,048.
E S	15	Printing, publications, postage, and shipping				15	5,062.
3	16	Other expenses (describe ► See Statement 2				16	144,337.
1	17	Total expenses. Add lines 10 through 16			_, <b>≻</b>	17	433,569.
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)				18	-79,752.
A S E T S	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must a	aaree	with and o	f_vaar		107,7021
E S		figure reported on prior year's return)	,			19	-32,185.
S	20	Other changes in net assets or fund balances (attach explanation)				20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20.			►	21	<u>-111,937.</u>
rai	t	Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or mo					· · · · · · · · · · · · · · · · · · ·
22	C-24	(See the instructions for Part II.)	(A)	Beginning			(B) End of year
		sh, savings, and investmentsnd and buildings			,063		12,551.
23 24	Oth	ner assets (describe • See Statement 3 )			,845		15 604
	Tot	al assets (describe > See Statement 5 )	-		943		15,624.
		al liabilities (describe ► See Statement 4 )			, 851 , 731		28,175.
		assets or fund balances (line 27 of column (B) must agree with line 21)			185		140,112. -111,937.
		with the control of t		24,	LOJ	. 41	111,331.

Forr	n 990-EZ (2009) URBAN LEAGUE O	F 1	MIDDLE TENNESSEE		62	2-0	795167 Page <b>2</b>
Pa	rt III Statement of Program S	erv	ice Accomplishment	<b>s</b> (See the instruct	ions.)		Expenses
Desc	is the organization's primary exempt purpose? Cribe what was achieved in carrying out cribe the services provided, the number gram title.	OMI the of p	MUNITY SERVICES organization's exempt purpersons benefited, or other	poses. In a clear and c relevant information fo	oncise manner, or each	100 50 50 497 461	equired for section 1(c)(3) and (4) ganizations and section 47(a)(1) trusts; optional others.)
	See Statement 5					- 101	others.)
	(Grants \$ ) If	his	amount includes foreign g	rants, check here		28	a
29							
30	(Grants \$ ) If t					29	a
50						-	:
31	(Grants \$ ) If t Other program services (attach schedu	his i	amount includes foreign gr	rants, check here		30	a
	(Grants \$ ) If t	his a	amount includes foreign gr	rants, check here	▶ [7]	31	a
32	Total program service expenses (add	lines	328a through 31a)			32	
Par	tilV List of Officers, Directors	, T	rustees, and Key Em	ployees. List each or	ne even if not con	npen	sated, (See the instrs.)
	(a) Name and address	(b	) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	(d) Contributions employee benefit pla deferred compensa	s to ns and	(e) Expense account
225	RICIA STOKES O ROSA L. PARKS BLVD HVILLE, TN 37228	-	President & CEO 40.00	80,000.		0	0.
SAM	HOWARD CENTERVIEW DRIVE, SUITE	В0	Chairman 10.00	0.		0 .	0.
BRE VON	NTWOOD, TN 37027 ZELLA BRYANT		Treasurer	0.		0.	0.
NAS	O ROSA L PARKS BLVD HVILLE, TN 37228		5.00				
511	K PETERS UNION STREET, SUITE 2100 HVILLE, TN 37219-8966		Secretary 5.00	0.		0.	0.
		-					
				į			
			-				

Page 3

Ž.	art V Other Information (Note the statement requirements in the instrs for	Part V.)	See Sta	teme	ent	6
					Yes	No
3	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attace each activity			33		Х
3	the any energed made to the engantizing of governing documents: in Tes, attach a comol		~	34		Х
3	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), attach a statement explaining why the organization did not report the income on Form 990-T.	but not reported on Fe	orm 990-T,			
	a Did the organization have unrelated business gross income of \$1,000 or more or was it subjecting, and proxy tax requirements?		,	35 a		Х
	<b>b</b> If 'Yes,' has it filed a tax return on Form 990-T for this year?			35 b		
3	Did the organization undergo a liquidation, dissolution, termination, or significant disposition year? If 'Yes,' complete applicable parts of Schedule N	of net assets duri	ing the	36		v
37	7a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► b Did the organization file Form 1120-POL for this year?	37a	0.	37 b		X X
38	Ba Did the organization borrow from, or make any loans to, any officer, director, trustee, or key any such loans made in a prior year and still outstanding at the end of the period covered by		_	38 a		X
	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved.					
39	Section 501(c)(7) organizations. Enter:	380	N/A			
	a Initiation fees and capital contributions included on line 9	39a	N/A			
		39b	N/A			
40	a Section 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 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 49 transaction during the year or is it aware that it engaged in an excess benefit transaction with prior year, and that the transaction has not been reported on any of the organization's prior Yes,' complete Schedule L, Part I.	58 excess benefit a disqualified pe forms 990 or 990-	erson in a EZ? If	40 b		х
	c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958					
	d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		0.			
	e All organizations. At any time during the tax year, was the organization a party to a prohibited shelter transaction? If 'Yes,' complete Form 8886-T	d tax		40 e		X
41				100	l	
42	a The organization's					
	books are in care of ► SHIRLEY CLAY  Located at ► 2250 ROSA L. PARKS BLVD NASHVILLE TN	Telephone no. >		4-05	<u>25                                    </u>	<u>-</u>
	LOCALED AL 2230 ROSA II. FARRS BLVD WASHVILLE IN	- — — — ZIP + 4 ►	37228			· <b>–</b> –
	b At any time during the calendar year, did the organization have an interest in or a signature of financial account in a foreign country (such as a bank account, securities account, or other first of the foreign country:			42b	_	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Fina At any time during the calendar year, did the organization maintain an office outside of the U.  If 'Yes,' enter the name of the foreign country:	s.?	L	42 c		х_
	If 'Yes,' enter the name of the foreign country: ►					
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> — Che and enter the amount of tax-exempt interest received or accrued during the tax year	eck here	13	>		/A /A
44	Did the exceptration maintain any dense advised founds 2 K N . LT		Г	\Y	es l	Vo
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed of Form 990-EZ			4		<u>X_</u>
45	Is any related organization a controlled entity of the organization within the meaning of section Form 990 must be completed instead of Form 990-EZ	512(b)(13)? If 'Y	es,' 4	5		X
BAA	TEEA0812L 01/30/10			990.F		

i ai u vi	501(c)(3) organizations and se 46-49b and complete the table	ection 4947(a)(1) no	nevemnt charitable	e trusts must answe	niy. Ali se er questio	ction ns	
<b>46</b> Did	the organization engage in direct or indire	ect political campaign a	ctivities on habalf of an	in apposition to condid-		Yes	No
for	the organization engage in direct or indire public office? If 'Yes,' complete Schedule	C, Part I	Stattles out pelisu of of	opposition to candida	46		X
<b>47</b> Did	the organization engage in lobbying activi	ties? If 'Yes,' complete	Schedule C, Part II	• • • • • • • • • • • • • • • • • • • •	47		Х
<b>48</b> Is the	ne organization a school as described in s	ection 170(b)(1)(A)(ii)?	If 'Yes,' complete Sche	edule E	48		X
<b>49 a</b> Did	the organization make any transfers to ar	exempt non-charitable	related organization?.		49a		Х
b If 'Y	'es,' was the related organization a section	n 527 organization?			49b		
50 Con	nplete this table for the organization's five ployees) who each received more than \$10	highest componented a	malayaan (athan than	-Mana divinita di l			
	a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp accour other allo	t and	
None							····
<b>51</b> Com	I number of other employees paid over \$1 splete this table for the organization's five pensation from the organization. If there is	highest compansated in	dependent contractors	who each received mor	e than \$100	,000 o	f
	(a) Name and address of each independent contr	actor paid more than \$100,000		(b) Type of service	(c) Compe	nsation	
None_							
·							
					1		
1.00 4 1							
d lotai	number of other independent contractors	each receiving over \$10	00,000				
	Under penalties of perjury, I declare that I have examitive, correct, and complete. Declaration of preparer (o	ned this return, including accom ther than officer) is based on all	panying schedules and statem information of which preparer	ents, and to the best of my know has any knowledge.	vledge and belie	f, it is	
Sign Here	Signature of officer						
nere	1			Date			
	PATRICIA STOKES			President & CEO			
	Type or print name and title.						
Paid	Preparer's Harvey E. Hoski	E Ito	Date 3 3 30	A 1 3011 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	parer's Identifyin e instructions)	g Numbe	ег
re-	TIGITY E. HOSKI		3/31/20	employed ► P0	<u>0290898</u>		
arer's	Firm's name (or yours if self-		-				
Jse Only	employed), address, and Nachville TN 37				2-15191		
	ZIP + 4 NASHVIII e, TN 3/			Phone no. ► (615		33	
AA	S discuss this return with the preparer sho	wn above? See instruct	ions		►X Yes	No	_
MM					Form 990-E	7 (20)	ua)

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

#### Public Charity Status and Public Support

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

OMB No. 1545-0047 2009

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2009

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization

URBAN LEAGUE OF MIDDLE TENNESSEE 62-0795167 Part 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 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 4 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 5 170(b)(1)(A)(iv). (Complete Part II.) ĥ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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.) 7 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 9 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h. 11 b | Type II C Type III — Functionally integrated d | Type III- Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box..... Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? α Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?.... 11 g (i) a family member of a person described in (i) above?.... 11 g (ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above?..... 11 g (iii) Provide the following information about the supported organizations. (i) Name of Supported Organization (iii) Type of organization (described on lines 1-9 above or IRC section (see Instructions)) (iv) is the organization in col.
(i) listed in your (ii) EIN (v) Did you notify the organization in col. (i) of (vi) Is the organization in col. (i) organized in the U.S.? (vii) Amount of Support your support? governing document? Yes No Yes No Yes No BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

50	(Complete only if you check	red the box on lin	e 5, 7, or 8 of Par	t I.)			<u>.</u>
•	ction A. Public Support	1			1	1	
beg	endar year (or fiscal year linning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	229,548.	175,490.	405,200.	396,577.		1,206,815.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3	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						0.
4	Total. Add lines 1-through 3	229,548.	175,490.	405,200.	396,577.	(	). 1,206,815.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
	Public support. Subtract line 5 from line 4		40 (40 40 51). (C)40 40 50				1,206,815.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	229,548.	175,490.	405,200.	396,577.	0	1,206,815.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.	63.	74.	11.			148.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). See . Part . IV.	5,207.	121.		1,865.		7,193.
11	Total support. Add lines 7 through 10				180000 5.0		1,214,156.
12	Gross receipts from related activi						
	First five years. If the Form 990 i organization, check this box and	stop here		d, third, fourth, o	r fifth tax year as	a section 501(	,v/\3)
	tion C. Computation of Pub	olic Support P	ercentage				
	Public support percentage for 200 Public support percentage from 2			e 11, column (f)		14	
16 a	33-1/3 support test — 2009. If the and stop here. The organization of	organization did	not check the box	on line 13, and	the line 14 is 33-	1/3 % or more,	check this box
	33-1/3 support test — 2008. If the and stop here. The organization of						L1
	10%-facts-and-circumstances tes or more, and if the organization n the organization meets the 'facts-	neets the Tacts-al	na-circi imetancae'	tact chack this h	YAY AND CHAN KAYA	. Evoloin in Do	with IV / basses
	10%-facts-and-circumstances tes or more, and if the organization n organization meets the 'facts-and	neets the facts-ar -circumstances' t	nd-circumstances' lest. The organiza	test, check this bation qualifies as a	oox and <b>stop here</b> a publicly support	. Explain in Pa ted organization	irt IV how the
18	Private foundation. If the organiz	ation did not ched	k a box on line, 1	3, 16a, 16b, 17a,	or 17b, check thi	s box and see	instructions >
BAA							990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 URBAN LEAGUE OF MIDDLE TENNESSEE

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

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

	ction A. Public Support						
Cale	endar year (or fiscal yr beginning in) 🟲 👚	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')					(-)	(i) Total
2	Gross receipts from				<u> </u>		
_	admissions, merchandise sold		:				
	or services performed, or facilities furnished in a activity				1	]	
	that is related to the						
	organization's tax-exempt purpose					İ	
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf	1					
5	The value of services or						
	facilities furnished by a	ļ					
	governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1,	ļ					
	2, 3 received from disqualified persons.						
b	Amounts included on lines 2 and 3 received from other than						
	disqualified persons that						
	exceed the greater of 1% of the amount on line 13 for the				İ		
	year		i			•	
C	Add lines 7a and 7b						
8	Public support (Subtract line						····
	7c from line 6.)						
Sec	tion B. Total Support		***************************************	. 2002			
	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
	Amounts from line 6			(0, 200,	(4) 2000	(e) 2003	(i) Iotal
10 -					· · · · · · · · · · · · · · · · · · ·		
iva	Gross income from interest,						
ıva	dividends, payments received						
ıva	dividends, payments received on securities loans, rents, royalties and income form						
iva	dividends, payments received on securities loans, rents,						
	dividends, payments received on securities loans, rents, royalties and income form similar sources						
b	dividends, payments received on securities loans, rents, royalties and income form similar sources						
b	dividends, payments received on securities loans, rents, royalties and income form similar sources						
b	dividends, payments received on securities loans, rents, royalties and income form similar sources						
b c 11	dividends, payments received on securities loans, rents, royalties and income form similar sources						
b c 11	dividends, payments received on securities loans, rents, royalties and income form similar sources						
b c 11	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.						
b c 11	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.						
b 11 12	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in						
b 11 12	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
b c 11 12	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add lns 9, 10c, 11, and 12.)	s for the organiza	tion's first second	d third fourth	r fifth to wood		
b c 11 12 13 14	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add lins 9, 10c, 11, and 12.) irrst five years. If the Form 990 forganization, check this box and	stob nete		d, third, fourth, o	r fifth tax year as	a section 501(c)(3)	
b c c 11 12 13 14 Sect	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (add Ins 9, 10c, 11, and 12.)  First five years. If the Form 990 i organization, check this box and ion C. Computation of Pub	lic Support Po	ercentage			,	), <b>▶</b>
11 12 13 14 Sect 15	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (add lins 9, 10c, 11, and 12.)  First five years. If the Form 990 i organization, check this box and ion C. Computation of Public support percentage for 200	olic Support Po 19 (line 8, column	ercentage (f) divided by line	= 13, column (f)).			······ <u>}                              </u>
b c 11 12 13 14 Sect 15 16	dividends, payments received on securities loans, rents, royalties and income form similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add Ins 9, 10c, 11, and 12.)  First five years. If the Form 990 i organization, check this box and ion C. Computation of Public support percentage for 200 Public support percentage from 2	olic Support Po 09 (line 8, column 008 Schedule A, I	ercentage (f) divided by line Part III, line 15	= 13, column (f)).			)► [] % %
c 11 12 13 14 Sect 15 16 Sect	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10h, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (add lns 9, 10c, 11, and 12.)  First five years. If the Form 990 i organization, check this box and ion C. Computation of Public support percentage for 200 Public support percentage from 2 ion D. Computation of Investigation.	olic Support Po 19 (line 8, column 1908 Schedule A, lestment Incom	ercentage (f) divided by line Part III, line 15 re Percentage	e 13, column (f)).		15	<u>%</u>
c 11 12 13 14 Sect 15 16 Sect 17	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 5i1 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (add lns 9, 10c, 11, and 12.) First five years. If the Form 990 i organization, check this box and ion C. Computation of Public support percentage for 200 Public support percentage from 2 ion D. Computation of Inventores and income percentage for lose in the second in the support percentage from 2 ion D. Computation of Inventores and income percentage for lose in the second in the seco	olic Support Pe 09 (line 8, column 008 Schedule A, lestment Incom r 2009 (line 10c, c	ercentage (f) divided by line Part III, line 15 e Percentage column (f) divided	a 13, column (f)).	nn (f))		<u>%</u>
11 12 13 14 Sect 15 16 Sect 17 18	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support support percentage for 200 public support percentage from 2 in D. Computation of Investment income percentage for any support percentage for any	polic Support Polic Support Polic Support Polic Support Polic Schedule A, lestment Incomer 2009 (line 10c, com 2008 Schedule	ercentage  (f) divided by line Part III, line 15  The Percentage column (f) divided a A, Part III, line 1	e 13, column (f)).	nn (f))		% %
11 12 13 14 Sect 15 16 Sect 17 18	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support support percentage for 200 public support percentage from 2 in D. Computation of Investment income percentage for any support percentage for any	polic Support Polic Support Polic Support Polic Support Polic Schedule A, lestment Incomer 2009 (line 10c, com 2008 Schedule	ercentage  (f) divided by line Part III, line 15  The Percentage column (f) divided a A, Part III, line 1	e 13, column (f)).	nn (f))		% %
b c c 11 12 13 14 Sect 15 16 Sect 17 18 19 a :	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add lins 9, 10c, 11, and 12.) Institute support percentage for 200 public support percentage from 2 ion D. Computation of Investment income percentage for 133-1/3 support tests — 2009. If the ormore than 33-1/3%, check this box more than 34-1/3%, che	polic Support Polic Support Polic Support Polic Support Polic Schedule A, lestment Incomer 2009 (line 10c, com 2008 Schedule ganization did not cox and stop here.	ercentage  (f) divided by line Part III, line 15  The Percentage column (f) divided a A, Part III, line 1 theck the box on line The organization	by line 13, column (f))  by line 13, column (f)  the 14, and line 15 is qualifies as a pub	nn (f))s more than 33-1/3%		% % %
11 12 13 14 Sect 15 16 Sect 17 18 19 a 1 b 1	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support (add lins 9, 10c, 11, and 12.) in a support support percentage for 200 public support percentage from 2 in D. Computation of Investment income percentage for any support percentage for any	plic Support Polician S	ercentage  (f) divided by line Part III, line 15  The Percentage column (f) divided a A, Part III, line 1 check the box on line The organization I not check a box here. The organiz	by line 13, column (f))  by line 13, column (f)  the 14, and line 15 is qualifies as a public on line 14 or 19a, action qualifies as	nn (f))s more than 33-1/3% olicly supported or and line 16 is made a publicly suppor	15 16 17 18 o, and line 17 is not ganization	% % % and line 18

^	^	^	^
	f Ł	# 1	1.3
_			•

# Schedule A, Part IV - Supplemental Information

Page 5

**URBAN LEAGUE OF MIDDLE TENNESSEE** 

62-0795167

Nature and Source	2009	2008	2007	2006	2005
MISCELLANEOUS INCOME Total	\$ 0.\$	1,865. 1,865.	\$ 0.	121. \$ 121.	5,207. 5,207.

# SCHEDULE G (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2009

Department of the Treasury Internal Revenue Service

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 Form990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Name of the organization						Employer identific	ation number
URBAN LEAGUE OF MIDDLE T	ENNESSEE					62-079516	57
Part I Fundraising Activities. Comp	lete if the orga juired to compl	nization a	nswered '\ art.	Yes' to Form 990, Part	IV, line 1	7.	
1 Indicate whether the organization	raised funds th	rough any	of the foll	lowing activities. Check	all that	annly	
Mail solicitations				Solicitation of non-			
Internet and email solicitation	\$			Solicitation of gove		-	
Phone solicitations	•					granis	
In-person solicitations				Special fundraising	events		
2a Did the organization have written	or oral agreem	ant with a	ny individu	ot (including officers of			
2a Did the organization have written employees listed in Form 990, Par	rt VII) or entity	in connec	tion with p	rofessional fundraising	rectors, services	rustees or key	Yes No
b If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	dividuals or en	tities (fun					
-					(v) An	nount paid to	
(i) Name of individual or entity (fundraiser)	(ii) Activity (iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(or r fundra	etained by) iser listed in	(vi) Amount paid to (or retained by)	
		Yes	No.			col.(i)	organization
	İ	165	NO				
		1					
					1		
			<del>                                     </del>				
		1					
		1					
				•		ĺ	
					*****		
						ļ	
		l					
ļ			İ			:	
Total			▶				
3 List all states in which the organiza	ition is registere	ed or licer	sed to soli	icit funds or has been r	otified it	is exempt from	n registration
or licensing.							-
		·					
							·
		·					

Pa	art II	Fundraising Events. Complete if reported more than \$15,000 on F	the organization a	answered 'Yes' to F	orm 990 Part IV I	ine 18, or ater than \$5,000
Ŗ			(a) Event #1 ANNUAL GALA & (event type)	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))
REVENUE	1	Gross receipts				217,084
Ē	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)	217,084.			217,084
	4	Cash prizes				
_	5	Noncash prizes				
D I RECT	6	Rent/facility costs				
	7	Food and beverages				
E X P	8	Entertainment				
EXPESSES	9	Other direct expenses	43,021.			43,021.
S	10	Direct expense summary. Add lines 4- th	rough 9 in column (d).			43,021.
	11	Net income summary. Combine lines 3, combine lines 4, com	olumn (d) and line 10.		<b>&gt;</b>	174.063.
На	rtilli	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	tion answered 'Ye	s' to Form 990, Pai	rt IV, line 19, or re	ported more than
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
E	1	Gross revenue.				
D I RECT		Cash prizes				
T E S	4	Rent/facility costs				
	5	Other direct expenses			·	
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary. Add lines 2 thro	ugh 5 in column (d)			
	8	Net gaming income summary. Combine lin	nes 1, column (d) and	line 7	<b>&gt;</b>	
	Enter	r the state(s) in which the organization ope e organization licensed to operate gaming a	erates gaming activities	<b>:</b>		YES NO
		any of the organization's gaming licenses s,' explain:	revoked, suspended o	r terminated during the	tax year?	10a
11	Does	the organization operate gaming activities	with papershare?			
	Is the	e organization a grantor, beneficiary or trus	tee of a trust or a mer			11
BAA	admir	nister charitable gaming?	TEEA3702L 02	• • • • • • • • • • • • • • • • • • • •		<b>12</b> n 990 or 990-EZ) 2009

Scriedule G (Form 990 or 990-EZ) 20	ON OKDAM PRACOF	OF MIDDLE TENNESSEE	62-07951	67	F	age 3
12 Indicate the council			1 1		YES	
13 Indicate the percentage of gami						
a the organization's facility		**************************		4		
to Ari outside facility	· · · · · · · · · · · · · · · · · · ·		13b %			
14 Enter the name and address of	tne person who prepar	es the organization's gaming/special e	events books and records:			
Name: ►						
Address: ►						
15a Does the organization have a co	ntact with a third party	from whom the organization receives	gaming revenue?	15 a		<u> </u>
b if 'Yes,' enter the amount of gan	ning revenue received	by the organization \$	and the amount	134		
of gaming revenue retained by the	he third party \$		and the unloant			
c If 'Yes,' enter name and address	of the third party:					
Name: ►						
Address: -						
16 Gaming manager information						
Name - N						
Name:						
Gaming manager compensation	<b>.</b> ¢					
Gaming manager compensation	- 3					
Description of services provided:	<b>&gt;</b>					
bescription of services provided.	·					
Director/officer	Employee	Independent contractor				
17 Mandatory distributions						
a Is the organization required unde	r state law to make ch	aritable distributions from the gaming	proceeds to retain the	17.		
<b>b</b> Enter the amount of distributions	required under state 1a	aw to be distributed to other exempt or	roanizations or spent in the	17a		
organization's own exempt activit	ties during the tax year	: ►\$	rgameations or spent in the			
BAA		TEEA3703L 02/05/10	Schedule G (Form 99)	0 or 99	0.F <i>Z</i> N	2009
					/	

2009	Federal Statements	Page
	URBAN LEAGUE OF MIDDLE TENNESSEE	62-079516
Statement 1 Form 990-EZ, Part I, Line 8 Other Revenue MISCELLANEOUS INCOME.		150. 150.
Statement 2 Form 990-EZ, Part I, Line 1 Other Expenses	6	
BANK CHARGES COMPUTER TECHNOLOGY Conferences, Conventi CONTRACT LABOR Depreciation DUES AND SUBSCRIPTION EQUIPMENT RENTALS. Insurance Interest LICENSES AND FEES MISCELLANEOUS EXPENSE. Office Expenses. OTHER PROGRAM EXPENSES. REPAIRS AND MAINTENANO STIPEND EXPENSES. Supplies EXPENSES. TELEPHONE TRAINING MATERIALS. Travel UTILITIES.	sons, and Meetings  S  Total \$	2,930. 1,553. 1,901. 1,284. 21,979. 13,368. 9,751. 3,583. 9,323. 6,963. 345. 3,059. 475. 8,267183. 28,624. 2,495. 6,029. 795. 8,731. 11,479. 1,586. 144,337.
Statement 3 Form 990-EZ, Part II, Line 24 Other Assets  Accounts Receivable	### Beginning	Ending 1,550.
ART COLLECTION Furniture and Fixtures Machinery and Equipmen	2,000. 4,064. 11,197. eferred Charges. Total \$ 52,943. \$	2,000. 2,237. 6,212. 3,625. 15,624.

2009

### **Federal Statements**

Page 2

#### **URBAN LEAGUE OF MIDDLE TENNESSEE**

62-0795167

Statement 4 Form 990-EZ, Part II, Line 26 Total Liabilities

	<u>Beginning</u>	<u>Ending</u>
Accounts Payable and Accrued Expenses	2 526	/
Deferred Revenue Secured Mortgages and Notes Payable	0. 79,178.	13,500. 95,828. \$ 140,112.

Statement 5 Form 990-EZ, Part III, Line 28 Statement of Program Service Accomplishments

THE AGENCY OPERATES SEVERAL EMPLOYMENT AND EDUCATION PROGRAMS DESIGNED TO OFFER COMPUTER SOFTWARE TRAINING, JOB SEARCH ASSISTANCE, ADULT BASIC EDUCATION, RESUME PREPARATION, INTERVIEWING TECHNIQUES, ETC, TO COMMUNITY RESIDENCE AND LOW INCOME HOUSING TENANTS.

Statement 6 Form 990-EZ, Part V Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or	
indirectly, to pay premiums on a personal benefit contract?	No
(D) Did the organization, during the year, pay premiums, directly or	
indirectly, on a personal benefit contract?	No