Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No. 1545-0047 2011 Open to Public Inspection

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Department of the Treasury Internal Revenue Service

Α	For the	e 2011 c	alendar year, or tax year beginning , and ending			tonce there was the	
В	Check if a	pplicable:	C Name of organization Salama Fellowship Urban Ministries,		D Emplo	yer identification number	
	Address c	hange	Inc.	1			
\Box	Name cha	2000	Doing Business As		58-	-2198012	
	ivallie cha	ange	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Teleph	one number	
Ш	Initial retu	rn	1205 8th Avenue South		32.		
	Terminate	ed	City or town, state or country, and ZIP + 4				
	Amandad	-alivea	Nashville TN 37203		o C	eipts\$ 882,123	
Щ	Amended	return	F Name and address of principal officer:		G Gross rec	eipis\$ 002,123	
Ш	Application	n pending	1 Hame and address of principal officer.	H(a) Is this a g	roup return for	affiliates? Yes X No	
				U/6\	DII-4 III-	Yes No	
				H(b) Are all af		.u	
				-	, attach a list	. (see instructions)	
1	Tax-exen	mpt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	4			
J	Website:	:▶ s	alamaserves.org	H(c) Group ex		er 🕨	
K	Form of o	organization:	X Corporation Trust Association Other ▶ L Y	ear of formation: $ 1 $	993	м State of legal domicile: ТN	
P	art I	Su	mmary				
	1 E	Briefly de	scribe the organization's mission or most significant activities:				
ø		Chri	stian support for youth				
'n							
E						************************	
Activities & Governance	2 0	Chook thi	s box if the organization discontinued its operations or disposed of more than 25	0/ of its not ass	······································		
ဖွ	5077 500		for the second s			18	
∞ ′′			of voting members of the governing body (Part VI, line 1a)			18	
fie	4 1	Number o	of independent voting members of the governing body (Part VI, line 1b)		4	18000 0800	
ξį			ber of individuals employed in calendar year 2011 (Part V, line 2a)			24	
Aci			ber of volunteers (estimate if necessary)		6	289	
	7a T	Total unre	elated business revenue from Part VIII, column (C), line 12		7a	0	
	۱d	Vet unrela	ated business taxable income from Form 990-T, line 34			0	
			*.	Prior Yea		Current Year	
9	8 0	Contributi	ons and grants (Part VIII, line 1h)	67	7,537	882,123	
Revenue	9 F	rogram	service revenue (Part VIII, line 2g)		0	0	
eVe	10 li	nvestme	nt income (Part VIII, column (A), lines 3, 4, and 7d)		2	0	
œ			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	0	
	1		enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	675	7,539	882,123	
	1		d similar amounts paid (Part IX, column (A), lines 1–3)		0	0	
			paid to or for members (Part IX, column (A), line 4)		0	0	
"			other compensation, employee benefits (Part IX, column (A), lines 5–10)	234	1,117	388,228	
ses			not fundraising food (Port IV, column (A), line 11a)		0	0	
penses			Iraising expenses (Part IX, column (A), line 11e) 78,305			-	
EX				38/	1,944	463,546	
	17 0	omer exp	enses (Part IX, column (A), lines 11a-11d, 11f-24e)				
			enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		9,061 3,478	851,774	
_ g	19 F	Revenue	less expenses. Subtract line 18 from line 12	Beginning of Cur		30,349 End of Year	
Net Assets or Fund Balances	20 -	Total car	ote (Part V. line 16)	1,081		1,013,773	
Isse Bala	20 T	''''	ets (Part X, line 16)		,926	593,495	
in the	21 1		lities (Part X, line 26)			420,278	
			s or fund balances. Subtract line 21 from line 20	363	,929	420,270	
	art II		nature Block	S 75 SV	100		
			erjury, I declare that I have examined this return, including accompanying schedules and stateme			owledge and belief, it is	
tru	ie, corre	ct, and co	mplete. Declaration of preparer (other than officer) is based on all information of which preparer h	as any knowledge	e.		
		_	John Woll		16	70-12	
Sig	ın	Si	gnature of officer 11th of the officer to the officer to	SV	Date		
Hei	re		Stap LIEBBENCO EXECUTIVE DIVECTOR				
		Ту	pe or print name and title rice CPAs PLIC				
		Print/Type	preparer's name Consulting Planning Accounting	Date	Check	if PTIN	
Paid	k	THOMAS	M. PRICE THOMAS M. PRICE	11/28	12 self-emp	ployed P00037312	
re	parer	Firm's nam	Desire CDA DITC		rm's EIN	62-1016830	
	Only	i-iiiiis nafi	3825 Bedford Ave Ste 202		III S LIN F	J = 202000	
44.5%E	oracid.		N111- WN 27215 2507		1	615-385-0686	
Mari	the ID	Firm's add	this return with the preparer shown above? (see instructions)	Pi	none no.	Vaa Na	

Form 990		p Urban Ministries, 58-	2198012	Page 2
Part III	w.			
		is a response to any question in this Pa	art III	
	ly describe the organization's mission:	• •		
Chr	stian support for y	outh	,,.,,	
		,		
2 Did t	he organization undertake any significan	t program services during the year which were r	not listed on the	
	E 200 000 EZO			Yes X No
•	es," describe these new services on Sch	edule O.		.00 == .10
	·	ke significant changes in how it conducts, any p	program	
	coe?			Yes X No
If "Yo	es," describe these changes on Schedule			
4 Desc	cribe the organization's program service a	accomplishments for each of its three largest pr	ogram services, as measured by	
expe	nses. Section 501(c)(3) and 501(c)(4) or	ganizations and section 4947(a)(1) trusts are re	quired to report the amount of	
gran	ts and allocations to others, the total exp	enses, and revenue, if any, for each program se	ervice reported.	
		572,789 including grants of \$		
Chri for proc	st-Honoring lifesty the furture. This luctive citizens and nunity in the world.	r families are instructer les and to pursue trains training and education we future leaders in the l The organization will asist them in developing	ing and education to p will equip them to bec Edgehill community and serve as a support sy	repare ome in any stem
		elf-sufficiency in Chris		
77.7.7		T		
* • • • •				, , , , , , , , , , , , , , , , , , , ,
4b (Cod	e:) (Expenses \$	including grants of \$) (Revenue \$)
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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• • • • • • • • • • • • • • • • • • • •				
		TOTAL TOTAL CONTROL OF THE CONTROL O		
4c (Cod	e:) (Expenses \$	including grants of \$) (Revenue \$)
• • • • •				
4d Other	program services. (Describe in Schedul	e O.)		
(Expe	enses \$ incl		(Revenue \$	
4e Total	nrogram sarvica avnancas	672.789		

3333 4 33	Oneckies of Required Ochedules		Von	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	<u> </u>		
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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	6		X
7	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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	<u> </u>	Х
9	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	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	1		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
¢	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			.
.1	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d		444		x
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	Λ
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u>~</u>	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f	х	
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12a	Schedule D, Parts XI, XII, and XIII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	120	-11	
Ŋ	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		<u>X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	irt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization	-		
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	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	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	2.70		
С		24c		
	to defease any tax-exempt bonds?			
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			₹.
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
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	25b		X
26	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	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
D		28b		X
	Schedule L, Part IV	200		22
. С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	20.		X
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			.,
	conservation contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		l	
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>x</u>
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	35b	l	x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		i	_ _
50	****	36	İ	X
07	7,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1	30		-43
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			X
-	Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		x	
	19? Note. All Form 990 filers are required to complete Schedule O	38	Δ	

Form **990** (2011)

	Check if Schedule O contains a response to any question in this Part V.					
	Check if Schedule C Contains a response to any question in this rare v.				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	17			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?			1c		<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	24			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	urns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ns)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	ļ	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	<u> </u>	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other					ĺ
	over, a financial account in a foreign country (such as a bank account, securities account, or other fi	inancial				l
	account)?			4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financia	al Accou	ints.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action?		5b	 	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			<u>5c</u>		ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the				3,7
	organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or				1
	gifts were not tax deductible?			6b		-
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods				v
	and services provided to the payor?			7a	\vdash	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	 	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	/as		7c		х
	required to file Form 8282?	7d				
d	If "Yes," indicate the number of Forms 8282 filed during the year		l	7e	200000000000000000000000000000000000000	X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		· r	····· 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit confilt the organization received a contribution of qualified intellectual property, did the organization file F			7g		X
g	If the organization received a contribution of qualified intellectual property, did the organization ment of the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, and the organization received a contribution of cars, boats, and the organization received a contribution of cars, and the organization received a contribution of cars, and the organization received a contribution received a contributio			7h		X
h 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		C 4 1 OIII 1000-01			
0	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
	organization, have excess business holdings at any time during the year?			8	***********	
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9a	**********	
b	Did the organization make a distribution to a donor, donor advisor, or related person?					
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1 6				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	m 1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	100000000000	
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which	, .				
	the organization is licensed to issue qualified health plans	13b				
C	Enter the amount of reserves on hand	13c				
4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
h	If "Voc." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedu	۱۵ ۸		14b	1	l

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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 X O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No 18 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 18 Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8a The governing body? Х Each committee with authority to act on behalf of the governing body? d8 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Х the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? Х If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 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? Х The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **TN** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization: > Salama Urban Ministries 1205 8th Avenue S

TN 37203

Nashville

Form 990 (2011) Salama Fellowship Urban Ministries, 58-2198012

Page 7

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.

X Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee. (F) Estimated Reportable Average Position Reportable Name and Title compensation from amount of hours per (do not check more than one compensation other related week box, unless person is both an from compensation organizations (describe officer and a director/trustee) the organization (W-2/1099-MISC) from the hours for ndividual trustee (W-2/1099-MISC) organization related nstitutional ighest compensated employee and related organizations organizations in Schedule O) (1) John Anderson 0 0 0 Х Director 1.00 (2) Barry Warner 0 0 0 X Director 1.00 (3) Thomas Kinnard 0 0 Х 0 1.00 Director (4) Roy Carter 0 0 1.00 X 0 Director (5) Stephen Handy 0 0 1.00 X 0 Director (6) Greg Huddleston 0 0 Х 0 1.00 Director (7) Susan West X 0 0 0 1.00 Director (8) Wade McGregor 0 0 1.00 Х 0 Director (9) Natasha Metcalf 0 0 1.00 Х 0 Director (10) Pam Morris 0 0 0 X 1.00 Director (11) Johnny Orr X 0 0 0 1.00 Director (12) Rivers Rutherford 0 0 0 X 1.00 Director (13) John Gifford 0 0 0 Director 1.00 X (14) Tom Douglas X 0 0 0 1.00 Director

Form 990 (2011)

Form 990 (2011) Salama Fe	ellowship	<u>) (</u>	Jrk	an	<u> N</u>	lin.	<u>is</u>	tries, 58-219	8012			P	age 8
Part VII Section A. Officers (A) Name and little	(B) Average hours per week (describe	(d	o not (x, unic	Pos check ess pe	c) ition more rson	than o	one an	nd Highest Compensated (D) Reportable compensation from the	(E) Reportable compensation from related organizations		(F) Estima amoun othe	ted t of r	
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from ti organiza and rela organiza	ation ated	
(15) Rush Benton President	1.00			х				0	0				0
(16) Hunter Connelly Treasurer	1.00			x				0	0				0
(17) Frazer Buntin Vice President	1.00			x				0	0				0
(18) Gloria Towner Secretary	1.00			х				0	0			materia :	0
(19)								:					
(21)													
(22)													
(23)													
(24)			:										
(25)								Hetr.	MAN				
1b Sub-total	ets to Part VII, S	Secti	on A	٩			A A A			- 1111			
Total number of individuals (in reportable compensation from	icluding but not li	imite	d to				bov	e) who received more than	\$100,000 in				
3 Did the organization list any fo	ormer officer, dire	ectoi	r, or	trust	ee, l	key e	mpl	oyee, or highest compensa	ated		3	Yes	No X
employee on line 1a? If "Yes," For any individual listed on line organization and related organ	e 1a, is the sum	of re	port	able	com	pens	atio	n and other compensation	from the				X
individual	a receive or acc	rue c	comp	oensa	atio	1 fron	n an	ıy unrelated organization or	rindividual		4 5		X
Section B. Independent Contract								1 1 1	# #400 000 of				
Complete this table for your five compensation from the organical compensation from the organical compensation.	zation. Report co	ensa ompe	ted i	ndep tion 1	enc for t	he ca	conti Ilena I	dar year ending with or with	in the organization's tax ye	ear.		(C)	
Name and	(A) business address							Descrip	(B) tion of services		Cor	mperisa	tion
									43-773-36-77-7-9			148-7-11	
	LOUIS TYLINGARY								Code MATERIA I				
	· 10.400-7												
Total number of independent of received more than \$100,000	•							se listed above) who	0		Ear-	, gar) (2011)
DAA											1 0111		, (EVI)

882,123

d All other revenue ______e Total. Add lines 11a-11d

Total revenue. See instructions.

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).

1090	Check if Schedule O contains a response	to any question in this Part	t IX		
	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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	Lawrence			
	# 11.0.0 B. (D. E.)				
2	Grants and other assistance to governments,				
3	-				
	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)	250 755	291,956	40,168	20,631
7	Other salaries and wages	352,755	291,930	40,100	20,031
8	Pension plan accruals and contributions (include	2 204	1 624	450	
	section 401(k) and 403(b) employer contributions)	2,084	1,634	450	
9	Other employee benefits	22 200	07 400	2 040	1,963
10	Payroll taxes	33,389	27,486	3,940	1,903
11	Fees for services (non-employees):				
a	Management				
b	Legal				
С	Accounting				
d	Lobbying			_	
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses		Lave		
14	Information technology				
15	Royalties				
16	Occupancy	1,200	1,200	w	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	32,629	30,998	1,631	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	52,773	50,240	2,533	
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Group Insurance	46,737	32,877	4,040	9,820
b	Professional Services	38,697	13,697	25,000	
c	Transportation	38,461	37,232	1,229	
d	Utilities	29,418	28,203	1,215	
е	All other expenses	223,631	157,266	20,474	45,891
25	Total functional expenses. Add lines 1 through 24e	851,774	672,789	100,680	78,305
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here ► if				
	following SOP 98-2 (ASC 958-720)				
DAA					Form 990 (2011)

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Form 990 (2011) Salama Fellowship Urban Ministries, 58-2198012

an	t X Balance Sheet			(A)	Ι	(D)				
				(A) Beginning of year		(B) End of year				
Τ.	4. Cook was interest bearing			79,614	1	49,160				
1.					2	12,581				
1					3					
	Pledges and grants receivable, net Accounts receivable, net				4	2,758				
1	4 Accounts receivable, net 5 Receivables from current and former officers, director									
'	employees, and highest compensated employees. Co Schedule L	5								
١,	6 Receivables from other disqualified persons (as define									
	4958(f)(1)), persons described in section 4958(c)(3)(B									
	employers and sponsoring organizations of section 50									
,	employees' beneficiary organizations (see instructions			6						
<u> </u>	7 Notes and loans receivable, net				7					
	8 Inventories for sale or use				8					
	9 Prepaid expenses and deferred charges			1,238	9	938				
_ [`	0a Land, buildings, and equipment: cost or									
'	other basis. Complete Part VI of Schedule D	10a	1,570,222							
	b Less: accumulated depreciation	10b	1,570,222 623,641	997,143	10c	946,581				
1.	1 Investments—publicly traded securities		1,000		11					
1:										
1:		****	13							
1			14	1,755						
1										
10				1,081,855	16	1,013,773				
1				104,423	17	67,659				
1			18							
1					19					
2					20					
2		of Sche	fule D	*****	21					
[_										
2:	employees, highest compensated employees, and dis	qualified			22					
i 2					23					
2					24					
2:										
	parties, and other liabilities not included on lines 17-24									
	of Schedule D			525,836	25	525,836				
20				691,926	26	593,495				
	Organizations that follow SFAS 117, check here ▶	X and	complete							
}	lines 27 through 29, and lines 33 and 34.									
2				389,929	27	420,278				
2					28					
2					29					
	Organizations that do not follow SFAS 117, check	here ▶	and							
;	complete lines 30 through 34.									
2' 2: 2: 3: 3: 3:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		30						
3	,,,,,,,				31					
3					32					
3	-			389,929		420,278				
1	4 Total liabilities and net assets/fund balances			1,081,855	34	1,013,773				

Forn	1 990 (2011) Salama Fellowship Urban Ministries, 58-2198012		Page 12							
	Reconciliation of Net Assets									
	Check if Schedule O contains a response to any question in this Part XI									
1	Total revenue (must equal Part VIII, column (A), line 12)	1	882,123							
2	Total expenses (must equal Part IX, column (A), line 25)									
3										
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	389,929							
5	Other changes in net assets or fund balances (explain in Schedule O)	5								
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,									
	column (B))	6	420,278							
PE	art XII Financial Statements and Reporting									
	Check if Schedule O contains a response to any guestion in this Part XII									
			Yes No							
1	Accounting method used to prepare the Form 990: Cash X Accrual Other									
	If the organization changed its method of accounting from a prior year or checked "Other," explain in									
	Schedule O.									
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X							
b	Were the organization's financial statements audited by an independent accountant?		2b X							
С	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?		2c X							
	If the organization changed either its oversight process or selection process during the tax year, explain in									
	Schedule O.									
d	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:									
	Separate basis Consolidated basis Both consolidated and separate basis									
3a	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?		3a X							
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	* * <u>* * * * * * * * * * * * * * * * * </u>	3b							
			Form 990 (2011)							

SCHEDULE A (Form 990 or 990-EZ)

-01111 990 OF 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section

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

Attach to Form 990 or Form 990-EZ.

See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Salama Fellowship Urban Ministries,

Employer identification number 58 – 2198012

									70	_ 2, 1, 2	OOT			
P	art I	Reas	on for Public Charity	Status (All organizations	must c	omplete	e this p	art.) S	ee ins	tructio	ns.			
The	orga	nization is no	t a private foundation becau	se it is: (For lines 1 through 11,	check on	ly one bo	x.)							
1		A church, co	nvention of churches, or as	sociation of churches described	in sectio	n 170(b)	(1)(A)(i).							
2		A school de	scribed 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				ed in conjunction with a hospital				b)(1)(A)(iii). Ent	ter the h	ospita ⁱ	l's name	а.	
	1	city, and sta						-/(-/(-/(,					
5		·=		of a college or university owned	or opera	ted by a d	novernm	ental un	it descr	ihed in				
•			(b)(1)(A)(iv). (Complete Par		or opera	tou by a s	30 1011111	ornar ar		ibod iii				
6				governmental unit described in s	oction 1	70/h)/4)/	A1()							
7	H			substantial part of its support fr				from the		فالطبيع ام	_			
•	Ш				om a gov	emmenta	as urast or	ROIR GI	e gener	аі рирік	ن			
			section 170(b)(1)(A)(vi). (C											
٥	v			170(b)(1)(A)(vi). (Complete Par			_							
9	X			1) more than 33 1/3% of its sup						-				
				npt functions—subject to certain										
				nd unrelated business taxable ir				x) from l	busines	ses				
				80, 1975. See section 509(a)(2)										
10	Ш	_	-	exclusively to test for public saf	•									
11	Ш	-	-	exclusively for the benefit of, to	•				•					
		purposes of	one or more publicly support	ted organizations described in s	ection 50	9(a)(1) or	section	509(a)(2). See	section	1			
		509(a)(3). Cl	neck the box that describes	the type of supporting organizati	ion and c	omplete li	ines 11e	through	11h.					
	r1	а Туре	· · ·	c Type III-Function	_		d		e III-O					
е		By checking	this box, I certify that the org	ganization is not controlled direc	tly or indi	rectly by	one or n	nore disc	qualified	d persor	18			
		other than fo	undation managers and other	er than one or more publicly sup	ported or	ganizatio	ns desc	ribed in :	section	509(a)(1)			
		or section 50	9(a)(2).											
f		If the organiz	ation received a written dete	ermination from the IRS that it is	a Type I	Type II,	or Type	III supp	orting					
		organization,	check this box											
g		Since Augus	t 17, 2006, has the organiza	tion accepted any gift or contrib	ution fron	n any of t	he							. 1
		following pe				•								
		- ·		ontrols, either alone or together	with perso	ons desci	ribed in	(ii) and					Yes	No
			w, the governing body of the	•				()				11g(i)		
			member of a person describ						* * * * * * * *			11g(ii)	· · · · · ·	
				described in (i) or (ii) above?							• • • • • •	11g(iii)		
h				he supported organization(s).						• • • • • • • •		[119(11)	<u> </u>	Ь
/6)	Name	of supported	(ii) EIN	(iii) Type of organization	flut to the	organization	60 084	you notify	(44)	lo tho		full) Ama	unt of	
1.7		anization	/m/ Link	(described on lines 1–9	1	sled in your	1 ''	nization in	organizat	ls the tion in col.	: 	(vii) Amo supp		
				above or IRC section	governing	document?		of your		zed in the				
				(see instructions))				port?	f	S.?				
A.					Yes	No	Yes	No	Yes	No				
A)]		1			İ			
B)											İ			
						<u></u>								
C)														
					ļ			ļ						
D)														
					L									
E)														
					L :									
							postali de la constitución de la constitución de la constitución de la constitución de la constitución de la c	H0000000000000000000000000000000000000	H. ((((((((((((((((((((((((((((((((((((P0000000000000000000000000000000000000				

Schedule A (Form 990 or 990-EZ) 2011 Salama Fellowship Urban Ministries, 58-2198012

Page 2

P	Support Schedule for O (Complete only if you che Part III. If the organization	cked the box o	n line 5, 7, or 8	of Part I or if the	ne organization	failed to qualify	
Sac	tion A. Public Support	Tians to quality	under the test	noted bolow,	siedoo compiet	or are iii.)	
	ndar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		- Andrews -				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)			:			.,,,,,
11	Total support. Add lines 7 through 10					L	
12	Gross receipts from related activities, etc.			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		12	
13	First five years. If the Form 990 is for the	e organization's firs	t, second, third, fo	urth, or fifth tax yea	ar as a section 501	(c)(3)	. —
	organization, check this box and stop her	re			<u></u>		
Sec	tion C. Computation of Public S	upport Percen	tage				
14	Public support percentage for 2011 (line 6					1 1	<u>%</u>
15	Public support percentage from 2010 Sch	iedule A, Part II, lin	e 14			15	<u>%</u>
16a	33 1/3% support test—2011. If the organ						
	box and stop here. The organization qual						🟲 🗀
b	33 1/3% support test—2010. If the organ						
	check this box and stop here. The organi						🟲 🗀
17a	10%-facts-and-circumstances test—20						
	10% or more, and if the organization mee						
	Part IV how the organization meets the "fa	acts-and-circumsta	nces" test. The org	ganization qualifies	as a publicly supp	оопеа	
b	organization 10%-facts-and-circumstances test—20' 15 is 10% or more, and if the organization	10. If the organizati	ion did not check a	box on line 13, 16	6a, 16b, or 17a, an	d line	
	Explain in Part IV how the organization me						
							▶ [
18	Private foundation. If the organization di	d not check a box	on line 13, 16a, 16	b, 17a, or 17b, che	eck this box and se	ee	

instructions

Schedule A (Form 990 or 990-EZ) 2011 Salama Fellowship Urban Ministries, 58-2198012 Page 3

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,280,948	826,981	747,223	677,537	882,123	4,414,812
2	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			-			
3	Gross receipts from activities that are not an unrelated trade or business under section 513				······································		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	1,280,948	826,981	747,223	677,537	882,123	4,414,812
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						4,414,812
	tion B. Total Support	T					
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	1,280,948	826,981	747,223	677,537	882,123	4,414,812
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						LUIP
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b		•				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				with the second		****
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	1,280,948	826,981	747,223	677,537	882,123	4,414,812
14	First five years. If the Form 990 is for the	organization's first	, second, third, fou	ırth, or fifth tax yea	r as a section 501	(c)(3)	
800	organization, check this box and stop her tion C. Computation of Public Su			<u></u>			·····
	Public support percentage for 2011 (line 8			- (f)		15	100.00%
15 16	Public support percentage for 2011 (line of Public support percentage from 2010 Sch					B 1	%
16 Sec	tion D. Computation of Investme						
17	Investment income percentage for 2011 (I			column (f))		17	%
18	Investment income percentage from 2010						%
19a	33 1/3% support tests—2011. If the orga			14, and line 15 is	more than 33 1/3%		
	17 is not more than 33 1/3%, check this be						▶ X
b	33 1/3% support tests—2010. If the orga						
	line 18 is not more than 33 1/3%, check th	nis box and stop he	re. The organizati	on qualifies as a pu	ublicly supported o	organization	▶ □
20	Private foundation. If the organization did						>

Part IV	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).
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047
2011
Open to Public

Employer identification number Name of the organization Salama Fellowship Urban Ministries, 58-2198012 Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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? 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 Total number of conservation easements Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 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)? 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. 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 (ii) Assets included in Form 990, Part X 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 Assets included in Form 990, Part X

Sche	edule D (Form 990) 2011 Salama Fe	erromenib	<u>Urban Minis</u>	stries,	28-71380	14		Page ∠
Pa	art III Organizations Maintainin	g Collections of	Art, Historical	<u> Freasures, c</u>	or Other Simi	lar Assets	(continu	ed)
3	Using the organization's acquisition, access collection items (check all that apply):	ion, and other record	ls, check any of the f	ollowing that ar	e a significant use	e of its		
а	Public exhibition	d 🗌	Loan or exchange pr	ograms				
b	Scholarly research	e 🗌	Other					
C								
4	Provide a description of the organization's co	ollections and explai	n how they further the	organization's	s exempt purpose	in Part		
	XIV.	·	•	-				
5	During the year, did the organization solicit of	or receive donations	of art, historical treas	ures, or other s	similar			
	assets to be sold to raise funds rather than t	o be maintained as i	oart of the organization	n's collection?			. Yes	
P	art IV Escrow and Custodial Arr	angements. Co	mplete if the orga	anization ans	swered "Yes" t	o Form 99	0, Part I∖	7,
00000000	line 9, or reported an amou	nt on Form 990,	Part X, line 21.					
1a	Is the organization an agent, trustee, custod							
	included on Form 990, Part X?						Yes	No No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table:					11,,,,,,,,,,,
			•				Amount	
С	Beginning balance					1c		
	Additions during the year					1d		
	Distributions during the year					1e		
f	Ending balance							
2a	Did the organization include an amount on F	orm 990. Part X. line	21?				Yes	No
	If "Yes," explain the arrangement in Part XIV		~~''				. Ш	
unannanaa.	art V Endowment Funds. Comp	lete if the organi	zation answered	"Yes" to For	m 990. Part I\	/. line 10.		
********		(a) Current year	(b) Prior year	(c) Two year		ree years back	(e) Four y	ears back
1a	Beginning of year balance					*****		
	Contributions							
	Net investment earnings, gains, and	•						
·								
	losses			1		<u>.</u>		
	Grants or scholarships							
е	Other expenditures for facilities and		,					
	programs			+				
T	, ,,,,,,,,,,					****		
g	End of year balance			<u> </u>		****		<u></u>
2	Provide the estimated percentage of the curi	•	e (line 1g, column (a	i) held as:				
	Board designated or quasi-endowment	%						
	Permanent endowment > %							
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c show							
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held an	d administered	for the		Г	
	organization by:							es No
							3a(i)	-
b	If "Yes" to 3a(ii), are the related organization	s listed as required o	on Schedule R?				3b	
4	Describe in Part XIV the intended uses of the							
Pa	irt VI Land, Buildings, and Equi			ne 10.				
	Description of property	(a) Cost or other I	1 ' '	other basis	(c) Accumulate	d	(d) Book va	alue
		(investment)	(ot	her)	depreciation			
1a	Land							
b	Buildings		1,1	L45,403	226	,927	91	<u>8,476</u>
	Leasehold improvements	1						
d	Equipment		4	124,819	396	,714	2	8,105
	Other	1						
Total	I. Add lines 1a through 1e. (Column (d) must e	egual Form 990, Par	t X, column (B), line	0(c).)		▶	94	6,581

Schedule D (Form 990) 2011 Salama Fellowship Urb	<u>an Ministries</u>	, 58-2198012	Page 3
Part VII Investments—Other Securities. See Form 990		- 14-Amin	
(a) Description of security or category	(b) Book value	(c) Method of valua	
(including name of security)		Cost or end-of-year mar	ket value
(1) Financial derivatives	· · · · · · · · · · · · · · · · · · ·		
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			11-111
(C) (D)			
(E)			
(F)			
(G)			
(H)			
(1)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related. See Form 990			
(a) Description of investment type	(b) Book value	(c) Method of valua	
		Cost or end-of-year mar	ket value
(1)			
(2)	LIMETRY		
(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)	CANWE.		LAUF.
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description			(b) Book value
(1)			
(2)			
(3)	MANUAL .		wa .
(4)			
(5)			
(6)			*-M1007* -
(7)			
(8)	1 111 1 1800m · ·		
(9)			
(10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		•	
Part X Other Liabilities. See Form 990, Part X, line 25.	*****		
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2) Note Payable - Current	425,336		
(3) Line of Credit - Non-Current	100,500		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)	EOE OOC		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	525,836		

^{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).

Schedule D (Form 990) 2011

Sche	dule D (Form 990) 2011 Salama Fellowship Urban A	<u> Ministries,</u>	58-2198012	Page 4
	rt XI Reconciliation of Change in Net Assets from Form	990 to Audited F	inancial Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			882,123
2	Total expenses (Form 990, Part IX, column (A), line 25)		I _ I	851,774
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	30,349
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV.)			
9	Total adjustments (net). Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine line			30,349
Pa	rt XII Reconciliation of Revenue per Audited Financial S	tatements With F	Revenue per Return	
1	Total revenue, gains, and other support per audited financial statements			1,008,128
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		126,005	
c	Recoveries of prior year grants			
d	Other (Describe in Part XIV.)			
e	Add lines 2a through 2d		2e	126,005
3	Subtract line 2e from line 1		[_ [882,123
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	· · · · · · · · · · · · · · · · · · ·		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a	•			
D	Other (Describe in Part XIV.)		4c	
C	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	· · · · · · · · · · · · · · · · · · ·	5	882,123
5 • • •	nt XIII Reconciliation of Expenses per Audited Financial	Statements With	Expenses per Return	
1			1 4 1	977,779
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	.,		
	Donated services and use of facilities	2a	126,005	
a	Prior year adjustments			
b				
ر	Other losses			
u	Other (Describe in Part XIV.)		2e	126,005
e	Add lines 2a through 2d			851,774
3	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1 :		·····	
4		4a		
	Investment expenses not included on Form 990, Part VIII, line 7b	1 41		
	Other (Describe in Part XIV.)		4c	
_C	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1		4 7 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	851,774
		0.)		
Pe	nt XIV Supplemental Information	5 (III II A I.4	Det N/ Base 4b and 9bs	
Com	olete 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;	
	$ec{V}$, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, I	ines 2d and 4b. Also d	complete this part to provide	
	dditional information.			
P	art X - FIN 48 Footnote			
N	one noted.			
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Schedule D (Fo	orm 990) 2011	Salama	Fellowship	Urban	Ministries,	58-2198012	Page 5
Part XIV	Supplemer	ntal Informa	tion (continued)		OLIVATO .	vermin-	- H-56116F -

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SCHEDULE O (Form 990 or 990-EZ)

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.

2011 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Salama Fellowship Urban Ministries, Inc. Employer identification number 58-2198012

Form 990, Part VI, Line 11b - Organ	ization's Process to Review Form 990
No review was or will be conducted.	
Form 990, Part VI, Line 15a - Compen	nsation Process for Top Official
Compensation is formulated by the E	kecutive Committee and the HR Committee
of the Board and put forth to the bo	oard for full approval. Based on
comparability data and market resea:	rch on other local non profits with
similar mission fit. The local Cen	ter for Non Profit Management has
research on salaries for non profit	s in Nashville. Review of the employees
of quality management processes and	outcomes are reviewed to determine
effectiveness.	
Form 990, Part VI, Line 15b - Compe	nsation Process for Officers
Employees quality management proces	ses and outcomes are reviewed by
administration and an outside evalu	ator. Recommendation brought before the
HR committee and then forwarded to	the Board for final approval.
Form 990, Part VI, Line 19 - Govern	ing Documents Disclosure Explanation
Documents are made available upon r	equest.
	_
Form 990, Part IX, Line 24e - Other	Expenses
Description	Amount
Special Events	\$ 26,323
Professional Fees - Other	\$ 25,405
College Student Support	\$ 24,086

Name of the organization

145

Music

Travel

Postage

Schedule O (Form 99	0 ог 990-EZ) (20	11)				Page 2
Name of the organization		Fellowship	Urban Mir	nistries,		Employer identification number 58-2198012
Volunteer	Expense		\$		6	

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Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service

(99)

➤ See separate instructions.

Attach to your tax return.

Sequence No

179

Name(s) shown on return Salama Inc.	. Fellowship	Urban Min	istries,			Identify 58 -	_	8012
	ss or activity to which this form relates								
	ndirect Depreciat	cion	aut. Hudau Caat	ion 470					
Pa	ert I Election To Expe	ense Certain Prop any listed property	erty Under Sect	ion 179 / hefore vou c	omnle	te Part	1		
<u> </u>								1	500,000
1	Maximum amount (see instruction Total cost of section 179 properts		inetructions)					2	
2	Threshold cost of section 179 property							3	2,000,000
3	Reduction in limitation. Subtract							4	
4	Dollar limitation for tax year. Subtract	line 3 from line 1. If zero or	loss enter -0- if marrie					5	
5		ion of property		Cost (business use or			Elected cost		
_6	(а) Беаспри	ton or property		(
				Lint					
	Listed areas at . Enter the amoun	at from line 20			7		····		
7	Listed property. Enter the amour Total elected cost of section 179		s in column (c) lines	6 and 7				8	
8	Tentative deduction. Enter the s							9	
9 10	Carryover of disallowed deduction							10	
11	Business income limitation. Ente	or the smaller of husine	ss income (not less t	han zero) or line	5 (see	instruction	าร)	11	
12	Section 179 expense deduction.							12	
13	Carryover of disallowed deduction				13		- WIND		
Note	: Do not use Part II or Part III belo	ow for listed property. In	nstead, use Part V.		<u></u>	***			
***	rt II Special Deprecia	tion Allowance a	nd Other Depre	ciation (Do no	t incl	ude liste	ed prope	rty.)	(See instructions)
14	Special depreciation allowance f	for qualified property (o	ther than listed prope	erty) placed in ser	vice	****			
, ¬	during the tax year (see instructi							14	105
15	Property subject to section 168(15	
16	Other depreciation (including AC							16	
12.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	irt III MACRS Deprecia	ation (Do not inclu	de listed propert	v.) (See instru	ctions	3.)			
30000.003	mile to be before		Section	A					
17	MACRS deductions for assets p	laced in service in tax y	ears beginning befo	re 2011			<u></u>	17	50,570
18	If you are electing to group any assets place	ced in service during the tax ye	ar into one or more general	asset accounts, check	here 🕨				
	Section B-	-Assets Placed in Ser	vice During 2011 Ta	ex Year Using th	e Gene	eral Depre	eciation S	ysten	1
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for deprecial (business/investment us only-see instructions	e period	(e) C	Convention	(f) Meth	od	(g) Depreciation deduction
19a	3-year property	557755							
b	5-year property								
c	7-year property	\exists							
	10-year property								
e	15-year property								
	20-year property								
<u>_</u>	25-year property			25 yrs.			S/L		
<u>9</u> _				27.5 yrs.		ММ	S/L		
	property			27.5 yrs.		MM	S/L	<u> </u>	
	Nonresidential real			39 yrs.		ММ	S/L	-	
•	property					ММ	S/L		
	Section C—A	Assets Placed in Serv	ice During 2011 Tax	Year Using the	Altern	ative Dep	reciation	Syste	em .
20a	Class life						S/L		
b	12-year			12 yrs.			S/L		
С				40 yrs.		MM	S/L		
	art IV Summary (See in	nstructions.)						1	
21	Listed property. Enter amount fr	om line 28		.,,		,		21	
22	Total. Add amounts from line 12	2, lines 14 through 17, l	ines 19 and 20 in co	lumn (g), and line	21. Er	nter here			
	and on the appropriate lines of y	your return. Partnership	s and S corporations	s—see instruction	<u>s</u>			22	50,675
23	For assets shown above and pla	aced in service during t	he current year, ente	r the					
	portion of the basis attributable				23	<u></u>			

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Page	1

orm 45	62 (2011)		rty (Include au	1 1-9-	- 00rto	in oth	or vehi	clas c	ertain o	ompu	ters, a	nd prop	erty us	sed fo	r	
Par	ťΥ	Listed Prope	rty (Include au	: amusen	s, cenc apat l	iii Our	el vein	uico, c	ortain (, o	,					
		entertainmen	t, recreation, or chicle for which you through (c) of Sec	arre using	the stan	dard mi	leage rat	te or de	ducting le	ease ex	oense, c	omplete	only 24	a,		
		24b, columns (a	through (c) of Sec	ction A, all	of Section	n B, and	d Section	n C if ap	plicable.	- fau lina	ito for po	reconde	r automo	hiles.)		
		Section A	through (c) of Sec Depreciation ar	nd Other In	formation	on (Cau	tion: Se	7 T	36406011	<u> </u>					Yes	No
24a	Do you bay		e business/investment u				Yes	No	24b lf	"Yes," i	s the ev	idence v T	viiteen:			
		(b)	(c)	(d)		1	(e)		(f)	1	(g)	۱ ,	(h) epreciation	n	(i) Elected se	
	(a) f property	Date placed	Business/ investment use	Cost or othe	r basis		for depreci ness/invest		Recovery period	E	ethod/ vention	"	deduction	'	COS	
(list ve	nicles first)	in service	percentage			(Dusi	use only)		period			 		.,		
		depression allow	ance for qualified I	isted prope	rty place	d in ser	vice duri	ng								
25	Special	debleciation allow	e than 50% in a qu	alified busi	iness us	e (see ir	nstructio	ns) <u>.</u>			. 25	<u> </u>				<u></u>
	the tax y	ear and used mor	00% in a qualified b	husiness us	se:											
26	Property	used more than :	50% in a quaimed i	Duginioco de	<u> </u>	T		,								
			9/			1				l			<u>.</u>			
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27	Property	used 50% or less	s in a qualified bus	iness use:		1					 	1				
										S/L	_					
			%			 			 	+]	
						1				S/L	_					
			%						L						1	
28	Add am	ounts in column (n), lines 25 through	1 27, Enter	here and	l on line	21, pag	e 1						29		
29	Add am	ounts in column (), line 26. Enter he	ere and on I	ine 7, pa	<u>ige 1</u>	<u>,</u>	<u></u>	. <u> </u>		<u> </u>	<u> </u>	<u></u>			
				O 4	: D	mtarma	tion on	บา จอเส	venicies	•				Lvehick	95	
Com	olete this	section for vehicl	es used by a sole	proprietor,	partner,	or other	"more th	nan 5%	owner,"	or relate	a persor	1. 11 you	provided	c vernor		
to vo	ur emplo	vees, first answer	the questions in S	ection C to	see if yo	ou meet	an exce	phonic	complet	ing this	section 1	or those	vernoie:	8. e)		(f)
to yo	ur ompre	yeeo, meessa			(0	4	,)) cle 2	Vehi			cle 4	Vehi	cle 5		icle 6
20	Total b	icinecc/investmer	t miles driven duri	ng	Vehi	cie 1	Verii	ue z	1	0.0 0			1			
30	the year	z /de not include	commuting miles)	Ū											 	
	the yea	- was ting miles d	iven during the ye	ar								-	 		┼──	
31																
32	Total o	ther personal (nor	commuting) miles		ţ						L					
	driven					-										
33			the year. Add line:	5									<u> </u>			
		ugh 32			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34			e for personal use		162	140	103	1	1				ļ	<u> </u>		
		off-duty hours? 🔒					+-	\vdash				T T				
35		e vehicle used pri						1		1			1	_	.	
	than 5°	% owner or related	i person?			 	 	 	 		1					
36	Is anot	her vehicle availa	ole for personal us	e?		<u> </u>	J			lee by	Their En	nnlovee	s .			
			Section C—Que	stions for	Employ	ers Wh	o Provid	ie veni	cles for t	ose by	omplove	ee who	are not			
Ans	wer thes	e questions to det	Section C—Que ermine if you meet	t an excepti	on to co	mpleting	Section	B for v	renicies c	Seu Dy	Gilipioyo					
mor	. 46	V aumoro or rolate	d norsons (see ins	structions).											Yes	No
37	Do you	ı maintain a writte	n policy statement	that prohib	its all pe	rsonal t	use of ve	hicles,	including	commu	ung, by					
																+-
38		1 . 1 . 1	- naliou statement	that prohib	its perso	mal use	of vehic	les, exc	серт сотп	nuung,	Dy your					
-	مامسم	upped Son the inc	tructions for vehicl	es used by	corpora	te office	rs, airec	iors, or	1 /0 01 110	JIC OWIT	OIG					+
39	_	وبالأستان التابات	shieles by omploye	see as ners	onal use	?										+-
	Do you	u provide more tha	an five vehicles to	your emplo	yees, ob	tain info	rmation	from yo	our emplo	yees ab	out the					1
40			A. I. Oliver Sur-Engineering	tian roopiyo	M2										<u> </u>	+-
	_	1 41	monte concerning	oualified at	utomobil	e demo	nstration	use? (See instr	uctions.)					
41	Do yo	u meet me require	37, 38, 39, 40, or 4	11 is "Yes."	do not o	omplete	e Section	B for t	he covere	ed vehic	les.					<u> </u>
333324				7710 (00)	<u> </u>											
	art VI	<u>Amortizati</u>	<u>on</u>			T				T,	(d)	(e			(f)	
		(a)			b)		Amorti	(c) zable amo	ount		section	Amorti: perio		Amo	tization for	this year
		(a) Description of co	sis		ortization gins		Amore	Zubio unio				percei				
						an incir	untione).									
42	Amor	ization of costs th	at begins during yo	our 2011 ta T	x year (s	ee instr	uctions):			T			Ţ			
															=	
				<u> </u>		L				_1			43			2,10
43	Amor	tization of costs th	at began before yo	our 2011 ta:	x year								44			2,10
44	Total	. Add amounts in	column (f). See the	e instruction	s for wh	ere to re	eport		<u> </u>						Form 4	562 (201

FYE: 12/31/2011

7296 Salama Fellowship Urban Ministries, 58-2198012 Federal Asset Report Form 990, Page 1

Asset	Description	Date I <u>n Service</u>	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior Current
	r GDS Property: Computer Equipment	12/19/11 =	105 105	Х	0	5 MQ200DB	0 105 0 105
1 2 3 3 4 4 5 6 6 7 7 8 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 45 46 47 49 50 51 52 53 54 56 57 58	Refrigerator & Stove 2 U-Stations w/ Hutch & Bookcase 10' Conference Table Building Renovation Telephone System Powerite 5300 LCD Projector Epson Scanner 6 Black Leather Executive Chairs	11/06/98 2/26/98 2/11/99 2/11/99 5/05/99 8/12/99 9/30/99 7/30/99 11/04/99 12/16/99 12/16/99 11/11/99 3/07/00 2/23/00 4/20/00 10/12/00 2/17/00 2/28/00 3/03/00 3/31/00	54 98 800 600 600 1,050 100 500 685 3,130 600 2,000 800 1,100 406 640 93 1,295 250 750 360 476 530 725 2,160 150 2,200 223 2,538 560 3,747 2,671 600 238 1,895 7,162 1,987 2,189 303 82 200 158 852 149 39,408 852 149 39,408 519 12,400 15,000 3,595 255 360 2,576 825 450 690,187 7,050 1,000 225 468 335 5,640 12,452	X X X X X X X	54 98 800 600 600 1,050 500 685 3,130 600 2,000 800 1,100 406 640 93 1,295 2,50 750 360 476 530 725 2,160 150 2,200 223 2,538 560 3,747 2,671 600 238 1,895 7,162 1,987 2,189 303 82 200 158 852 149 39,408 519 12,400 10,500 2,516 179 2,516 179 2,516 1,516 1,516 1,516 1,517 1,517 1,517 1,517 1,517 1,517 1,517 1,517 1,516 1,517 1,5	5 HY 200DB 5 HY 200DB 5 HY 200DB 7 HY 200DB 7 HY 200DB 7 HY 200DB 7 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB 7 HY 200DB 7 HY 200DB 7 HY 200DB 7 HY 200DB 7 HY 200DB 7 HY 200DB 7 MQ 200DB 7 MQ 200DB 7 MQ 200DB 7 MQ 200DB 7 MQ 200DB 7 MQ 200DB 7 MQ 200DB 7 MQ 200DB 7 MQ 200DB 7 MQ 200DB 7 MQ 200DB 7 MQ 200DB 7 MQ 200DB	54

7296 Salama Fellowship Urban Ministries,
Federal Asset Report

58-2198012

Form 990, Page 1

	E: 12/31/2011	Fo	rm 990	, Page 1
		Date	Cost	Bus Sec Basis % 179Bonus for Depr PerConv Meth Prior Current
Asset	Description	In Service	Cost	1.175 5 MO200DB 1,175 0
67	Costumes	7/07/03 9/30/04	1,175 8,830	8,830 39 MM S/L 1,424 22/
	New Shower - 1203 Bldg	3/11/04	2,161	2,161 39 MM S/L 376 56 750 39 MM S/L 131 19
69 70	1203 Remodeling 1203 Remodeling	3/29/04	750	730 39 MIN 5/2 23
70 71	Carpet - 1203 Bldg	12/29/04	750	675 5 HY 200DB 675 0
72	Canon Digital Camera	1/29/04	675	2 952 5 HY 200DB 2,952 0
73	Dell Computer - Dimension 3000	9/15/04 7/12/04	2,952 380	380 5 HY 200DB 380 0
74	Powershot Digital Camera	3/30/04	600	600 7 HY 200DB 573 27 1 1 200DB 889 41
75	60 Black Chairs 89 Black Chairs	6/30/04	930	930 / 111 20000
76 77	Dell Computer (2.8GHz)	10/27/05	962	962 5 MQ200DB 962 6 5,055 7 MQ200DB 4,227 442
78	Refrigerator/Freezer/Warmer	12/19/05	5,055 665	665 7 MO200DB 600 58
79	Laminated Shelves	2/12/05 11/07/05	8,175	8,175 7 MQ200DB 6,837 713
80	Mural Painting	12/05/05	3,570	3,570 7 MQ200DB 2,986 311 16,790 5 MQ200DB 16,790 0
81 82	Casework 2004 Honda Accord	11/10/05	16,790	16,790 3 MIQZOOD
83	Southbend Range - Oven	6/30/06	4,287	161 7 MO200DB 124 14
84	Fax Machine	7/20/06	161 1,233	1 233 5 MO200DB 1,180 53 L
85	Laptop	6/15/06 9/25/06	1,233	662 5 MQ200DB 615 4/
86	Computer Equipment	9/25/06	43	43 3 MQ2000B
87 88	Computer Equipment Roland Piano (2)	11/03/06	2,782	2,762 1 141 2 2 6 6 7 7 7 1
89	Whiteboards and Equioment	10/19/06	6,130	2.437 7 MO200DB 1,825 213
90	Leather Highback Chair (8)	10/19/06	2,437 590	590 7 MO200DB 442 52
91	Highback Chair (2)	11/15/06 11/15/06	1,213	1,213 7 MQ200DB 909 103 1
92	Indiana Desk Board	11/27/06	350	330 / MQ200DB
93 94	Picture Frame New Sidewalk	2/21/06	334	334 15 MQ150DB 134 20 1,292 15 MQ150DB 497 80
95	Gas Line for Stove	6/30/06	1,292	1,252 15 MO150DB 771 115
96	Thermostat	1/06/06 6/20/07	1,921 5,198	5.198 7 HY 200DB 3,574 464
97	Carpet - 1213 8th Ave. South	6/05/07	3,043	3,043 15 HY 150DB 935 211
98	7.5 ton A/C Unit - 1213 8th Ave.	2/16/07	465	403 / 111 20000
99 100	Magazine Displays Laptop Cart	2/28/07	1,920	1,920 7 HY 200DB 1,924 120
101	Office Furniture	3/24/07	1,344 475	475 7 HY 200DB 327 42
102	File Cabinet, Book Case	3/25/07 2/22/07	174	174 7 HY 200DB 119 16
103	Bookcase	3/21/07	1,745	1,745 7 HY 200DB 1,200
104 105	Palladio Buffet Mini Mobile Unit	7/10/07	543	543 / HY 200DB 373 138 1
105		7/06/07	3,780	12.832 5 HY 200DB 10,615 1,478
107	15 Dell computers	5/23/07	12,832 458	458 5 HY 200DB 379 53
108	Dell Laser Printer	5/23/07 5/23/07	458	458 5 HY 200DB 379 33
	Dell Printer	5/25/07	1,960	1,960 5 HY 200DB 1,021 225
111 112		6/04/07	3,255), 50 5 HV 200DB 640 90
113		6/06/07	784	415 5 HY 200DB 343 48
114	Netgear	4/27/07 9/12/07	415 1,166	1,166 7 HY 200DB 801 104
115		9/12/07	625	625 7 HY 200DB 430 30
116		6/04/07	934	934 5 HY 200DB 464 65
117 118		6/20/07	56	468 7 HV 200DB 322 42
119		6/21/07	465 2,865	2 865 5 HY 200DB 2,370 330
120) NetGear	6/15/07 8/02/07	2,80. 7,77	7,776 7 HY 200DB 5,347 694
121		8/07/07	20:	202 7 HY 200DB 139 18
122 123		6/08/07	87	0 870 7 HY 200DB 398 41
123		6/11/07	45 26.74	0 7 HT 200DB 18,391 2,387
125	Access Control System	7/18/07	26,74 1,14	1,142 7 HY 200DB 786 102
120		6/21/07 4/30/07	13,17	13,173 7 HY 200DB 9,058 1,176
127		5/09/07	2,13	1 2,131 / HY 200DB 1,703
128 129		2/21/07	1,59	5 1,595 5 HY 200DB 1,517 4,497 5 HY 200DB 3,720 518
130		2/21/07	4,49	7 4,457 3 HT 200DB 261 34
13	l Camera	12/04/07 12/10/07	38 4,45	4,450 5 HY 200DB 3,681 513
132	2 Tracking for Laptops	4/20/07	13,29	0 13,290 5 HY 200DB 10,993 1,531
133		4/20/07	13,29	13,290 5 H1 200DB 341 48
134 135		4/20/07	41	3 413 5 HY 200DB 315 41
13.	6 Computer Case	4/20/07	45	1.364 7 HY 200DB 938 122
13	7 Computer Cart	4/20/07 6/04/07	1,36 5,38	r^{2} 201 5 11V 200DB 4.451 620
14	5 Windows server	0/04/07	5,50	
•				

7296 Salama Fellowship Urban Ministries,
58-2198012 Federal Asset Report

58-2198012

Form 990, Page 1

FYE: 12/31/2011

Asset	Description	Date In Service	Cost	Bus %		Basis s for Depr	PerConv Meth	Prior 1,738	Current 117
146	Computer Equipment	9/12/08	2,031		X X	1,016 165		258	20
140	Electronic Whiteboard	4/28/08	330 1,200		X X	600	7 HY 200DB	938	75
148	Mural Painting	4/28/08 9/30/08	418,967		4.5	418,967	39 MM S/L	24,619	10,743 348
149	1211 8th Avenue Bathroom Renovation	5/18/09	4,065			4,065		589 306	139
150 151	Sign	11/15/09	790			790 843		438	162
152	Computer Equipment - Dell	3/04/09	843 15,549			15,549		8,086	2,985
153	Computers & Peripherals- Dell	7/08/09				1,496,757	- I	508,308	50,570
+		=	1,505,456			1,470,737	=		
0.1	D					414) 3 MO S/L	410	0
<u>Other</u> 55	r <u>Depreciation:</u> Windows XP	9/11/02	410			410 46,71:		46,715	0
138	Odyssey Learning Softwate	2/27/07	46,715 3,170			3,170	* : - :	3,170	0
139	Sage Software	3/01/07 3/19/07	610			61	0 3 MOAmort	610 6,000	0
140		4/23/07	6,000			6,000		1,707	ő
141 142	School Recordecper FM Pro Nonprofit Software	5/01/07	1,707			1,70° 1,31°	,	1,310	0
142	Music Maestro Software	6/01/07	1,310 4,743			4,74		4,743	0
144		6/04/07				64,66	_	64,665	0
:	Total Other Depreciation		64,665				<u>~</u>		
		l-41au	64,665			64,66	5	64,665	0
	Total ACRS and Other Depa	rectation				=	=		:
1									
Amo	ortization:		4.014			4,21	1 2 MOAmort	351	2,105
154		11/29/10	4,211			4,21	<u> </u>	351	2,105
ļ			4,211			=====	<u> </u>		
									50.700
	O 17.4-la		1,574,437			1,565,63		573,324 0	
	Grand Totals Less: Dispositions and Tran	sfers	0				0	0	ŏ
1	Less: Start-up/Org Expense	:	0				<u>0</u>	573,324	52,780
	Net Grand Totals		1,574,437	:		1,565,63	<u>53</u>	313,327	
	1,40								

58-2198012

7296 Salama Fellowship Urban Ministries,
58-2198012 Bonus Depreciation Report

11/28/2012 1:07 PM

FYE: 12/31/2011

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
51 52 53 54	Costumes Dell Dimension 2300 Epson Stylus Printer Fax Machine Refrigerator & Stove 2 U-Stations w/ Hutch & Bookcase	9/15/01 9/04/02 4/08/02 5/14/02 2/05/02 3/08/02	15,000 3,595 255 360 2,576 825		0 0 0 0 0	0 0 0 0 0	4,500 1,079 76 108 773 248	10,500 2,516 179 252 1,803 577 315
57 58 146 147 148 155	10' Conference Table Computer Equipment Electronic Whiteboard Mural Painting	4/11/02 9/12/08 4/28/08 4/28/08 12/19/11 Form 990, Page 1	450 2,031 330 1,200 105 26,727	,	0 0 0 0 0	0 0 0 0 105 105	135 1,015 165 600 0 8,699	1,016 165 600 0 17,923
		Grand Total	26,727			105	8,699	17,923

58-2198012

7296 Salama Fellowship Urban Ministries, 58-2198012 **Depreciation Adjustment Report**

FYE: 12/31/2011

All Business Activities

Tax

AMT ___

AMT
Adjustments/
Preferences

11/28/2012 1:07 PM

Description Form Unit Asset There are no assets that meet the criteria of this report

7296 Salama Fellowship Urban Ministries,
58-2198012 Future Depreciation Report FYE: 12/31/12

FYE: 12/31/2011

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Prior M	ACRS:			2	^
1	SURGE PROTECTOR	10/16/96 10/16/96	54 98	0	0
2	46X60 CHAIR MAT Desk	6/30/96	800	ő	0
3 4	Credenza	6/30/96	600	0	0
5	Conference Chairs (6)	6/30/96	600	0	$0 \\ 0$
6	Office Chairs (3)	6/30/96	1,050 100	0	0
7	Office Chair	6/30/96 6/30/96	500	ő	ő
8 9	Table and Chairs (4) RAMP	1/26/96	685	ő	0
10	ARCHITECT SERVICES	1/30/96	3,130	0	0
iĭ	PRINTER	10/08/96	600	0	0
12	Computer	6/30/96 1/16/97	2,000 800	0	ő
13	HP lazer Jet Printer	5/16/97	1,100	ŏ	ŏ
14 15	CARPET 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 6/30/97	1,295 250	0	0
19	Laminator Cabinet	6/30/97	750	ŏ	0
20 21	CAMCORDER 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 3/06/98	725 2,160	0	ő
25	STACKING CHAIRS AND STORAGE CABIN	11/06/98	150	ŏ	ő
26 27	G.E. 31" TV 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 8/12/99	560 300	0	ő
31	Printer 2 Dell Computers	9/30/99	3,747	ŏ	Ő
32 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	0
36	Dell Computer	12/16/99 11/11/99	1,895 7,162	0	ő
37	Telephone System Table & Chairs	11/22/99	1,987	Ö	0
38 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	82 200	$0 \\ 0$	0
42	PRINTER	10/12/00 2/17/00	200 158	0	Ö
43 45	PRINTER CABINETS	2/17/00	852	0	0
45 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 4/12/01	519 12,400	0	0
50	1999 Ford XL Van Costumes	9/15/01	15,000	ŏ	0
51 52	Costumes Dell Dimension 2300	9/04/02	3,595	Ō	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 3/08/02	2,576 825	0	0
57 58	2 U-Štations w/ Hutch & Bookcase 10' Conference Table	4/11/02	450	0	0
58 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	1,000 225	0 0	0
62	Epson Scanner	10/27/03 9/25/03	468	0	ő
63 64	6 Black Leather Executive Chairs 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 8,830	$\begin{array}{c} 0 \\ 226 \end{array}$	0
68	New Shower - 1203 Bldg	9/30/04 3/11/04	2,161	55	0
69 70	1203 Remodeling 1203 Remodeling	3/29/04	750	19	0
,0	Caronicacing				

7296 Salama Fellowship Urban Ministries,
58-2198012 Future Depreciation Report FYE: 12/31/12

FYE: 12/31/2011

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
71	Carpet - 1203 Bldg	12/29/04	750	0	0
72	Canon Digital Camera	1/29/04	675	0	0
73	Dell Computer - Dimension 3000	9/15/04	2,952	0 0	0
74	Powershot Digital Camera	7/12/04 3/30/04	380 600	0	ő
75	60 Black Chairs	6/30/04	930	ŏ	ŏ
76 77	89 Black Chairs Dell Computer (2.8GHz)	10/27/05	962	0	0
78	Refrigerator/Freezer/Warmer	12/19/05	5,055	386	0
79	Laminated Shelves	2/12/05	665	7	0
80	Mural Painting	11/07/05	8,175	625	0
81	Casework	12/05/05	3,570	273 0	0
82	2004 Honda Accord	11/10/05 6/30/06	16,790 4,287	380	ŏ
83	Southbend Range - Oven	7/20/06	161	14	ŏ
84 85	Fax Machine Laptop	6/15/06	1,233	0	0
86	Computer Equipment	9/25/06	662	0	0
87	Computer Equipment	9/25/06	43	0	0
88	Roland Piano (2)	11/03/06	2,782	243 536	0
89	Whiteboards and Equioment	10/19/06	6,130 2,437	212	ő
90	Leather Highback Chair (8)	10/19/06 11/15/06	2,437 590	51	ŏ
91 92	Highback Chair (2) Indiana Desk Board	11/15/06	1,213	106	0
92	Picture Frame	11/27/06	350	30	0
94	New Sidewalk	2/21/06	334	20	0
95	Gas Line for Stove	6/30/06	1,292	76	0
96	Thermostat	1/06/06	1,921	113 464	$0 \\ 0$
97	Carpet - 1213 8th Ave. South	6/20/07	5,198 3,043	190	ő
98	7.5 ton A/C Unit - 1213 8th Ave.	6/05/07 2/16/07	3,043 465	42	ŏ
99	Magazine Displays	2/16/07	1,920	171	0
100 101	Laptop Cart Office Furniture	3/24/07	1,344	120	0
102	File Cabinet, Book Case	3/25/07	475	43	0
103	Bookcase	2/22/07	174	15	0
104	Palladio Buffet	3/21/07	1,745	155 48	0 0
105	Mini Mobile Unit	7/10/07	543 3,780	337	0
106	Hufcor 3500	7/06/07 5/23/07	12,832	739	ŏ
107 108	15 Dell computers Dell Laser Printer	5/23/07	458	26	0
110	Dell Printer	5/23/07	458	26	0
111	Dell PC	5/25/07	1,960	113	0
112	Microsoft Server	6/04/07	3,255	188 45	0
113	Flash Drive	6/06/07	784 415	43 24	ő
114	Netgear	4/27/07 9/12/07	1,166	104	ŏ
115 116	Faceplate and Doorcloser Camera System	9/30/07	625	55	0
117	Screen Protector	6/04/07	934	53	0
118	Dell Printer	6/20/07	561	32	0
119	Server Stand	6/21/07	468	41	0
120	NetGear	6/15/07	2,865	165 694	0
121	Sharp Stereo Equipment	8/02/07 8/07/07	7,776 202	18	ő
122	Sharp Case	6/08/07	870	77	Õ
123 124	Sony Equipment Pro Team Motor	6/11/07	450	40	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	1,175	0 0
128	Telephone System	5/09/07	2,131 1,595	190 92	0
129	Dell Laptop	2/21/07 2/21/07	4,497	259	ő
130	Dell Laptop Camera	12/04/07	380	34	0
131 132	Tracking for Laptops	12/10/07	4,450	256	0
133	Dell Computers	4/20/07	13,290	766	0
134	Dell Computers	4/20/07	13,290	766 24	0
135	Computer Equipment	4/20/07	413	24 40	0
136	Computer Case	4/20/07 4/20/07	458 1,364	121	0
137	Computer Cart	6/04/07	5,381	310	0
145 146	Windows server Computer Equipment	9/12/08	2,031	117	0
146	Electronic Whiteboard	4/28/08	330	15	0
148	Mural Painting	4/28/08	1,200	53	0
149	1211 8th Avenue	9/30/08	418,967	10,742	0
1					

7296 Salama Fellowship Urban Ministries,
58-2198012 Future Depreciation Report FYE: 12/31/12 58-2198012

Form 990, Page 1 FYE: 12/31/2011

Asset 150 151 152 153 155	Description Bathroom Renovation Sign Computer Equipment - Dell Computers & Peripherals- Dell Computer Equipment	Date In Service 5/18/09 11/15/09 3/04/09 7/08/09 12/19/11	Cost 4,065 790 843 15,549 105 1,505,561	Tax 313 98 97 1,791 0 44,842	AMT 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Other D	Depreciation:				
55 138 139 140 141 142 143 144	Windows XP Odyssey Learning Softwate Sage Software CD Maestro Software School Recordeeper FM Pro Nonprofit Software Music Maestro Software Classroom Software Total Other Depreciation Total ACRS and Other Depreciation	9/11/02 2/27/07 3/01/07 3/19/07 4/23/07 5/01/07 6/04/07	410 46,715 3,170 610 6,000 1,707 1,310 4,743 64,665	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0
<u>Amortiz</u>	zation:				
154	Loan Costs	11/29/10	4,211 4,211	1,755 1,755	0
	Grand Totals		1,574,437	46,597	0

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Federal Statements

7296 Salama Fellowship Urban Ministries, 58-2198012 FYE: 12/31/2011

	Form 990, P	Part IX, Line 24e - All Other Expenses	e - All O	ther Expense	ωl			
Description	Щ	Total Expenses	L **	Program Service	Mana Ge	Management & General	 L	Fund Raising
Special Events		32	w	412	์		₩	25,911
- [•	25,405		rU ,				
College Student Support		4,08		4,08				
		4,50		, 28		$^{\prime\prime}$		
		3,70		3,13		565		
Equipment Rental		3,01		2,69				
		70		80				903
Miscellaneous		82		, 31		3,734		~
Donations and Benevolence		79		, 79				
Janitorial Service		7.5		, 75				
Set Up/Tear Down		63		, 63				
Telephone		,24		,82		N		
Computer Expense		25		90		1,802		2,550
Tuition Discount		, O1				, 01		
Office Supplies		9		99,		, 14		152
Supplies & Curriculum		48		5,482				
Professional Fees		,43		0		75		4,563
Printing		4,		97			÷	ή ω
Costume Company Expense		40		5,400				
ion		, 16						4,160
Travel		20		2,207				
Dues and Subscriptions		74		10,				641
Postage		,72		1		284		9
Hospitality		, 4 C		4		9		
Trash Removal		23		1,232				
Staff Development		LG }		ŝ		531		06
Taxes and Licenses		(*)				ന		
Activity		\circ		0				
College and Career Prep		цγ		650				
		4						
Volunteer Expense		9		9			***************************************	
Total	₩ 	223,631	₩.	157,266	·Ω·	20,474	᠊ᠬ	45,891

Federal Statements

7296 Salama Fellowship Urban Ministries, 58-2198012 FYE: 12/31/2011

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Amount	\$ 505,471	24,412	32,203	78,666	22,890	21,500	26,000	45,000		\$ 882,123
Description	Mr. & Mrs. Edward E. Murrey, III	Cash Contribution Soli Deo Gloria Foundation	Cash Contribution United Way Metro Nashville	Cash Contribution Mr. Richardson M. Roberts	Cash Contribution Mr. & Mrs. Rivers Rutherford	Cash Contribution Mr. & Mrs. Havev Cummings	Cash Contribution Dan&Margaret Maddox Charitable Fund		Cash Contribution	Total