

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

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

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OMB No. 1545-0047

**2010****Open to Public  
Inspection****A For the 2010 calendar year, or tax year beginning , and ending****B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization **Salama Fellowship Urban Ministries,  
Inc.**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

**1205 8th Avenue South**

Room/suite

City or town, state or country, and ZIP + 4

**Nashville TN 37203****D** Employer identification number**58-2198012****E** Telephone number**G** Gross receipts \$ **676,601****F** Name and address of principal officer:**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No



If "No," attach a list. (see instructions)

**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) **t** (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **u salamaserves.org****H(c)** Group exemption number **u****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other **u****L** Year of formation: **1993****M** State of legal domicile: **TN****Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities:		
	<b>Christian support for youth</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>18</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>18</b>
	<b>5</b> Total number of individuals employed in calendar year 2010 (Part V, line 2a)	<b>5</b>	<b>24</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>100</b>
<b>Revenue</b>	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0</b>
	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>747,223</b>	<b>676,599</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>77</b>	<b>2</b>
<b>Expenses</b>	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	<b>12</b> Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>747,300</b>	<b>676,601</b>
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)		
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<b>287,418</b>	<b>187,617</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>u</b>	<b>41,426</b>	
<b>Net Assets or Fund Balances</b>	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	<b>522,826</b>	<b>431,443</b>
	<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<b>810,244</b>	<b>619,060</b>
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>-62,944</b>	<b>57,541</b>
	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	<b>1,108,531</b>	<b>1,081,855</b>
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>652,705</b>	<b>691,925</b>	
		<b>455,826</b>	<b>389,930</b>

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>		Signature of officer		Date	
		Type or print name and title			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	<b>THOMAS M. PRICE</b>	<b>THOMAS M. PRICE</b>	<b>11/11/11</b>	<input type="checkbox"/>	<b>P00037312</b>
	Firm's name } <b>Price CPAs, PLLC</b>	Firm's EIN } <b>62-1016830</b>			
	Firm's address } <b>3825 Bedford Ave Ste 202 Nashville, TN 37215-2507</b>		Phone no. <b>615-385-0686</b>		

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2010)

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III ☒

1 Briefly describe the organization's mission:

**Christian support for youth**2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ **525,386** including grants of \$ ) (Revenue \$ )

**Salama Urban Ministries is a community-based church-sponsored youth organization in the Edgehill community of 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**

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses **u 525,386**

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<b>X</b>	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	<b>X</b>	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<b>X</b>
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		<b>X</b>
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		<b>X</b>
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		<b>X</b>
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<b>X</b>
<b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		<b>X</b>
<b>10</b> Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		<b>X</b>
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<b>X</b>	
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		<b>X</b>
<b>c</b> Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		<b>X</b>
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		<b>X</b>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<b>X</b>	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	<b>X</b>	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	<b>X</b>	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		<b>X</b>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		<b>X</b>
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV		<b>X</b>
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		<b>X</b>
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		<b>X</b>
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		<b>X</b>
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		<b>X</b>
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		<b>X</b>
<b>20a</b> Did the organization operate one or more hospitals? If "Yes," complete Schedule H		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		
<b>20b</b>		

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<b>21</b>	<b>X</b>
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<b>22</b>	<b>X</b>
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	<b>23</b>	<b>X</b>
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	<b>24a</b>	<b>X</b>
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<b>24d</b>	
<b>25a Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	<b>25a</b>	<b>X</b>
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	<b>25b</b>	<b>X</b>
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	<b>26</b>	<b>X</b>
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	<b>27</b>	<b>X</b>
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	<b>28a</b>	<b>X</b>
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	<b>28b</b>	<b>X</b>
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	<b>28c</b>	<b>X</b>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	<b>29</b>	<b>X</b>
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	<b>30</b>	<b>X</b>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	<b>31</b>	<b>X</b>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	<b>32</b>	<b>X</b>
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	<b>33</b>	<b>X</b>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	<b>34</b>	<b>X</b>
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)?	<b>35</b>	<b>X</b>
<b>a</b> Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	<b>36</b>	<b>X</b>
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	<b>37</b>	<b>X</b>
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	<b>38</b>	<b>X</b>

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response to any question in this Part V ☐

		Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<b>1a</b> 13		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>1b</b> 0		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>		
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 24		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	<b>2b</b>	X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>		X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<b>3b</b>		
<b>4a</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 account)?	<b>4a</b>		X
<b>b</b> If "Yes," enter the name of the foreign country: <b>u</b> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	<b>6a</b>		X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>		X
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>		X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>		X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>		X
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>		X
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>8</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the organization make any taxable distributions under section 4966?	<b>9a</b>		
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders	<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>14b</b>		

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI ☒ **X**

### Section A. Governing Body and Management

	1a	1b	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>18</b>			
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent		<b>18</b>		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<b>2</b>			<b>X</b>
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	<b>3</b>			<b>X</b>
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>			<b>X</b>
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>			<b>X</b>
<b>6</b> Does the organization have members or stockholders?	<b>6</b>			<b>X</b>
<b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	<b>7a</b>			<b>X</b>
<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	<b>7b</b>			<b>X</b>
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
<b>a</b> The governing body?	<b>8a</b>		<b>X</b>	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>		<b>X</b>	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	<b>9</b>			<b>X</b>

### Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
<b>10a</b> Does the organization have local chapters, branches, or affiliates?	<b>10a</b>	<b>X</b>
<b>b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	<b>10b</b>	
<b>11a</b> Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	<b>X</b>
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	<b>X</b>
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	<b>X</b>
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	<b>12c</b>	<b>X</b>
<b>13</b> Does the organization have a written whistleblower policy?	<b>13</b>	<b>X</b>
<b>14</b> Does the organization have a written document retention and destruction policy?	<b>14</b>	<b>X</b>
<b>15</b> Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15a</b>	<b>X</b>
<b>b</b> Other officers or key employees of the organization	<b>15b</b>	<b>X</b>
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>	<b>X</b>
<b>b</b> If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	<b>16b</b>	

### Section C. Disclosure

**17** List the states with which a copy of this Form 990 is required to be filed **u TN**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **u Salama Urban Ministries 1205 8th Avenue S Nashville TN 37203**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) John Anderson Director	1.00	X						0	0	0
(2) Roy Carter Director	1.00	X						0	0	0
(3) Hunter Connelly Director	1.00	X						0	0	0
(4) Stephen Handy Director	1.00	X						0	0	0
(5) Joyce Harris Director	1.00	X						0	0	0
(6) Bill Hawkins Director	1.00	X						0	0	0
(7) Mark Kimbrough Director	1.00	X						0	0	0
(8) Wade McGregor Director	1.00	X						0	0	0
(9) Natasha Metcalf Director	1.00	X						0	0	0
(10) Pam Morris Director	1.00	X						0	0	0
(11) Jeff Orr Director	1.00	X						0	0	0
(12) Rivers Rutherford Director	1.00	X						0	0	0
(13) Harold Shannon Director	1.00	X						0	0	0
(14) Barby White Director	1.00	X						0	0	0
(15) Barry Warner President	1.00			X				0	0	0
(16) Dan Daniel Vice-President	1.00			X				0	0	0

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17) <b>Rusty Benton</b> <b>Treasurer</b>	<b>1.00</b>			<b>X</b>				<b>0</b>	<b>0</b>	<b>0</b>
(18) <b>Gloria Towner</b> <b>Secretary</b>	<b>1.00</b>			<b>X</b>				<b>0</b>	<b>0</b>	<b>0</b>
(19) .....										
(20) .....										
(21) .....										
(22) .....										
(23) .....										
(24) .....										
(25) .....										
(26) .....										
(27) .....										
(28) .....										
<b>1b Sub-total</b> .....	<b>u</b>									
<b>c Total from continuation sheets to Part VII, Section A</b> .....	<b>u</b>									
<b>d Total (add lines 1b and 1c)</b> .....	<b>u</b>									

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **u 0**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .....		<b>X</b>
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual .....		<b>X</b>
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person .....		<b>X</b>

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **u**

0



**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b> Federated campaigns .....	<b>1a</b>				
	<b>b</b> Membership dues .....	<b>1b</b>				
	<b>c</b> Fundraising events .....	<b>1c</b>				
	<b>d</b> Related organizations .....	<b>1d</b>				
	<b>e</b> Government grants (contributions) ..	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	<b>676,599</b>			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....					
<b>h</b> <b>Total.</b> Add lines 1a-1f .....	<b>u</b>	<b>676,599</b>				
<b>Program Service Revenue</b>	<b>2a</b> .....	<b>Busn. Code</b>				
	<b>b</b> .....					
	<b>c</b> .....					
	<b>d</b> .....					
	<b>e</b> .....					
	<b>f</b> All other program service revenue .....					
	<b>g</b> <b>Total.</b> Add lines 2a-2f .....	<b>u</b>				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....	<b>u</b>	<b>2</b>			<b>2</b>
	<b>4</b> Income from investment of tax-exempt bond proceeds .....	<b>u</b>				
	<b>5</b> Royalties .....	<b>u</b>				
		(i) Real	(ii) Personal			
	<b>6a</b> Gross Rents .....					
	<b>b</b> Less: rental exps. ....					
	<b>c</b> Rental inc. or (loss) .....					
	<b>d</b> Net rental income or (loss) .....	<b>u</b>				
	<b>7a</b> Gross amount from sales of assets other than inventory .....	(i) Securities	(ii) Other			
	<b>b</b> Less: cost or other basis & sales exps. ....					
	<b>c</b> Gain or (loss) .....					
	<b>d</b> Net gain or (loss) .....	<b>u</b>				
	<b>8a</b> Gross income from fundraising events (not including \$ ..... of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>				
	<b>b</b> Less: direct expenses .....	<b>b</b>				
	<b>c</b> Net income or (loss) from fundraising events .....	<b>u</b>				
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>				
	<b>b</b> Less: direct expenses .....	<b>b</b>				
	<b>c</b> Net income or (loss) from gaming activities .....	<b>u</b>				
	<b>10a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>				
	<b>b</b> Less: cost of goods sold .....	<b>b</b>				
<b>c</b> Net income or (loss) from sales of inventory .....	<b>u</b>					
<b>Miscellaneous Revenue</b>		<b>Busn. Code</b>				
<b>11a</b> .....						
<b>b</b> .....						
<b>c</b> .....						
<b>d</b> All other revenue .....						
<b>e</b> <b>Total.</b> Add lines 11a-11d .....	<b>u</b>					
<b>12</b> <b>Total revenue.</b> See instructions. ....	<b>u</b>	<b>676,601</b>	<b>0</b>	<b>0</b>	<b>2</b>	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.  
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	173,961	160,186	13,775	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	13,656	12,602	1,054	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	2,531			2,531
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	600	600		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	22,874	21,974	900	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	62,958	59,828	3,130	
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a <b>Students Incentives</b>	46,500	46,500		
b <b>Vehicle Expense</b>	39,689	39,065	624	
c <b>Utilities</b>	25,462	23,851	1,611	
d <b>Special Events</b>	18,544	82		18,462
e <b>Professional Fees</b>	17,954	14,627	694	2,633
f All other expenses	194,331	146,071	30,460	17,800
25 Total functional expenses. Add lines 1 through 24f	619,060	525,386	52,248	41,426
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash—non-interest bearing .....	35,280	1	79,613
	2 Savings and temporary cash investments .....		2	
	3 Pledges and grants receivable, net .....		3	
	4 Accounts receivable, net .....		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....		8	
	9 Prepaid expenses and deferred charges .....	8,480	9	1,239
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 1,570,117		
	b Less: accumulated depreciation .....	10b 572,974	10c	997,143
	11 Investments—publicly traded securities .....	5,019	11	
	12 Investments—other securities. See Part IV, line 11 .....		12	
	13 Investments—program-related. See Part IV, line 11 .....		13	
	14 Intangible assets .....		14	3,860
	15 Other assets. See Part IV, line 11 .....		15	
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	1,108,531	16	1,081,855	
<b>Liabilities</b>	17 Accounts payable and accrued expenses .....	131,080	17	93,643
	18 Grants payable .....		18	
	19 Deferred revenue .....		19	61,667
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....		23	
	24 Unsecured notes and loans payable to unrelated third parties .....		24	
	25 Other liabilities. Complete Part X of Schedule D .....	521,625	25	536,615
	26 <b>Total liabilities.</b> Add lines 17 through 25 .....	652,705	26	691,925
	<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>		
27 Unrestricted net assets .....		455,826	27	389,930
28 Temporarily restricted net assets .....			28	
29 Permanently restricted net assets .....			29	
<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
30 Capital stock or trust principal, or current funds .....			30	
31 Paid-in or capital surplus, or land, building, or equipment fund .....			31	
32 Retained earnings, endowment, accumulated income, or other funds .....			32	
33 <b>Total net assets or fund balances</b> .....		455,826	33	389,930
34 <b>Total liabilities and net assets/fund balances</b> .....	1,108,531	34	1,081,855	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	<b>676,601</b>
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	<b>619,060</b>
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<b>57,541</b>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	<b>455,826</b>
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	<b>-123,437</b>
<b>6</b>	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	<b>389,930</b>

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant?		<b>X</b>
<b>b</b> Were the organization's financial statements audited by an independent accountant?	<b>X</b>	
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	<b>X</b>	
<b>d</b> If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		<b>X</b>
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Form **990** (2010)

**SCHEDULE A**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service**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.

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

OMB No. 1545-0047

**2010**Open to Public  
InspectionName of the organization **Salama Fellowship Urban Ministries, Inc.**Employer identification number  
**58-2198012****Part I 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.)

- 1 ☒ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☐ 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.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I    b ☐ Type II    c ☐ Type III—Functionally integrated    d ☐ Type III—Other
- e ☐ 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 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) 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? .....
- (ii) A family member of a person described in (i) above? .....
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? .....

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(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 governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

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

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
<b>5</b> 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)						
<b>6</b> Public support. Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions)					<b>12</b>	

**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	%
<b>15</b> Public support percentage from 2009 Schedule A, Part II, line 14	<b>15</b>	%
<b>16a 33 1/3% support test—2010.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 33 1/3% support test—2009.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2010.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2009.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.  
If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.) .....						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) .....						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2009 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2010</b> (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2009</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**b 33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .....

**Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).



**SCHEDULE D  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**u Complete if the organization answered "Yes," to Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

u Attach to Form 990. u See separate instructions.

OMB No. 1545-0047

**2010**Open to Public  
Inspection

Name of the organization

**Salama Fellowship Urban Ministries,  
Inc.**

Employer identification number

**58-2198012****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year u .....

4 Number of states where property subject to conservation easement is located u .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year u .....

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year u \$ .....

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 u \$ .....

(ii) Assets included in Form 990, Part X u \$ .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 u \$ .....

b Assets included in Form 990, Part X u \$ .....

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

**3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** ☐ Public exhibition  
**b** ☐ Scholarly research  
**c** ☐ Preservation for future generations  
**d** ☐ Loan or exchange programs  
**e** ☐ Other .....

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
<b>c</b> Beginning balance .....	<b>1c</b>
<b>d</b> Additions during the year .....	<b>1d</b>
<b>e</b> Distributions during the year .....	<b>1e</b>
<b>f</b> Ending balance .....	<b>1f</b>

**2a** Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance .....					
<b>b</b> Contributions .....					
<b>c</b> Net investment earnings, gains, and losses .....					
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....					
<b>f</b> Administrative expenses .....					
<b>g</b> End of year balance .....					

**2** Provide the estimated percentage of the year end balance held as:

- a** Board designated or quasi-endowment **u** ..... %  
**b** Permanent endowment **u** ..... %  
**c** Term endowment **u** ..... %

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations .....  
**(ii)** related organizations .....

**b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? .....

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

**4** Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land .....				
<b>b</b> Buildings .....				
<b>c</b> Leasehold improvements .....				
<b>d</b> Equipment .....				
<b>e</b> Other .....				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) <b>u</b>				

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		

**Total.** (Column (b) must equal Form 990, Part X, col. (B) line 12.) **u****Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

**Total.** (Column (b) must equal Form 990, Part X, col. (B) line 13.) **u****Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

**Total.** (Column (b) must equal Form 990, Part X, col. (B) line 15.) **u****Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) <b>Note Payable - Current</b>	<b>425,336</b>
(3) <b>Line of Credit - Current</b>	<b>100,500</b>
(4) <b>Related Party Payable</b>	<b>10,000</b>
(5) <b>Payroll Taxes Withheld</b>	<b>779</b>
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) <b>u</b>	<b>536,615</b>

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	676,601
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	619,060
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	57,541
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	-123,437
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	-123,437
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-65,896

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	929,298
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	252,697
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	252,697
3	Subtract line 2e from line 1	3	676,601
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	676,601

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	995,194
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	376,134
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	376,134
3	Subtract line 2e from line 1	3	619,060
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	619,060

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**Part X - Liability Under FIN 48 Footnote**

None noted.

## Part XIV Supplemental Information (continued)

**SCHEDULE O**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.☒ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2010**Open to Public  
Inspection

Name of the organization

**Salama Fellowship Urban Ministries,  
Inc.**

Employer identification number

**58-2198012****Form 990, Part III, Line 4a - First Achievement**

them in developing self-confidence, self-esteem and

ultimately self-sufficiency in Christ Jesus.

**Form 990, Part VI, Line 11b - Organization's Process to Review Form 990**

No review was or will be conducted

**Form 990, Part VI, Line 15a - Compensation Process for Top Official**

Compensation is formulated by the Executive Committee and the HR Committee

of the Board and put forth to the board for full approval. Based on

comparability data and market research on other local non profits with

similar mission fit. The local Center for Non Profit Management has

research on salaries for non profits in Nashville. Review of the employees

of quality management processes and outcomes are reviewed to determine

effectiveness.

**Form 990, Part VI, Line 15b - Compensation Process for Officers**

Employees quality management processes and outcomes are reviewed by

administration and an outside evaluator. Recommendation brought before the

HR committee and then forwarded to the Board for final approval.

**Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation**

No documents available to the public

**Form 990, Part IX, Line 24f - Other Expenses**

Name of the organization

**Salama Fellowship Urban Ministries,**

Employer identification number

**58-2198012**

Description	Amount
Sound&Lights Eng	\$ 16,136
Bad Debt Expense	\$ 13,100
Set Construction	\$ 12,300
Repairs & Maintenance	\$ 12,152
Food	\$ 11,820
Copy Machine	\$ 10,871
Janitorial Service	\$ 9,062
Miscellaneous	\$ 8,250
Telephone	\$ 7,466
Insurance	\$ 6,961
Equipment Rental	\$ 6,633
Continuous Improvement	\$ 6,520
Postage	\$ 6,431
Costume Company Expense	\$ 6,000
Supplies & Curriculum	\$ 5,992
Printing	\$ 5,324
Musicians-Contract Servs	\$ 4,875
Office Supplies	\$ 4,245
College Student Support	\$ 4,139
Computer Expense	\$ 4,092
Accounting Expense	\$ 3,632
Cable/Internet Expense	\$ 3,461
College and Career Prep	\$ 3,438
Dues and Subscriptions	\$ 2,773
Support-Contract Servs	\$ 2,525
Donations and Benevolence	\$ 2,445

Name of the organization

**Salama Fellowship Urban Ministries,**

Employer identification number

**58-2198012**

Travel	\$	1,813
--------	----	-------

Music	\$	1,561
-------	----	-------

Janitorial Supplies	\$	1,471
---------------------	----	-------

Public Relations	\$	1,126
------------------	----	-------

Hospitality	\$	1,090
-------------	----	-------

Promotion	\$	1,043
-----------	----	-------

Staff Development	\$	1,029
-------------------	----	-------

Media Expense	\$	1,000
---------------	----	-------

Transportation	\$	825
----------------	----	-----

Taxes and Licenses	\$	651
--------------------	----	-----

Volunteer Gifts	\$	598
-----------------	----	-----

Staff Expense	\$	542
---------------	----	-----

Activity	\$	425
----------	----	-----

Kitchen Supplies	\$	298
------------------	----	-----

Group Insurance	\$	155
-----------------	----	-----

Field Trips	\$	61
-------------	----	----

Form 990, Part XI, Line 5 - Other Changes in Net Assets Explanation

Donated Services - See Schedule D.



Form **4562**  
Department of the Treasury  
Internal Revenue Service

**Depreciation and Amortization**  
(Including Information on Listed Property)

OMB No. 1545-0172

**2010**Attachment  
Sequence No. **67**

(99)

☐ See separate instructions.☒ Attach to your tax return.Name(s) shown on return **Salama Fellowship Urban Ministries, Inc.**Identifying number  
**58-2198012**

Business or activity to which this form relates

**Indirect Depreciation****Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	<b>500,000</b>
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	<b>2,000,000</b>
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011. 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.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	<b>3,039</b>

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	<b>59,568</b>
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	<b>Total.</b> Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	<b>62,607</b>
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**For Paperwork Reduction Act Notice, see separate instructions.**Form **4562** (2010)

**Salama Fellowship Urban Ministries, 58-2198012**

Form 4562 (2010)

Page **2****Part V Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A—Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)

<b>24a</b> Do you have evidence to support the business/investment use claimed?				<b>Yes</b>	<b>No</b>	<b>24b</b> If "Yes," is the evidence written?				<b>Yes</b>	<b>No</b>
<b>(a)</b> Type of property (list vehicles first)	<b>(b)</b> Date placed in service	<b>(c)</b> Business/ investment use percentage	<b>(d)</b> Cost or other basis	<b>(e)</b> Basis for depreciation (business/investment use only)		<b>(f)</b> Recovery period	<b>(g)</b> Method/ Convention	<b>(h)</b> Depreciation deduction	<b>(i)</b> Elected section 179 cost		
<b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) .....									<b>25</b>		
<b>26</b> Property used more than 50% in a qualified business use:											
		%									
		%									
<b>27</b> Property used 50% or less in a qualified business use:											
		%					S/L-				
		%					S/L-				
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .....									<b>28</b>		
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1 .....									<b>29</b>		

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	<b>(a)</b> Vehicle 1	<b>(b)</b> Vehicle 2	<b>(c)</b> Vehicle 3	<b>(d)</b> Vehicle 4	<b>(e)</b> Vehicle 5	<b>(f)</b> Vehicle 6
<b>30</b> Total business/investment miles driven during the year ( <b>do not</b> include commuting miles) .....						
<b>31</b> Total commuting miles driven during the year .....						
<b>32</b> Total other personal (noncommuting) miles driven .....						
<b>33</b> Total miles driven during the year. Add lines 30 through 32 .....						
<b>34</b> Was the vehicle available for personal use during off-duty hours? .....	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person? .....						
<b>36</b> Is another vehicle available for personal use? .....						

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions).

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? .....	<b>Yes</b>	<b>No</b>
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners .....		
<b>39</b> Do you treat all use of vehicles by employees as personal use? .....		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? .....		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) .....		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

**Part VI Amortization**

<b>(a)</b> Description of costs	<b>(b)</b> Date amortization begins	<b>(c)</b> Amortizable amount	<b>(d)</b> Code section	<b>(e)</b> Amortization period or percentage	<b>(f)</b> Amortization for this year
<b>42</b> Amortization of costs that begins during your 2010 tax year (see instructions):					
<b>Loan Costs</b>	<b>11/29/10</b>	<b>4,211</b>	<b>197</b>	<b>2.0</b>	<b>351</b>
<b>43</b> Amortization of costs that began before your 2010 tax year .....					<b>43</b>
<b>44</b> <b>Total.</b> Add amounts in column (f). See the instructions for where to report .....					<b>44</b>
					<b>351</b>

58-2198012

**Federal Asset Report**

FYE: 12/31/2010

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
<b>Prior MACRS:</b>												
1	SURGE PROTECTOR	10/16/96	54				54	7	HY	200DB	54	0
2	46X60 CHAIR MAT	10/16/96	98				98	7	HY	200DB	98	0
3	Desk	6/30/96	800				800	7	HY	200DB	800	0
4	Credenza	6/30/96	600				600	7	HY	200DB	600	0
5	Conference Chairs (6)	6/30/96	600				600	7	HY	200DB	600	0
6	Office Chairs (3)	6/30/96	1,050				1,050	7	HY	200DB	1,050	0
7	Office Chair	6/30/96	100				100	7	HY	200DB	100	0
8	Table and Chairs (4)	6/30/96	500				500	7	HY	200DB	500	0
9	RAMP	1/26/96	685				685	7	HY	200DB	685	0
10	ARCHITECT SERVICES	1/30/96	3,130				3,130	7	HY	200DB	3,130	0
11	PRINTER	10/08/96	600				600	5	HY	200DB	600	0
12	Computer	6/30/96	2,000				2,000	5	HY	200DB	2,000	0
13	HP lazer Jet Printer	1/16/97	800				800	5	HY	200DB	800	0
14	CARPET	5/16/97	1,100				1,100	7	HY	200DB	1,100	0
15	HP LASERJET 6LSE	5/13/97	406				406	5	HY	200DB	406	0
16	Refrigerator	6/23/97	640				640	5	HY	200DB	640	0
17	Two Drawer File Cabinet	6/30/97	93				93	7	HY	200DB	93	0
18	Laminator	6/30/97	1,295				1,295	7	HY	200DB	1,295	0
19	Laminator Cabinet	6/30/97	250				250	7	HY	200DB	250	0
20	CAMCORDER	6/11/98	750				750	7	HY	200DB	750	0
21	CAMERA PENTAX	6/11/98	360				360	7	HY	200DB	360	0
22	COMPUTER MONITOR	6/22/98	476				476	5	HY	200DB	476	0
23	EPSON PRINTER	12/15/98	530				530	5	HY	200DB	530	0
24	MONITOR AND SCANNER	12/15/98	725				725	5	HY	200DB	725	0
25	STACKING CHAIRS AND STORAGE CA	3/06/98	2,160				2,160	7	HY	200DB	2,160	0
26	G.E. 31" TV	11/06/98	150				150	7	HY	200DB	150	0
27	CONCRETE SLAB	2/26/98	2,200				2,200	7	HY	200DB	2,200	0
28	Paper Shredder	2/11/99	223				223	5	MQ	200DB	223	0
29	Gateway Computer	2/11/99	2,538				2,538	5	MQ	200DB	2,538	0
30	27" TV and VCR	5/05/99	560				560	7	MQ	200DB	560	0
31	Printer	8/12/99	300				300	5	MQ	200DB	300	0
32	2 Dell Computers	9/30/99	3,747				3,747	5	MQ	200DB	3,747	0
33	Gateway Computer	7/30/99	2,671				2,671	5	MQ	200DB	2,671	0
34	Color Copier	11/04/99	600				600	5	MQ	200DB	600	0
35	Paper Cutter	12/09/99	238				238	5	MQ	200DB	238	0
36	Dell Computer	12/16/99	1,895				1,895	5	MQ	200DB	1,895	0
37	Telephone System	11/11/99	7,162				7,162	7	MQ	200DB	7,162	0
38	Table & Chairs	11/22/99	1,987				1,987	7	MQ	200DB	1,987	0
39	ELECTRIC PIANO	3/07/00	2,189				2,189	5	HY	200DB	2,189	0
40	CD WRITER	2/23/00	303				303	5	HY	200DB	303	0
41	PAPER SHREDDER	4/20/00	82				82	5	HY	200DB	82	0
42	PRINTER	10/12/00	200				200	5	HY	200DB	200	0
43	PRINTER	2/17/00	158				158	5	HY	200DB	158	0
45	CABINETS	2/28/00	852				852	7	HY	200DB	852	0
46	BOOKCASE	3/03/00	149				149	7	HY	200DB	149	0
47	FORD VAN	3/31/00	39,408				39,408	5	HY	200DB	39,408	0
49	2 Chadwood Wall Cabinets & 2 Base Cabin	3/12/01	519				519	7	HY	200DB	519	0
50	1999 Ford XL Van	4/12/01	12,400				12,400	5	HY	200DB	12,400	0
51	Costumes	9/15/01	15,000			X	10,500	5	HY	200DB	15,000	0
52	Dell Dimension 2300	9/04/02	3,595			X	2,516	5	HY	200DB	3,595	0
53	Epson Stylus Printer	4/08/02	255			X	179	5	HY	200DB	255	0
54	Fax Machine	5/14/02	360			X	252	5	HY	200DB	360	0
56	Refrigerator & Stove	2/05/02	2,576			X	1,803	5	HY	200DB	2,576	0
57	2 U-Stations w/ Hutch & Bookcase	3/08/02	825			X	577	7	HY	200DB	825	0
58	10' Conference Table	4/11/02	450			X	315	7	HY	200DB	450	0
59	Building Renovation	3/01/02	690,187				690,187	39	MMS/L		137,890	17,697
60	Telephone System	10/15/03	7,050				7,050	7	MQ	200DB	6,511	539
61	Powerite 5300 LCD Projector	1/29/03	1,000				1,000	5	MQ	200DB	1,000	0
62	Epson Scanner	10/27/03	225				225	5	MQ	200DB	225	0
63	6 Black Leather Executive Chairs	9/25/03	468				468	7	MQ	200DB	442	26
64	3 Back Mesh-Back Chairs	9/25/03	335				335	7	MQ	200DB	317	18
65	150 Stack Chairs	12/13/03	5,640				5,640	7	MQ	200DB	5,209	431
66	145 Teal/Wild Cherry Chairs	12/13/03	12,452				12,452	7	MQ	200DB	11,500	952
67	Costumes	7/07/03	1,175				1,175	5	MQ	200DB	1,175	0
68	New Shower - 1203 Bldg	9/30/04	8,830				8,830	39	MMS/L		1,198	226
69	1203 Remodeling	3/11/04	2,161				2,161	39	MMS/L		321	55
70	1203 Remodeling	3/29/04	750				750	39	MMS/L		111	20
71	Carpet - 1203 Bldg	12/29/04	750				750	7	HY	200DB	650	67

58-2198012

**Federal Asset Report**

FYE: 12/31/2010

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv Meth	Prior	Current
72	Canon Digital Camera	1/29/04	675				675	5 HY 200DB	675	0
73	Dell Computer - Dimension 3000	9/15/04	2,952				2,952	5 HY 200DB	2,952	0
74	Powershot Digital Camera	7/12/04	380				380	5 HY 200DB	380	0
75	60 Black Chairs	3/30/04	600				600	7 HY 200DB	520	53
76	89 Black Chairs	6/30/04	930				930	7 HY 200DB	806	83
77	Dell Computer (2.8GHz)	10/27/05	962				962	5 MQ200DB	870	92
78	Refrigerator/Freezer/Warmer	12/19/05	5,055				5,055	7 MQ200DB	3,786	441
79	Laminated Shelves	2/12/05	665				665	7 MQ200DB	542	58
80	Mural Painting	11/07/05	8,175				8,175	7 MQ200DB	6,123	714
81	Casework	12/05/05	3,570				3,570	7 MQ200DB	2,674	312
82	2004 Honda Accord	11/10/05	16,790				16,790	5 MQ200DB	15,182	1,608
83	Southbend Range - Oven	6/30/06	4,287				4,287	7 MQ200DB	3,004	380
84	Fax Machine	7/20/06	161				161	7 MQ200DB	109	15
85	Laptop	6/15/06	1,233				1,233	5 MQ200DB	1,040	140
86	Computer Equipment	9/25/06	662				662	5 MQ200DB	540	75
87	Computer Equipment	9/25/06	43				43	5 MQ200DB	35	5
88	Roland Piano (2)	11/03/06	2,782				2,782	7 MQ200DB	1,804	279
89	Whiteboards and Equioment	10/19/06	6,130				6,130	7 MQ200DB	3,976	615
90	Leather Highback Chair (8)	10/19/06	2,437				2,437	7 MQ200DB	1,580	245
91	Highback Chair (2)	11/15/06	590				590	7 MQ200DB	383	59
92	Indiana Desk Board	11/15/06	1,213				1,213	7 MQ200DB	787	122
93	Picture Frame	11/27/06	350				350	7 MQ200DB	227	35
94	New Sidewalk	2/21/06	334				334	15 MQ150DB	112	22
95	Gas Line for Stove	6/30/06	1,292				1,292	15 MQ150DB	409	88
96	Thermostat	1/06/06	1,921				1,921	15 MQ150DB	643	128
97	Carpet - 1213 8th Ave. South	6/20/07	5,198				5,198	7 HY 200DB	2,925	649
98	7.5 ton A/C Unit - 1213 8th Ave.	6/05/07	3,043				3,043	15 HY 150DB	701	234
99	Magazine Displays	2/16/07	465				465	7 HY 200DB	262	58
100	Laptop Cart	2/28/07	1,920				1,920	7 HY 200DB	1,080	240
101	Office Furniture	3/24/07	1,344				1,344	7 HY 200DB	756	168
102	File Cabinet, Book Case	3/25/07	475				475	7 HY 200DB	267	60
103	Bookcase	2/22/07	174				174	7 HY 200DB	98	21
104	Palladio Buffet	3/21/07	1,745				1,745	7 HY 200DB	982	218
105	Mini Mobile Unit	7/10/07	543				543	7 HY 200DB	305	68
106	Hufcor 3500	7/06/07	3,780				3,780	7 HY 200DB	2,127	472
107	15 Dell computers	5/23/07	12,832				12,832	5 HY 200DB	9,137	1,478
108	Dell Laser Printer	5/23/07	458				458	5 HY 200DB	326	53
110	Dell Printer	5/23/07	458				458	5 HY 200DB	326	53
111	Dell PC	5/25/07	1,960				1,960	5 HY 200DB	1,395	226
112	Microsoft Server	6/04/07	3,255				3,255	5 HY 200DB	2,317	375
113	Flash Drive	6/06/07	784				784	5 HY 200DB	558	91
114	Netgear	4/27/07	415				415	5 HY 200DB	295	48
115	Faceplate and Doorcloser	9/12/07	1,166				1,166	7 HY 200DB	656	145
116	Camera System	9/30/07	625				625	7 HY 200DB	352	78
117	Screen Protector	6/04/07	934				934	5 HY 200DB	665	108
118	Dell Printer	6/20/07	561				561	5 HY 200DB	399	65
119	Server Stand	6/21/07	468				468	7 HY 200DB	263	59
120	NetGear	6/15/07	2,865				2,865	5 HY 200DB	2,040	330
121	Sharp Stereo Equipment	8/02/07	7,776				7,776	7 HY 200DB	4,376	971
122	Sharp Case	8/07/07	202				202	7 HY 200DB	114	25
123	Sony Equipment	6/08/07	870				870	7 HY 200DB	490	108
124	Pro Team Motor	6/11/07	450				450	7 HY 200DB	253	56
125	Access Control System	7/18/07	26,745				26,745	7 HY 200DB	15,049	3,342
126	Smartpro Control Equipment	6/21/07	1,142				1,142	7 HY 200DB	643	143
127	Access Control System	4/30/07	13,173				13,173	7 HY 200DB	7,412	1,646
128	Telephone System	5/09/07	2,131				2,131	7 HY 200DB	1,199	266
129	Dell Laptop	2/21/07	1,595				1,595	5 HY 200DB	1,136	183
130	Dell Laptop	2/21/07	4,497				4,497	5 HY 200DB	3,202	518
131	Camera	12/04/07	380				380	7 HY 200DB	214	47
132	Tracking for Laptops	12/10/07	4,450				4,450	5 HY 200DB	3,168	513
133	Dell Computers	4/20/07	13,290				13,290	5 HY 200DB	9,462	1,531
134	Dell Computers	4/20/07	13,290				13,290	5 HY 200DB	9,462	1,531
135	Computer Equipment	4/20/07	413				413	5 HY 200DB	294	47
136	Computer Case	4/20/07	458				458	7 HY 200DB	257	58
137	Computer Cart	4/20/07	1,364				1,364	7 HY 200DB	767	171
145	Windows server	6/04/07	5,381				5,381	5 HY 200DB	3,831	620
146	Computer Equipment	9/12/08	2,031			X	1,016	5 HY 200DB	1,544	194
147	Electronic Whiteboard	4/28/08	330			X	165	7 HY 200DB	229	29
148	Mural Painting	4/28/08	1,200			X	600	7 HY 200DB	833	105
149	1211 8th Avenue	9/30/08	418,967				418,967	39 MMS/L	13,876	10,743
150	Bathroom Renovation	5/18/09	4,065				4,065	15 HY 150DB	203	386

**Federal Asset Report****Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv Meth	Prior	Current
151	Sign	11/15/09	790				790	7 HY 200DB	113	193
152	Computer Equipment - Dell	3/04/09	843				843	5 HY 200DB	169	269
153	Computers & Peripherals- Dell	7/08/09	15,549				15,549	5 HY 200DB	3,110	4,976
			<u>1,505,456</u>				<u>1,496,757</u>		<u>448,740</u>	<u>59,568</u>
<b>Other Depreciation:</b>										
55	Windows XP	9/11/02	410				410	3 MO S/L	410	0
138	Odyssey Learning Softwate	2/27/07	46,715				46,715	3 MOAmort	45,417	1,298
139	Sage Software	3/01/07	3,170				3,170	3 MOAmort	2,994	176
140	CD Maestro Software	3/19/07	610				610	3 MOAmort	576	34
141	School Recorderper	4/23/07	6,000				6,000	3 MOAmort	5,500	500
142	FM Pro Nonprofit Software	5/01/07	1,707				1,707	3 MOAmort	1,517	190
143	Music Maestro Software	6/01/07	1,310				1,310	3 MOAmort	1,128	182
144	Classroom Software	6/04/07	4,743				4,743	3 MOAmort	4,084	659
	<b>Total Other Depreciation</b>		<u>64,665</u>				<u>64,665</u>		<u>61,626</u>	<u>3,039</u>
	<b>Total ACRS and Other Depreciation</b>		<u>64,665</u>				<u>64,665</u>		<u>61,626</u>	<u>3,039</u>
<b>Amortization:</b>										
154	Loan Costs	11/29/10	4,211				4,211	2 MOAmort	0	351
			<u>4,211</u>				<u>4,211</u>		<u>0</u>	<u>351</u>
	<b>Grand Totals</b>		1,574,332				1,565,633		510,366	62,958
	<b>Less: Dispositions and Transfers</b>		0				0		0	0
	<b>Less: Start-up/Org Expense</b>		0				0		0	0
	<b>Net Grand Totals</b>		<u>1,574,332</u>				<u>1,565,633</u>		<u>510,366</u>	<u>62,958</u>

**Bonus Depreciation Report**

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
<b><u>Activity: Form 990, Page 1</u></b>								
51	Costumes	9/15/01	15,000		0	0	4,500	10,500
52	Dell Dimension 2300	9/04/02	3,595		0	0	1,079	2,516
53	Epson Stylus Printer	4/08/02	255		0	0	76	179
54	Fax Machine	5/14/02	360		0	0	108	252
56	Refrigerator & Stove	2/05/02	2,576		0	0	773	1,803
57	2 U-Stations w/ Hutch & Bookcase	3/08/02	825		0	0	248	577
58	10' Conference Table	4/11/02	450		0	0	135	315
146	Computer Equipment	9/12/08	2,031		0	0	1,015	1,016
147	Electronic Whiteboard	4/28/08	330		0	0	165	165
148	Mural Painting	4/28/08	1,200		0	0	600	600
<b>Form 990, Page 1</b>			<u>26,622</u>		<u>0</u>	<u>0</u>	<u>8,699</u>	<u>17,923</u>
<b>Grand Total</b>			<u>26,622</u>		<u>0</u>	<u>0</u>	<u>8,699</u>	<u>17,923</u>

**Depreciation Adjustment Report****All Business Activities**

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
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There are no assets that meet the criteria of this report

**Future Depreciation Report****FYE: 12/31/11**

FYE: 12/31/2010

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
<b>Prior MACRS:</b>					
1	SURGE PROTECTOR	10/16/96	54	0	0
2	46X60 CHAIR MAT	10/16/96	98	0	0
3	Desk	6/30/96	800	0	0
4	Credenza	6/30/96	600	0	0
5	Conference Chairs (6)	6/30/96	600	0	0
6	Office Chairs (3)	6/30/96	1,050	0	0
7	Office Chair	6/30/96	100	0	0
8	Table and Chairs (4)	6/30/96	500	0	0
9	RAMP	1/26/96	685	0	0
10	ARCHITECT SERVICES	1/30/96	3,130	0	0
11	PRINTER	10/08/96	600	0	0
12	Computer	6/30/96	2,000	0	0
13	HP lazer Jet Printer	1/16/97	800	0	0
14	CARPET	5/16/97	1,100	0	0
15	HP LASERJET 6LSE	5/13/97	406	0	0
16	Refrigerator	6/23/97	640	0	0
17	Two Drawer File Cabinet	6/30/97	93	0	0
18	Laminator	6/30/97	1,295	0	0
19	Laminator Cabinet	6/30/97	250	0	0
20	CAMCORDER	6/11/98	750	0	0
21	CAMERA PENTAX	6/11/98	360	0	0
22	COMPUTER MONITOR	6/22/98	476	0	0
23	EPSON PRINTER	12/15/98	530	0	0
24	MONITOR AND SCANNER	12/15/98	725	0	0
25	STACKING CHAIRS AND STORAGE CABINI	3/06/98	2,160	0	0
26	G.E. 31" TV	11/06/98	150	0	0
27	CONCRETE SLAB	2/26/98	2,200	0	0
28	Paper Shredder	2/11/99	223	0	0
29	Gateway Computer	2/11/99	2,538	0	0
30	27" TV and VCR	5/05/99	560	0	0
31	Printer	8/12/99	300	0	0
32	2 Dell Computers	9/30/99	3,747	0	0
33	Gateway Computer	7/30/99	2,671	0	0
34	Color Copier	11/04/99	600	0	0
35	Paper Cutter	12/09/99	238	0	0
36	Dell Computer	12/16/99	1,895	0	0
37	Telephone System	11/11/99	7,162	0	0
38	Table & Chairs	11/22/99	1,987	0	0
39	ELECTRIC PIANO	3/07/00	2,189	0	0
40	CD WRITER	2/23/00	303	0	0
41	PAPER SHREDDER	4/20/00	82	0	0
42	PRINTER	10/12/00	200	0	0
43	PRINTER	2/17/00	158	0	0
45	CABINETS	2/28/00	852	0	0
46	BOOKCASE	3/03/00	149	0	0
47	FORD VAN	3/31/00	39,408	0	0
49	2 Chadwood Wall Cabinets & 2 Base Cabinet	3/12/01	519	0	0
50	1999 Ford XL Van	4/12/01	12,400	0	0
51	Costumes	9/15/01	15,000	0	0
52	Dell Dimension 2300	9/04/02	3,595	0	0
53	Epson Stylus Printer	4/08/02	255	0	0
54	Fax Machine	5/14/02	360	0	0
56	Refrigerator & Stove	2/05/02	2,576	0	0
57	2 U-Stations w/ Hutch & Bookcase	3/08/02	825	0	0
58	10' Conference Table	4/11/02	450	0	0
59	Building Renovation	3/01/02	690,187	17,697	0
60	Telephone System	10/15/03	7,050	0	0
61	Powerite 5300 LCD Projector	1/29/03	1,000	0	0
62	Epson Scanner	10/27/03	225	0	0
63	6 Black Leather Executive Chairs	9/25/03	468	0	0
64	3 Back Mesh-Back Chairs	9/25/03	335	0	0
65	150 Stack Chairs	12/13/03	5,640	0	0
66	145 Teal/Wild Cherry Chairs	12/13/03	12,452	0	0
67	Costumes	7/07/03	1,175	0	0
68	New Shower - 1203 Bldg	9/30/04	8,830	227	0
69	1203 Remodeling	3/11/04	2,161	56	0
70	1203 Remodeling	3/29/04	750	19	0



**Future Depreciation Report****FYE: 12/31/11**

FYE: 12/31/2010

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
71	Carpet - 1203 Bldg	12/29/04	750	33	0
72	Canon Digital Camera	1/29/04	675	0	0
73	Dell Computer - Dimension 3000	9/15/04	2,952	0	0
74	Powershot Digital Camera	7/12/04	380	0	0
75	60 Black Chairs	3/30/04	600	27	0
76	89 Black Chairs	6/30/04	930	41	0
77	Dell Computer (2.8GHz)	10/27/05	962	0	0
78	Refrigerator/Freezer/Warmer	12/19/05	5,055	442	0
79	Laminated Shelves	2/12/05	665	58	0
80	Mural Painting	11/07/05	8,175	713	0
81	Casework	12/05/05	3,570	311	0
82	2004 Honda Accord	11/10/05	16,790	0	0
83	Southbend Range - Oven	6/30/06	4,287	380	0
84	Fax Machine	7/20/06	161	14	0
85	Laptop	6/15/06	1,233	53	0
86	Computer Equipment	9/25/06	662	47	0
87	Computer Equipment	9/25/06	43	3	0
88	Roland Piano (2)	11/03/06	2,782	243	0
89	Whiteboards and Equioment	10/19/06	6,130	535	0
90	Leather Highback Chair (8)	10/19/06	2,437	213	0
91	Highback Chair (2)	11/15/06	590	52	0
92	Indiana Desk Board	11/15/06	1,213	105	0
93	Picture Frame	11/27/06	350	31	0
94	New Sidewalk	2/21/06	334	20	0
95	Gas Line for Stove	6/30/06	1,292	80	0
96	Thermostat	1/06/06	1,921	115	0
97	Carpet - 1213 8th Ave. South	6/20/07	5,198	464	0
98	7.5 ton A/C Unit - 1213 8th Ave.	6/05/07	3,043	211	0
99	Magazine Displays	2/16/07	465	41	0
100	Laptop Cart	2/28/07	1,920	172	0
101	Office Furniture	3/24/07	1,344	120	0
102	File Cabinet, Book Case	3/25/07	475	42	0
103	Bookcase	2/22/07	174	16	0
104	Palladio Buffet	3/21/07	1,745	156	0
105	Mini Mobile Unit	7/10/07	543	49	0
106	Hufcor 3500	7/06/07	3,780	338	0
107	15 Dell computers	5/23/07	12,832	1,478	0
108	Dell Laser Printer	5/23/07	458	53	0
110	Dell Printer	5/23/07	458	53	0
111	Dell PC	5/25/07	1,960	226	0
112	Microsoft Server	6/04/07	3,255	375	0
113	Flash Drive	6/06/07	784	90	0
114	Netgear	4/27/07	415	48	0
115	Faceplate and Doorcloser	9/12/07	1,166	104	0
116	Camera System	9/30/07	625	56	0
117	Screen Protector	6/04/07	934	108	0
118	Dell Printer	6/20/07	561	65	0
119	Server Stand	6/21/07	468	42	0
120	NetGear	6/15/07	2,865	330	0
121	Sharp Stereo Equipment	8/02/07	7,776	694	0
122	Sharp Case	8/07/07	202	18	0
123	Sony Equipment	6/08/07	870	78	0
124	Pro Team Motor	6/11/07	450	41	0
125	Access Control System	7/18/07	26,745	2,387	0
126	Smartpro Control Equipment	6/21/07	1,142	102	0
127	Access Control System	4/30/07	13,173	1,176	0
128	Telephone System	5/09/07	2,131	191	0
129	Dell Laptop	2/21/07	1,595	184	0
130	Dell Laptop	2/21/07	4,497	518	0
131	Camera	12/04/07	380	34	0
132	Tracking for Laptops	12/10/07	4,450	513	0
133	Dell Computers	4/20/07	13,290	1,531	0
134	Dell Computers	4/20/07	13,290	1,531	0
135	Computer Equipment	4/20/07	413	48	0
136	Computer Case	4/20/07	458	41	0
137	Computer Cart	4/20/07	1,364	122	0
145	Windows server	6/04/07	5,381	620	0
146	Computer Equipment	9/12/08	2,031	117	0
147	Electronic Whiteboard	4/28/08	330	20	0
148	Mural Painting	4/28/08	1,200	75	0
149	1211 8th Avenue	9/30/08	418,967	10,743	0

# Future Depreciation Report

FYE: 12/31/11

FYE: 12/31/2010

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
150	Bathroom Renovation	5/18/09	4,065	348	0
151	Sign	11/15/09	790	139	0
152	Computer Equipment - Dell	3/04/09	843	162	0
153	Computers & Peripherals- Dell	7/08/09	15,549	2,985	0
			<u>1,505,456</u>	<u>50,570</u>	<u>0</u>

## Other Depreciation:

55	Windows XP	9/11/02	410	0	0
138	Odyssey Learning Softwate	2/27/07	46,715	0	0
139	Sage Software	3/01/07	3,170	0	0
140	CD Maestro Software	3/19/07	610	0	0
141	School Recorderper	4/23/07	6,000	0	0
142	FM Pro Nonprofit Software	5/01/07	1,707	0	0
143	Music Maestro Software	6/01/07	1,310	0	0
144	Classroom Software	6/04/07	4,743	0	0
	<b>Total Other Depreciation</b>		<u>64,665</u>	<u>0</u>	<u>0</u>

## Total ACRS and Other Depreciation

<u>64,665</u>	<u>0</u>	<u>0</u>
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## Amortization:

154	Loan Costs	11/29/10	4,211	2,105	0
			<u>4,211</u>	<u>2,105</u>	<u>0</u>

## Grand Totals

<u>1,574,332</u>	<u>52,675</u>	<u>0</u>
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7296 Salama Fellowship Urban Ministries,  
58-2198012  
FYE: 12/31/2010

11/11/2011 2:05 PM

## Federal Statements

### Taxable Interest on Investments

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
Interest Income	\$ 2		14			
Total	\$ 2					

## Federal Statements

### Form 990, Part IX, Line 24f - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
Sound&Lights Eng	\$ 16,136	\$ 16,136		
Bad Debt Expense	13,100		13,100	
Set Construction	12,300	12,300		
Repairs & Maintenance	12,152	9,688	2,464	
Food	11,820	11,043		777
Copy Machine	10,871	10,871		
Janitorial Service	9,062	8,614	448	
Miscellaneous	8,250	3,763	3,397	1,090
Telephone	7,466	6,696	770	
Insurance	6,961	2,877	4,084	
Equipment Rental	6,633	6,339	294	
Continuous Improvement	6,520	6,520		
Postage	6,431	1,449	230	4,752
Costume Company Expense	6,000	6,000		
Supplies & Curriculum	5,992	5,951		41
Printing	5,324		62	5,262
Musicians-Contract Servs	4,875	4,875		
Office Supplies	4,245	3,296	-896	1,845
College Student Support	4,139	4,139		
Computer Expense	4,092	3,334	758	
Accounting Expense	3,632		3,632	
Cable/Internet Expense	3,461	3,461		
College and Career Prep	3,438	3,438		
Dues and Subscriptions	2,773	1,909		864
Support-Contract Servs	2,525	2,525		
Donations and Benevolence	2,445	2,445		
Travel	1,813	1,813		
Music	1,561	1,561		
Janitorial Supplies	1,471	1,414	57	
Public Relations	1,126			1,126
Hospitality	1,090	354	736	
Promotion	1,043			1,043
Staff Development	1,029	900	129	
Media Expense	1,000			1,000
Transportation	825	825		
Taxes and Licenses	651		651	
Volunteer Gifts	598	598		

## Federal Statements

**Form 990, Part IX, Line 24f - All Other Expenses (continued)**

Description	Total Expenses	Program Service	Management & General	Fund Raising
Staff Expense	\$ 542	\$ 167	\$ 375	\$
Activity	425	425		
Kitchen Supplies	298	284	14	
Group Insurance	155		155	
Field Trips	61	61		
Total	\$ <u>194,331</u>	\$ <u>146,071</u>	\$ <u>30,460</u>	\$ <u>17,800</u>