#### 201010 06/07/2010 2:46 PM 990

## TAXPAYER'S COPY

#### Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except black lung

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

OMB No. 1545-0047 2009 Open to Public

Department of the Treasury Internal Revenue Service

benefit trust or private foundation)

For the 2009 calendar year, or tax year beginning UNITED METHODIST RENEWAL SERVICES Please Employer identification number C. Name of organization Check if applicable: use IRS FELLOWSHIP, INC Address change labei or 58-1322015 ALDERSGATE RENEWAL MINISTRIES, Doing Business As print of Name change Telephone number type. Number and street (or P.O. box if mail is not delivered to street address) Room/suite inisal return See 615-851-9192 121 EAST AVENUE Specific Termination City or town, state or country, and ZiP + 4 G Gross receipts \$ GOODLETTSVILLE TW 37072 Amended return finns H(a) is this a group return for Name and address of principal officer: Application pending X No affiliates? JONATHAN DOW Yes Are all affiliates 121 EAST AVENUE GOODLETTSVILLE TN 37072 If "No," attach a list. (see instructions) X 501(c) ( 3 ) **∢** (insert no.) 4947(a)(1) or Website: > www.aldersgaterenewal.org H(c) Group exemption number 1978 M State of legal domicile: Type of organization: X Corporation Trust Association Parti Summary Briefly describe the organization's mission or most significant activities: TO ENCOURAGE INDIVIDUALS AND THEIR CHURCHES BY THE GRACE OF GOD AND THE Activities & Governance LOVE OF OUR LORD JESUS CHRIST TO BE FILLED, GIFTED, EMPOWERED, AND LED BY THE HOLY SPIRIT IN MINISTRY TO THE WORLD. 2 Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a 7b b Net unrelated business taxable income from Form 990-T, line 34 ...... Prior Year Current Year 693,589 627,469 Contributions and grants (Parl VIII, line 1h) Revenue 213,415 210.755 Program service revenue (Part VIII, line 2g) -139;39680.588 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 35,585 34,020 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 803,193 952. Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) 12,763 Benefits paid to or for members (Part IX, column (A), line 4) 519,910 405,239 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e)
b Total fundraising expenses (Part IX, column (D), line 25) ► 55, 718 5,500 6,225 568,281 577,269 17 Other expenses (Parl IX, column (A), lines 11a-11d, 11f-24f) ...... 1,097,811 1,001,496 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) -294,618-48,664 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year Assets or Balances End of Year 1,924,492 1,889, 20 Total assets (Part X, line 16) ,797 91,097 21 Total liabilities (Part X, line 26) 798,031 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. TAXPAYER ign Signature of officer lare EXECUTIVE DIRECTOR JONATHAN DOW Type or print name and title Preparer's identifying number Date Check If Preparer's (see instructions) aid employec > 06/07/10 signature McMurrav reparer's McMurray & Associates, CPA's ∃IN ► Firm's name (or yours se Only 641 E Main St if self-employed).

37075-2606

Hendersonville,

by the IRS discuss this return with the preparer shown above? (see instructions) Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. ★ 615-824-2724

					<u></u>	Ye	s No
1					1	X	,
	complete Schedule A						X
2					·	-	1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to				3	1	X
	candidates for public office? If "Yes," complete Schedule C, Part I			• • • • •	.   3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete				4		Х
	Schedule C, Pari II			• • • • •	-	+	$+$ $\frac{\Delta}{\Delta}$
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. is the organization subject to the section 6033(e)				5		
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III				1 3	+	+
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have						
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"						X
	complete Schedule D, Part I				6	1	1 1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,				_	İ	37
	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,"						1,
	complete Schedule D, Part III	<i></i>			8	+	<u> </u>
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,"						١.,
	complete Schedule D, Part IV				9	┼	X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or						
	quasi-endowments? If "Yes," complete Schedule D, Part V				10	I.X	1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,				-		
	VII, VIII, IX, or X as applicable	, .			11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete						
	Schedule D, Part VI.					1	
-4	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more						
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.						
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more						
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.						
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets						
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.						1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.						
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses						
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.						
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete						
	Schedule D, Parts XI, XII, and XIII.				12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?		Yes	No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.	12A		X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E				13		X
	Did the organization maintain an office, employees, or agents outside of the United States?				14a		Χ
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			, , , ,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I				14b	Ì	X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any				Ī		
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II				15		X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance					1	
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III				16		Χ
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			· · · · · · · · · · · · · · · · · · ·		1	
					17	Taranta dan	X
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I			}			
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	-			18	į	X
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II				101		<u> </u>
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?				15		Х
	f "Yes," complete Schedule G, Part III			}			X
0 5	old the organization operate one or more hospitals? If "Yes." complete Schedule H		<u> </u>	<u></u>	20		

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Checklist of Required Schedules (continued) Yes Νo Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants and other assistance to individuals in the 22 United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Χ Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 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 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a Χ with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 Χ Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other-assistance to an officer, director, trustee, key employee, 27 substantial contributor, or a grant selection committee member, or to a person related to such an individual? Χ If "Yes," complete Schedule L, Part III 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): Χ A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Χ Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Χ conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Χ Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Χ sections 301,7701-2 and 301,7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, Χ III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Χ Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Χ organization? If "Yes," complete Schedule R, Part V, line 2 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, Χ 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 38 19? Note, All Form 990 filers are required to complete Schedule C.

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	Part V Statements Regarding Other IRS Filings and Tax Compliance			
10000		Extract.	Yes	N
1:	a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
ŧ	The state of Ferry W. 20 traded in line to Enter O if not applicable			
c	District and in the second with health withholding rules for reportable payments to vendors and reportable			400
	gaming (gambling) winnings to prize winners?	10		<u> </u>
 2	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 22 12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			I
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	<b> </b>		
	finis return?	3a		<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	48		X
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		ļ
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-		1
	organization solicit any contributions that were not tax deductible?	6a	X	ļ <del></del>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			i i
	gifts were not tax deductible?	6b	X	<del>consolità</del>
,	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			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		········
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	200000000000000000000000000000000000000	************
4	If "Yes," indicate the number of Forms 5282 filed during the year	_		
₿	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	70		
ì	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h	**********	<del>88888888</del>
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
1	organization, have excess business holdings at any time during the year?	8	000000000000000000000000000000000000000	000000000
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		•
Ī	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		2004000\$!
5	Section 501(c)(7) organizations. Enter:			
	nitiation fees and capital contributions included on Part VIII, line 12			
C	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
5	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
G	Bross income from other sources (Do not net amounts due or paid to other sources against			
а	mounts due or received from them.)			
S	ection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a -		
	"Yes," enter the amount of tax-exempt interest received or accrued during the year			

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

		1a	1 27		Ye	s Ni
1a		1b	$\frac{27}{27}$			
b	Enter the number of voting members that are independent	מז	] 2;			
"2	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?			····   <del></del>	<del> </del>	12
3	Did the organization delegate control over management duties customarily performed by or under the direct			3		X
	supervision of officers, directors or trustees, or key employees to a management company or other person?					X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed				_	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?			<del>[</del>		$\frac{1}{X}$
6	Does the organization have members or stockholders?					+-^-
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			7-		X
	of the governing body?			7a 7b		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during					
	the year by the following:				X	******
а	The governing body?			8a	1	1
þ	Each committee with authority to act on behalf of the governing body?			8b	1	1
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached					X
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		1V
	tion B. Policies (This Section B requests information about policies not required by the Inte	IIIai				
Rev	enue Code.)		· · · · · · · · · · · · · · · · · · ·	······································	Yes	No
				10a	1	X
	Does the organization have local chapters, branches, or affiliates?				+	1 4
þ	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			10b		
	affiliates, and branches to ensure their operations are consistent with those of the organization?				1	<u> </u>
1	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the					X
	form?			11		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			40-	34 2000 2000 	X
	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	<del> </del>	1 2
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			4.05		
	rise to conflicts?			12b	1	
	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			1.5		
	describe in Schedule O how this is done					1 37
	Does the organization have a written whistleblower policy?				-	X
	Does the organization have a written document retention and destruction policy?			14	 	. A
	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?					
	The organization's CEO, Executive Director, or top management official			i	X	
	Other officers or key employees of the organization	<i>.</i> .		.   15b	X	*********
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
a [	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	**********	X
	f "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate					
	ts participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard					
ti	he organization's exempt status with respect to such arrangements?		.,	16b		
	on C. Disclosure			<del></del>		
	ist 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 (501(c)(3)s only)					
a	valiable for public inspection. Indicate how you make these available. Check all that apply.					
	Own website Another's website X Upon request					
D	rescribe in Schedule C whether (and if so, how), the organization makes its governing documents, conflict of interest					
	olicy, and financial statements available to the public.					
Si	tate the name, physical address, and telephone number of the person who possesses the books and records of the					
	menization > INTERD METHODIST RENEWAL SERVICES, 121 EAST AVENUE					

37072

compensated employees; and former such persons.

Form 990 (2009) UNITED METHODIST RENEWAL SERVICES

Part VII Compensation of Officers, Directors, Trustees, Key Em

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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. Use Schedule J-2 if additional space is needed.
- 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. 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

Check this box if the organization did not compensate any current (A)  (A)  (B)  (C)  Name and Title  Average hours per position (check all positi								(D) Reportable	(E) Reportable	(F) Estimated
		or director		Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JONATHAN DOW  EXECUTIVE DIRECTOR	40.00	X						59,602	. 0	0
JAIME ALEXANDER DIRECTOR		Х						0	0	. 0
LARRY BAKER DIRECTOR		X						0	0	0
NIC BILLMAN DIRECTOR		Х				1		.0	0	0
MARY BOLTON DIRECTOR		Х						0	0	0
JOHN BROWER DIRECTOR		X						0	0	0
TRUDY BROWN DIRECTOR		X						0	0	0
KAY CASE DIRECTOR		Х						0	0	0
TERISA CLARK DIRECTOR		χ						0	0	0
GREIG CROWDER DIRECTOR	Angele and	$\mathbf{x}$						0	0	0
MARTHA DAIGNEAU DIRECTOR		X		x				0	0	0
MARYANNE DITTER DIRECTOR		X						0	o	. 0
DAVE GEARHART DIRECTOR		X	2	<			Parameters	0	<u> </u>	0
CANDY HALLETT DIRECTOR		x						0	0	0
GLEN HAWORTH	2.2	χ						0	. 0	0
ANDY LAMBRECHT	]	₹	>					0	0	<u> </u>
JERRY LIPKA	>	2	У					0	ol	0

Form 990 (2009) UN	IITED ME	ETHODIST	RE	CNE	WA:	L	SE:	RV]	ICES 58-132		Page
Part VIII Section	on A. Officers	, Directors, Tru	stees	s, Ke	y Er	nplo	yees	, anı	d Highest Compensated E		f
(A) Name and T	'itie -	(B) Average hours per week	8 Individual trustee			C k Key employee	a Highest compensated	pp Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
CARRIE LOC	K		Х						0	0	,
LORIN PEDI	GO		X						0	0	
RANDA RAY	,	,	X						0	0	
RICHARD RH	ODES		X						0	0	
TINA ROACH DIRECTOR			X		Х				0	0	
ANNE SMITH			Х						. 0	0	(
GAREN SMITI	I		X						0	0	(
CONNIE TENI	AASON		X						0	0	(
TIM TROWBRI	IDGE		X						0	0	(
RICK VANCE DIRECTOR			X						0	0	(
BILL WOODS			Х						0	0	(
, , , , , , , , , , , , , , , , ,											
1b Total							, )	-	59,602		
Did the organization employee on line 1:     For any individual lithe organization and individual      Did any person liste	sation from the  list any forma ? If "Yes," con sted on line 1a d related organ	er officer, director plete Schedules, is the sum of relizations greater ceive or accrue	or or to J for eport than	trusti suc able \$15	ee, k h inc com 0,00	ey e fividi ipen 0? If	mplo ual , satio "Yes	yee, n and s," co	related organization for		
Section B. Independent	t Contractors								····	<del></del>	
Complete this table compensation from	the organization	on.	ated i	ndep	pend	ent (	contr	actor	rs fnat received more than t		(C) Compensation
	(A) Name and-busi	ness address					_		Description	B) n of services	Compensation
Total number of inde						d to	those	iste	ec above) who received		0.00

=n:r	- P	90 (2009) UNITED METH	HODIST	RENEWAL	SERVICES	<u> 58-1322015</u>	<u> </u>	Page 9
		VIII Statement of Reve						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>න</u> හ	1:	a Federated campaigns	1a					
E S		b Membership dues	1b					
9.0		c Fundraising events	1c					
ifts		d Related organizations	1d					
3,5		Government grants (contributions)	1e					
roi		f All other contributions, gifts, grants,						
15.E		and similar amounts not included above	1f	627,469	3			
Contributions, gifts, grants and other similar amounts		Noncesh contributions included in lines 1a-1	i: \$					
ည်း	ř	Total. Add lines 1a-1f		<u>.,</u>	627,469	)		
e l				Busn, Code	- <del></del>			
Program Service Revenue	2a	REGISTRATION			114,343	1		114,343
Re	b				63,721			63,721
/ice	c				32,691			32,691
Serv	d							
E .	е			i		<u> </u>		
ogra	f	All other program service revenu						
5	g	Total, Add lines 2a-2f		<u></u>	210,755			
	3	Investment income (including div	ridends, inte	rest, and				00.000
			, . ,		80,232			80,232
	4	Income from investment of tax-e.	xempt bond	proceeds -				
ĺ	5	Royalties	<u></u>	<u></u>				
		(i) Real		ii) Personal				
	6а	Gross Rents						
1	b	Less: rental exps.						
		Rental inc. or (loss)	<u> </u>					
		Net rental income or (ioss)		<b>&gt;</b>				
	12	sales of assets (i) Securities		(ii) Other				
		other than inventory		3,000				
	þ	Less: cost or other						
		basis & sales exps.	<u>_</u>	2,644				
		Gain or (loss)		356	356	356		
		Net gain or (loss)		<u> </u>	220	220		
6		Gross income from fundraising events						
Offier Revenue		(not including \$	-					
₹ev		of contributions reported on line 1c).	_					
10		See Part IV, line 18						
		Less: direct expenses	- 1					200 200 200 200 200 200 200 200 200 200
3		Net income or (loss) from fundrais	ing events.	F	<u> </u>			
]		Gross income from gaming activities.						
		See Part IV, line 19	1					
		Less: direct expenses	<u> </u>	<u> </u>				
Ł		Net income or (loss) from gaming	acuvines					
טר		Gross sales of inventory, less						
. ] ,		eturns and allowances .ess: cost of goods sold	b					
		less: cost of goods solo	<del></del>	. •			***************************************	
	<u> </u>	Miscellaneous Revenue	.,, - O. 1(O1 Y _	Busn, Code				
44	=	BUILDING RENT			34,020			34,C20
i .	-				1			
	o.			1 1	1			
	, v	all other revenue		1 1	THE PARTY OF THE P			
		otal. Add fines 11a-11d			34,020			
1		otal Revenue. See instructions.			952,832	356	0	325,007
112								Form 990 (2009)

#### Form 990 (2009) Part IX S Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	o not include amounts reported on lines 6b, a, 8b, 9b, and 10b of Part VIII.	st complete column (A) but a (A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
***************************************	Grants and other assistance to governments and				
7	organizations in the U.S. See Part IV, line 21				
`2					
2	the U.S. See Part IV, line 22				
•	Grants and other assistance to governments,	-			
٦,	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
,	Benefits paid to or for members	12,763	12,763		
4 =	Compensation of current officers, directors,				
5	trustees, and key employees	59,602	59,602		
	Compensation not included above, to disqualified	33,002			
6	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
_		225,611	140,047	57,043	28,521
7	Other salaries and wages Pension plan contributions (include section 401(k)	223,011		0.7020	20100
8	•				
•	and section 403(b) employer contributions)	100,157	70,110	20,031	10,016
9	Other employee benefits	19,869	13,908	3,974	<u> </u>
10	Payroll taxes	32,002	20,000		
11	Fees for services (non-employees):				
	Management				·
	Legal	8,812	4,406	4,406	
C	Accounting	0,012	<u> </u>	7,300	
ď	Lobbying	6,225			6,225
	Professional fundralsing services. See Part IV, line 17	0,223			9,223
	Investment management fees		<u> </u>		
	Other	70 006	0 147	9,147	
	Advertising and promotion	18,294	9,147		0.060
	Office expenses	51,216	31,886	10,361	8,969
14 I	nformation technology	8,249	1	8,249	
	Royalties	F= F00	`		
16 (	Decupancy	51,539	51,539		,
	[ravel	88,053	88,053		· · · · · · · · · · · · · · · · · · ·
	Payments of travel or entertainment expenses				
	or any federal, state, or local public officials	~ 0 ~ 1 O	<u> </u>		
9 (	Conferences, conventions, and meetings	58,118	58,118	2 0 2 0	
tr Ott	nterest	3,878		3,878	
1 P	ayments to affiliates			40 600	
2 D	epreciation, depletion, and amortization	48,609	1	48,609	
3 Ir	nsurance	21,028	9,417	11,611	
4 0	ther expenses. Itemize expenses not				
cc	overed above. (Expenses grouped together				
ar	nd labeled miscellaneous may not exceed				
59	% of total expenses shown on line 25 below.)				
а	CONTRACT SERVICES	74,477	74,477		
ь.,	PURCHASES	34,634	34,634		
c	MEALS AND ENTERTAINMENT	33,758	33,758		
	UTILITIES	20,751		20,751	
	REPAIRS & MAINTENANCE	14,714		14,714	
٠,	other expenses	41,139	14,274	26,865	
To	tal functional expenses. Add lines 1 through 241	1,001,496	706,139	239, 639	55,718
Joi SC org froi	int costs. Check here  if following				

		990 (2009) UNITED METHODIST RENEW	<u> </u>	EKVICES 30	<u>3-1322U13</u>		Page 11
<u> </u>	Par	X Balance Sheet			(A)		(B)
					Beginning of year		End of year
	Τ.	1 Cash—non-interest bearing			145,56	5 1	79,642
	- 1					2	
	1	•				3	
	-   -	Pledges and grants receivable, net				4	
	4	17	uetees l	COV			
	5	employees, and highest compensated employees. Compi					
		Schedule L			, , , , , , , , , , , , , , , , , , ,	5	
•			nder sen	vion			
	6	4958(f)(1)) and persons described in section 4958(c)(3)(B					
		771 77				6	
ŝ	_	***************************************				7	800
Assets	7	***************************************			46,034	8	35,852
S S	8					9	
_	1 9		1			<u> </u>	
	10	a Land, buildings, and equipment: cost or	100	1,824,497			
	1.	other basis. Complete Part VI of Schedule D	105	559,656	1,304,646	100	1,264,841
	1	b Less: accumulated depreciation			428,247		507,993
	111	investments—publicly traded securities	220727	12			
	12	Investments—other securities. See Part IV, line 11		+		13	
	13	Investments—program-related. See Part IV, line 11		i		14	
	14	Intangible assets				15	
	15	Other assets. See Part IV, line 11	1,924,492		1,889,128		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	18,341		38,393		
	17	Accounts payable and accrued expenses		<u> </u>	18		
	18	Grants payable		· · · · · · · · · · · · · · · · · · ·		19	
	19	Deferred revenue				20	
	20	Tax-exempt bond liabilities				21	
Liabilities	21	Escrow or custodial account liability. Complete Part IV of So		U			
	22	Payables to current and former officers, directors, trustees,					
ab		employees, highest compensated employees, and disqualif		.3		22	
$\exists$		persons. Complete Part II of Schedule L				23	
	23	Secured mortgages and notes payable to unrelated third pa		ľ		24	
	24	Unsecured notes and loans payable to unrelated third partie			59,456		52,704
	25	Other liabilities. Complete Part X of Schedule D			77,797		91,097
1	26	Total liabilities. Add lines 17 through 25			1171211	20	517057
es		Organizations that follow SFAS 117, check here	and				
Balances		complete lines 27 through 29, and lines 33 and 34.		P**	1,314,287	27	1,222,506
ala	27	Unrestricted net assets			104,161	28	67,532
		Temporarily restricted net assets			428,247	29	507,993
E	29	Permanently restricted net assets Organizations that do not follow SFAS 117, check here I	· · · · · · · · ·		720,297	<u> </u>	301,333
团							
or Fund		and complete lines 30 through 34.	<b> </b> **		20		
					30		
386		Paid-in or capital surplus, or land, building, or equipment fun				31	<u> </u>
AS.		Retained earnings, endowment, accumulated income, or oth		4	7 0/6 605	32	1,798,031
Net Assets		Total net assets or fund balances			1,846,695	33	
<u> </u>	34	Total liabilities and net assets/fund balances			1,924,492	34	1,889,128 Form 990 (2009)

Form 990 (2009)

For	m 990 (2009) UNITED METHODIST RENEWAL SERVICES 58-1322015		Pa	age 12
P	ar XI Financial Statements and Reporting			
			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	Charles and the second of the	2a		X
· in	Were the organization's financial statements audited by an independent accountant?	2b	Х	
	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?	20	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
٠.	Schedule O.			
ď	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
_	issued on a consolidated basis, separate basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
2~	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		1	or and the second
ಾಧ	the Single Audit Act and OMB Circular A-133?	3a		X
L.	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		1	+ 4
Ð	Trees, the tree organization entering the required about of abouts: If the organization and the street such such such such such such such such	3b	1	

Form 990 (2009)

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SCHEDULE A (Form 990 or 990-EZ)

## Public Charity Status and Public Support

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

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

2009

inspection

OMB No. 1545-0047

Internal Revenue Service
Name of the organization

Department of the Treasury

UNITED METHODIST RENEWAL SERVICES

Employer identification number 58-1322015

		EPPPOMPUTE,							<u> </u>			
Part	Re	ason for Public Chari	ty Status (All organization	ns must	comple	te this	part.)	See i	nstructi	ions.		
		not a private foundation becau	ise it is: (For lines 1 through 11,	check only	one box.)	)						
1 X	A church,	convention of churches, or as	ssociation of churches described	in section	170(b)(1	)(A)(i).						
2		lescribed in section 170(b)(1										
3			vice organization described in se	ction 170	(b)(1)(A)(i	ii).						
4	A medical	research organization operat	ed in conjunction with a hospital	described	in section	170(b)(	(1)(A)(iii	). Enter	the hosp	ital's name,		
	city, and st			<b></b> .								
5	An organiz	ation operated for the benefit	of a college or university owned	or operate	ed by a go	vernmen	ital unit i	describs	ed in			
		'0(b)(1)(A)(iv). (Complete Pa										
6	A federal, s	state, or local government or	governmental unit described in s	ection 17	0(b)(1)(A)	(v).						
7	An organiz	ation that normally receives a	substantial part of its support fro	om a gove	rnmental (	unit or fro	om the g	jeneral j	oublic			
	described i	n section 170(b)(1)(A)(vi). (	Complete Part II.)									
8	A commun	ity trust described in section	170(b)(1)(A)(vi). (Complete Part	: II.)								
9	An organiza	ation that normally receives: (	1) more than 33 1/3 % of its sup	port from o	contributio	ns, men	bership	fees, a	nd gross			
i	receipts fro	m activities related to its exer	mpt functions—subject to certain	exception	s, and (2)	no more	than 30	3 1/3 %	of its			
	support from	n gross investment income a	nd unrelated business taxable in	come (les	s section :	511 tax)	from bu	sinesse	\$			
			30, 1975. See section 509(a)(2).									
10			exclusively to test for public safe									
11			exclusively for the benefit of, to p				сапу о	ut the				
البسيا	purposes of	one or more publicly support	ted organizations described in se	ection 509(	a)(1) or se	ection 50	19(a)(2).	See se	ction			
			the type of supporting organization									
	а Тур		c Type III-Function			d		pe IIIO	ther			
e 🗍			anization is not controlled directl	y or indire	ctly by one	or more	e disqua	lified				
ئے -	persons other	er than foundation managers	and other than one or more pub	licly suppo	orted organ	nizations	describ	ed in se	ection			
	•	section 509(a)(2).										
			rmination from the IRS that it is a	a Type I, T	ype II, or	Type III s	supporti	ng				
		, check this box										
			ion accepted any gift or contribu	tion from a	any of the			,,,,,,,	, , , , , , , , , ,			-
g	following pe		, , , , , , , , , , , , , , , , , , ,									
			ntrols, either alone or together w	ith person	s describe	ed in (ii)					Yes	No
			the supported organization?	•						11g(i)		
		member of a person describ						,		11g(ii	I	
		controlled entity of a person d							, , , ,	119(11	)	1
		following information about the				, , , , , , ,				, , . hamatan	***************************************	*********
		(ii) EIN	(iii) Type of organization	(iv) is the	organization	(v) Did v	ou notify	(vi)	is the	(vii) An	iount of	***************************************
	of supported nization	(11) 218	(described on lines 1–9	1 1	isted in your	the organ	nization in	organiza	tion in col.	sup	port	
			above or IRC section	governing	document?		of your port?		ized in the S.?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
				1				i i				
				<del> </del>				<u> </u>				
										•		
	<u> </u>			<u> </u>								
				!								
				!				]				
		Angel		'		ļ			!			
						<u> </u>			<u> </u>			
	35	#\$####################################		ggggggggggggggg	angga angga kitalog si Pilik	A CONTRACTOR CONTRACTOR (A)	0.0000000000000000000000000000000000000	1000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			

345

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2009

18

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12

15

16a

20

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 UNITED METHODIST RENEWAL SERVICES

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Se	ection A. Public Support						
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
។	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ģ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the	ļ					
	amount on line 13 for the year		<u> </u>				
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						,
	tion B. Total Support			1 () 2007	1.20.0000	(-) 2020	(5) Total
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(đ) 2008	(e) 2009	(f) Total
9	Amounts from line 6					<u> </u>	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				,		
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				-		
C	Add lines 10a and 10b					1	
1	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on			.			
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
3	Total support. (Add lines 9, 10c, 11,			- American			
	and 12.)			<u></u>			
4	First five years. If the Form 990 is for the o						<b>.</b> [
	organization, check this box and stop here	<u> </u>	<u></u>	<u> </u>		<u></u>	<u> </u>
	on C. Computation of Public Su					15	9%
	Public support percentage for 2009 (line 8, c						%
	Public support percentage from 2008 Sched					. 10 !	10
	on D. Computation of Investmen					17	%
	nvestment income percentage for 2009 (line						76_ 0/ /6
. i	nvestment income percentage from 2008 Sc	chequie A, Paπ III, II	the house the	and line 12 is man	s than 23 1/2 % . m	<del> </del>	
a 3	3 1/3 % support tests—2009. If the organic	zation die not eneek	ornapianian and	, and mic 10 is intol. Mac ac a nublish o	e man ee na 76, a Innocien organizet	ion	<b>.</b> -
. 1	7 is not more than 33 1/3 %, check this box 3 1/3 % support tests—2008. If the organiz	and stop nere. The	s organization qual	mes as a publicity St r line 10s and line /	16 is mase than 23	1/3 %, and	
р 3 	3 1/3 % support tests—2008. If the organiz ne 18 is not more than 33 1/3 %, check this	bay and stan bars	The organization	nualiñas as s nuhlin	ly supported progr	ization	<b>▶</b> □
	ne 18 is not more than 33 1/3 %, check mis						<b>&gt;</b>

Schedule A (Fo	orm 990 or 990-EZ).	2009	UNITED	) METH	ODIST	RENEWAL	SERVIC	ES	58-1322015	Page -
Part IV	Supplementa	inform	mation. C	omplete	this part	to provide th	ne explanat	tions requ	ired by Part II, lin	e 10;
	Part II, line 17	a or 17	7b; and Pa	<u>art III. Iin</u>	<u>ie 12. Pro</u>	ovide any oth	er addition	al informa	ation. See instruc	tions.
									·	
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4										
		. , , ,				, . ,				
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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, fine 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990, ▶ See separate instructions.

OMB No. 1545-0047

Employer identification number

Schedule D (Form 990) 2009

Name of the organization UNITED METHODIST RENEWAL SERVICES 58-1322015 FELLOWSHIP, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part1 the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 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 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Protection of natural habitat Preservation of certified historic structure 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 a Total number of conservation easements b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, 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. If the organization elected, as permitted under SFAS 116, 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 (iii) 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 relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Schedule D (Form 990) 2009 UNITED	WELHODIZL KENE	WAL SERVICES	28-13ZZOT2	Page
Part III Organizations Maintain	ning Collections of Art,	Historical Treasure	s, or Other Similar As	sets (continued)
3 Using the organization's acquisition, acce				
collection items (check all that apply):		,	•	
a Public exhibition	d 🗍 Loan	or exchange programs		
b Scholarly research	e Other	•	·	
c Preservation for future generations				<del>-</del>
4 Provide a description of the organization's	and a standard medical bounds	av further the arounization	ir avamat auraga in	
Part XIV.	conscious and explain now in	ey lululer the olganization	s evenith bailtase in	
	the committee of an all his	stariaal transurar, or other	nimilar	
5 During the year, did the organization solici assets to be sold to raise funds rather than	n to be maintained as part of th	stoncar treasures, or other e organization's collection'	?	Yes N
Part IV Escrow and Custodial	Arrangements, Complet	te if the organization	answered "Yes" to For	m 990, Part
IV, line 9, or reported an				,
1a is the organization an agent, trustee, custo			ts not	
included on Form 990, Part X?				Yes N
b If "Yes," explain the arrangement in Part X	IV and complete the following to	able:	******************	
B II 103, Siplain the directigories in the circuit	· · · · · · · · · · · · · · · · · · ·			Amount
c Beginning balance			10	
d Additions during the year				
e Distributions during the year				
f Ending balance				
2a Did the organization include an amount on				Yes No
b If "Yes," explain the arrangement in Part XI  Part V Endowment Funds, Com		augrad "Vas" ta Ear	m 000 Port IV line 10	
Part V Endowment Funds, Con			Two years back (d) Three years	
	(a) Current year	(b) Pholyeal (c/)	wo years back (d) Three years	Dack (e) Four years back
1a Beginning of year balance	1			3
b Contributions				
c Net investment earnings, gains,				
and losses			1	
d Grants or scholarships				
e Other expenditures for facilities	an and an and an and an			
and programs				
f Administrative expenses				
g End of year balance				1
2 Provide the estimated percentage of the year		•		
a Board designated or quasi-endowment				
b Permanent endowment > %				
c Term endowment >%				
a Are there endowment funds not in the posses	ssion of the organization that a	re held and administered f	for the	
organization by:				Yes No
(i) unrelated organizations				
				7
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations	linted as required an Schadule	 D2	*************************	
			······································	
Describe in Part XIV the intended uses of the art VI Investments—Land, Build			X line 10	
	(a) Cost or other basis	(b) Cost or other	(c) Accumulated	(d) Book value
Description of investment	(investment)	basis (other)	depreciation	(a) Dook value
				. 206 /51
a Land		· 286,451		286,451
Buildings				
Leasehold improvements	1			
Equipment			550 650	050 000
Other		1,538,046		978,390
il. Add lines 1a through 1e. (Column (d) must eq	iual Form 990, Pari X, column (	B), line 10(c).)	<u></u>	1,264,841

58-1322015	Page 3

Part VII Investments—Other Securities. See Form 9			,,
(a) Description of security or category	(b) Book value	(c) Method of value	
(including name of security)		Cost or end-of-year ma	rket value
Financial derivatives			
Closely-heid equity interests			
Other			
		1	
otal. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related, See Form 9		for the state of t	***************************************
(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mari	
		Cost of end-dr-year man	KEL VAILE
		1	
			`
otal. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line 15.			
otal. (Column (b) must equal Form 990, Part X. col. (B) line 13.)  Part X Other Assets. See Form 990, Part X, line 15.  (a) Description			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15.			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15. (a) Description			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15. (a) Description			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15. (a) Description			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15. (a) Description			(b) Book value
Part IX Other Assets. See Form 990, Part X, line 15. (a) Description			(b) Book value
Part X Other Assets. See Form 990, Part X, line 15. (a) Description			(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  (a) Description  (a) Description			(b) Book value
Part X Other Assets. See Form 990, Part X, line 15. (a) Description			(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  (a) Description  (a) Description	(b) Amount		(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  (a) Description  (a) Description  (a) Description  (a) Description  (b) Description  (c) Description  (d) Description  (a) Description	(b) Amount		(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  al. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 25  (a) Description of liability	1		(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  al. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  (a) Description of liability  leral income taxes	(b) Amount		(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  al. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  (a) Description of liability  leral income taxes	(b) Amount		(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  al. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  (a) Description of liability  leral income taxes	(b) Amount		(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  al. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  (a) Description of liability  leral income taxes	(b) Amount		(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  al. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  (a) Description of liability  leral income taxes	(b) Amount		(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  al. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  (a) Description of liability  leral income taxes	(b) Amount		(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  al. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  (a) Description of liability  leral income taxes	(b) Amount		(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  al. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  (a) Description of liability  leral income taxes	(b) Amount		(b) Book value
Part X Other Assets. See Form 990, Part X, line 15.  (a) Description  al. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  (a) Description of liability  leral income taxes	(b) Amount		(b) Book value

50	hedule D (Form 990) 2009 UNITED METHODIST RENEWAL SERVIC	CES 58	<u>-1322015                                   </u>	Page 4
2	Reconciliation of Change in Net Assets from Form 990 to A	udited Financ	ial Statements	
1			1 . 1	952,832
			1 - 1	1,001,496
2	and the state of t		! _ 1	-48,664
3			1 . 1	
4				**************************************
5				
_6	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
7				M
8	• • • • • • • • • • • • • • • • • • • •			
.9	Total adjustments (net). Add lines 4 through 8			10 CC1
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			-48,664
₩P	art 知: Reconciliation of Revenue per Audited Financial Statements			055 000
1	Total revenue, gains, and other support per audited financial statements	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	952,832
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
#	í	2a		•
		2b		
		2c		
	Recoveries of prior year grants	2d		
	Other (Describe in Fart Avv.)		2e	
	Add lines 2a through 2d			952,832
3	Subtract line 2e from line 1		· · · · · · · · · · · · · · · · · · ·	2027002
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	investment expenses not included on Form 650; Fact vint, the Fb	a		
þ	Other (Describe in Part XIV.)	<u>b</u>		,
С	Add lines 4a and 4b		4c	050 000
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			952,832
₽ε	Reconciliation of Expenses per Audited Financial Statements	With Expens	ses per Return	
1	Total expenses and losses per audited financial statements			1,001,496
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities 2	a		
-	Prior year adjustments 2	b		
		n I		
	Other rosses	i		
	Offier (Describe are archive)		2e	
е	Add lines 2a through 2d			1,001,496
3	Subtract line 2e from line 1			<u> </u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1;			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV.)	<u> </u>		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)	· · · · · · · · · · · · · · · · · · ·	5	1,001,496
	XIV Supplemental Information			
Comp	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	nd 4: Part IV, lines	3 1 b	
Comp	p; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and	ad 4h. Also comple	ete	
		10.7100 00	J.J	
this pa	art to provide any additional information.	•		
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Schedule D (Fo	rm 990\ 2009	UNITED	METHODIST	RENEWAL	SERVICES	58-1322015	Page :
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SCHEDULE O (Form 990)

### Supplemental Information to Form 990

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Open to Public Inspection

Name of the organization	UNITED METHODIST FELLOWSHIP, INC.	RENEWAL SERVICES	Employer identification number 58-1322015
Form 990,	Part VI, Line 11A	- Organization's	Process to Review Form 990
	was or will be co		
			ocess for Top Official
Form 990,	Part VI, Line 15b	- Compensation Pro	cess for Officers
Form 990, J	Part VI, Line 19 -	Governing Documer	ts Disclosure Explanation
No document	s available to th	e public	
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(5) (6) (7) (8) (9) (10)

Forms 990 / 990-PF	Oth		2009			
990/990-66	For calendar year 2009, or	tax vear beg	nning	. and ending		
Name					Employer id	lentification Number
UNITED METHODI FELLOWSHIP, IN	ST RENEWAL SER	(VICES			58-132	22015
			2			
Form 990, Part	X, Line 7 - A	<u>dditic</u>	onal Informat	ion		
Al:	ame of borrower			Relationship to dis	squalified perso	n
(1) Loan Receiva						
(2)						
(4)						
(6)					·····	
(7)					.,	
(8) (9)			·			
(10)						
Original amount borrowed	Date of loan	Maturit date	У	Repayment terms		Interest rate
1)	Date of four			1		
2)						
3)		······································				
<u>4)</u> 5)						
6)						
7)					· · · · · · · · · · · · · · · · · · ·	
8)						
9)						
<b>.</b>			444	Purpose of	loan	
Security )	provided by borrower			i dipose or	TOCH!	
()						
<u> </u>						
<u>)                                    </u>						
)						
)						
) D)						
<i>)</i>						
Consideration for	ırnished by lender		Balance due at beginning of year	Balance due at end of year	Fair	market value (990-PF only)
OUTSIGOTEROT A	31101100 07 1011001				00	
		***************************************				
-						
		-			<u> </u>	
-		1			i i	
pials				8	00.1	

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service

► See separate instructions.

► Attach to your tax return

	(05)		arate man aparene.			017 00 300. 003	, , , , , , , , , , , , , , , , , , , ,		, , , , , , , , , , , , , , , , , , , ,
N		ED METHODIS		ERVI(	CES		l l		number 22015
		DWSHIP, INC.	*					0-13	22010
Bı	isiness or activity to which this form rela Indirect Deprecia								•
		pense Certain Pro	operty Under Sec	ction 17	9	_			
2000		ve any listed prope				ou complete	e Part I.		
1	Maximum amount. See the ins	tructions for a higher lin	nit for certain business	ses				. 1	250,000
2	Total cost of section 179 prope	rty placed in service (se	ee instructions)					. 2	
3	Threshold cost of section 179 p	property before reduction	on in limitation (see ins	tructions)					800,000
4	Reduction in limitation. Subtract					. ,			
_5	Dollar limitation for tax year. Subtra-	ct fine 4 from line 1. If zero							
6	(a) Descr	ption of property		(b) Cost (b)	usiness t	ise only)	(c) Elected o	ost	
				,					-
-									-
7	Listed property. Enter the amou							10	
8	Total elected cost of section 17							1	
9	Tentative deduction. Enter the s							10	
10	Carryover of disallowed deduction.  Business income limitation. Enter				r line E	(eno inetrustio	 nc)	11	
11	Section 179 expense deduction.							12	
12	Carryover of disallowed deduction.					13	<u> </u>	1 1 5	
13 Not	e: Do not use Part II or Part III belo			<u> </u>	<u> </u>	, ,,,			
		ation Allowance a		ciation	(Do n	ot include l	isted pror	perty.)	(See instr.)
14	Special depreciation allowance f	·······							
? <del>-1</del>	during the tax year (see instruction							14	5,725
15	Property subject to section 168(f								
16	Other depreciation (including AC							16	22,646
200000000		ation (Do not inclu							
000,700			Section						
17	MACRS deductions for assets pla	aced in service in tax ye	ears beginning before	2009			11222211222	17	19,298
18	If you are electing to group any assets	placed in service during th	ne tax year into one or mo	ore general:	asset acc	counts, check he	re 🕨		
	Section B	-Assets Placed in Se	rvice During 2009 Ta	ax Year U	sing the	e General De	preciation S	ystem	,
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for deprecia (business/investment only-see instruction	use \' '	Recovery period	(e) Conventi	on (f) Me	ethod	(g) Depreciation deduction
19a	3-vear property								
b	5-year property								
c	7-vear property								······
d	10-year property								
<u>e</u>	15-year property		5,7	25 1	5.0	HY	150	DDB	286
f	20-year property								
	25-year property				vrs.		S/I	<del></del>	
h	Residential rental				5 yrs.	MM	S/!	T	
`	property			7	5 Vrs.	MM	S/L	1	
ì	Nonresidential real			39	yrs.	MM	S/L		
	property			11-		MM	S/L		
	Section C—A	ssets Placed in Servi	ce During 2009 Tax	Year Usin	g the A	iternative De		1	
	Class life	_		100	. 1	····	S/L		
	12-vear				yrs.		S/L		
	40-year (Ci	<u> </u>		1 40	vrs. i	MM	S/L		
	t IV Summary (See ins	5 0C						21	661
	isted property. Enter amount from		- 10 and 20 in column			Entor horo			V V.L
	Fotal, Add amounts from line 12, iii and on the appropriate lines of your					milial liefe		22	48,616
	ind on the appropriate lines of your for assets shown above and place				اً. دارد	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			207020
	ortion of the basis attributable to s	-	outton your, ones me	•		23			
	CONTRACTOR STATE STATE STATE OF THE STATE OF	particular and the second	<u> </u>						

Total. Add amounts in column (f). See the instructions for where to report

Form	4552	(2009)
7000	4004	(4000)

Form 4562 (2009)
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Listed Property (include automobiles, certain other vehicles, cellular telephones, certain computers, and

	Note: For any v 24b, columns (a	ed for entertal rehicle for which y i) through (c) of S	ou are us ection A.	ing the sall of Se	standar ection B	d mileage , and Sec	rate or di	educting la pplicable.							
		—Depreciation						ŕ							
1	ve evidence to supp	1	estment use	e claimed	1?	Yes	i No		If "Y∈	es," is the	evidend	ce writte	<u>n?</u>	Y	≥s
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	!	(d) t or ofner basis		Basis for o	e) depreciation /investment only)		у .	(g) Method Convention	1	(i Depre dedu			(i) cied section 179 cost
	epreciation allowa						-								
	and used more tha				(see in	structions	)	<del> </del>			25				
	used more than 5		business ı	use:				-,	<del></del>					<del>-</del>	
2001 H	JICK LESA 07/31/07	1	<u></u>	6,8	85		6,885	5.	2	00DB	HY		66.	<u>I</u>	<del></del>
		%		17×17×17×1×1×1×1×1×1×1×1×1×1×1×1×1×1×1×											
77 Property L	ısed 50% or less i	n a qualified busi	ness use:		····					······				P.45.05.1.1.2.1.	
		%						<u> </u>	5	S/L-				-	
		%							5	6/L-					
	nts in column (h),										28		661		
9 Add amour	nts in column (i), li	ne 26. Enter here									<del></del>		. 29	1	
							n Use of								
omplete this set your employees,	ction for vehicles un first answer the ques	used by a sole pro- itions in Section C to	oprietor, p o see if you	artner, o meet an	or other exception	more the the	an 5% ow ieting this s	ner," or re ection for th	ated ose ve	person. I hicles.	f you pro	ovided v	enicles		
Total busin	ess/investment m	îles driven			(a)		(b)	(c)			(d)		(e)		(f)
during the y	year (do not inclu	de		Ve	hicle 1	Ve	hicie 2	Vehicl	3	Vet	nicle 4	Ve	hicle 5	Ve	nicle 6
commuting				<u></u>											
Total comm	uting miles driven	during the year													
	personal (noncom		ven			<u> </u>									
	driven during the y	year. Add				*									
lines 30 thro	*********				1			<u> </u>		1	i i	<u> </u>			1
	nicle available for	•	,	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
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wer these ques	stions to determine								-			of.			
	ers or related pers			o comp.	icing c	COUCHE	or vernor	a usec by	crithi	Oyees w	io ale ii	O.			
	tain a written polic			ali perso	nal use	of vehicle	es, includi	ina commi	ıtina.	bγ		<del></del>		Yes	No
your employe								-		-					
Do you maint	ain a written poilc											• • • • • • • • •	· · · · · · · · · · · · · · · · · · ·		***************************************
employees?	See the instruction	is for vehicles us	ed by corp	orate o	fficers,	directors,	or 1% or	more own	ers						
Do you treat a	all use of vehicles	by employees as	personal	use?											
Do you provid	le more than five v	ehicles to your e	mployees	, obtain	informa	ation from	your emi	oloyees ab	out th	ie					
	nicles, and retain f														
	he requirements o													<u></u>	
00000000000000	nswer to 37, 38. (	39. 40, or 41 is "Y	es." do no	of comp	iete Se	ction B fo	r the cove	red vehic	es.		<del></del>		×		
itt VI Arr	nortization				,							····			
Desc	(a) ription of costs	D	(b) ate amortiz begins	ation		:) Amori amo		***************************************	(d) Code section	!	(e) Imortizatio period oi percentag	r   ·	Amortizatio	(f) on for this	year
Amortization of	costs that begins	during your 200	9 tax vear	(see in	structio	ns)·		i							
, 1110) (#UU0// U/	COOK MAK DODING	2001	C HAN YURI	1000 111	10000	1.0 1.				<del></del>		i		<del></del>	***************************************
Amortization of	costs that began	hofore your 2000	) tov voor					<u></u>			1	43			

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201010 UNITED METHODIST RENEWAL SERVICES
58-1322015 Federal Asset Report

58-1322015

# Form 990, Page 1

FYE: 12/31/2009

Asset	Description	Date In Service	Cost	Bus %	Sec 179B <u>onu</u> s	Basis for Depr	PerConv Meth	Prior	Current
15-vear GDS Prop 142 HVAC - 120	<u>ertv:</u> I EAST	4/21/09 =	11.450 11.450		X	5,725 5,725	15 HY 150DB	0 0	6.011
82 115 EAST FUR 83 FURNISHING 84 COMPUTERS 85 VIDEO EQUIF 86 121 PAVING 87 120 PAVING 88 120 FURNISH 89 121 TABLES, I 90 121 OFFICE B 93 122 EAST AVI 96 120 EAST HV 101 WATER HEAT 104 121 EQUIPME 105 122 EAST - FU 109 COMPUTER B 110 RECORDING B 111 LAPTOPS 112 VOICE MAIL 113 RECLINER 114 121 EAST LAN 115 DVD & CD REC	RS LY DEPR DOM TABLE STEM  RINTER  TOSH GATEWAY  ACK  PMENT  APUTERS  ECTORS AVING USE - PAINT & FLOOR RNISHINGS S & NETWORK PMENT  INGS ETC QUIPMENT E FURNISHINGS AC ER - 120 EAST NT RNISHINGS & APPLIANC QUIPMENT EQUIPMENT EQUIPMENT EQUIPMENT EQUIPMENT DSCAPING CORDERS DR DUIPMENT LAST AC AC AC MUSIC EQUIPMENT	2/16/94 1/07/93 2/19/93 12/31/94 7/23/96 6/06/96 8/31/96 6/06/97 8/01/97 10/23/97 10/23/97 6/30/97 4/30/97 4/30/97 1/22/99 11/23/98 10/23/98 10/23/98 10/23/98 11/01/99 11/10/99 11/10/99 11/10/99 11/19/99 11/19/99 11/19/99 11/22/99 7/12/00 5/10/00 6/01/00	336 370 7,032 311 2,270 456 2,480 2,211 2,017 280 300 620 419 1,77 422,810 3,499 1,064 2,519 6,400 1,303 7,154 200 1,303 7,154 200 5,456 21,946 33,163 245 2,450 5,456 21,946 38,660 17,719 14,780 2,519 1,519		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	3,499 1,064 2,519 1,190 6,400 1,303 7,154 200 5,455 2,200 5,466 21,946 38,660 17,719 14,070 5,003 2,500 4,097 846 3,311 975 2,591 3,789 3,736 2,390 1,041 200 99 4,682 1 460 652 6,485 2,895 7,84 3,833 1 4,438 1 2,187 4,690 8,501	5 HY 200DB 6 HY 200DB 6 HY 200DB 7 HY 200DB 8 HY 200DB 8 HY 200DB 8 HY 200DB 9 MM S/L 15 HY 200DB 15 HY 200DB 16 HY 200DB 17 HY 200DB 18 HY 200DB 19 HY 200DB 10 HY 200DB 10 HY 200DB 11 HY 200DB 12 HY 200DB 13 HY 200DB 14 HY 200DB 15 HY 200DB 16 HY 200DB 17 HY 200DB 18 HY 200DB 19 HY 200DB 10 HY 200DB 11 HY 200DB 12 HY 200DB 13 HY 200DB 14 HY 200DB 15 HY 200DB 16 HY 200DB 17 HY 200DB 18 HY 200DB 19 HY 200DB 10 HY 200DB 10 HY 200DB 11 HY 200DB 12 HY 200DB 13 HY 200DB 14 HY 200DB 15 HY 200DB 16 HY 200DB 17 HY 200DB 18 HY 200DB 19 HY 200DB 19 HY 200DB 20 HY 200DB 20 HY 200DB 21 HY 200DB 22 HY 200DB 23 HY 200DB 24 HY 200DB 25 HY 200DB 26 HY 200DB 27 HY 200DB 28 HY 200DB 29 HY 200DB 20 HY 200DB 20 HY 200DB 20 HY 200DB 21 HY 200DB 22 HY 200DB 23 HY 200DB 24 HY 200DB 25 HY 200DB 26 HY 200DB 27 HY 200DB 28 HY 200DB	336 370 7,032 311 2,270 456 2,480 2,211 2,017 280 300 620 419 177 106,583 3,499 1,064 2,519 1,190 6,400 1,303 7,154 200 190 721 245 1,356 5,456 21,946 38,660 17,719 14,070 2,787 1,393 4,097 1,318 3,311 1,318 3,503 4,214 5,438 7,069 7,471 4,247 2,023 388 6,445 893 5,365 5,395 5,365 2,395 1,388 6,445 6,445 893 5,365 5,365 6,395 6,848 7,655 7,655 7,655 7,656 7,657 3,839 6,445 6,539 6,445 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,548 6,557 6,548	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

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# 201010 UNITED METHODIST RENEWAL SERVICES 58-1322015 Federal Asset Report

FYE: 12/31/2009

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Asset Description	Date In Servic	e Cost	Bus Sec % 179Bonu	Basis s for Depr	PerConv Meth	Prior	Current
131 121 EAST -HVAC ZONE SYSTEM 134 COMPUTER 135 LAPTOPS 136 CAMERA & ACCESSORIES 137 LAWN MOWER 138 PRINTERS & COMPUTER EQUIP 141 TELEPHONE SYSTEM	6/08/06 4/07/07 6/23/07 11/28/07 11/28/07 7/07/07 2/13/08	3,150 1,634 1,319 1,178 1,014 677 600 681,869	X	3,15( 1,634 1,319 1,178 1,014 677 480 659,416	5 HY 200DE 5 HY 200DE 5 HY 200DE 7 HY 200DB 5 HY 200DB 5 HY 200DB	8 850 8 686 8 613 8 393 8 352	242 314 253 226 178 130 192
Other Depreciation:  57 LAND  76 115 EAST AVE - HOUSE  77 LAND - 115 EAST AVE HOUSE  80 120 EAST IMPROVEMENTS  81 121 EAST AVE IMPROVEMENTS  91 121 IMPROVEMENTS  95 120 EAST AVE IMPROVEMENTS  97 122 EAST AVE HOUSE  99 122 EAST AVE - LAND  106 120 EAST IMPROVEMENTS  107 121 EAST IMPROVEMENTS  108 122 EAST IMPROVEMENTS  120 SOFTWARE - 121 EAST  121 115 EAST - GUTTERGUARDS  130 120 EAST IMPROVEMENTS  133 120 EAST - ADD WALL  139 115 EAST ROOF  140 115 EAST - WINDOWS  Total Other Depreciation	11/23/98 4/05/00 4/05/00 6/01/00 6/01/00 4/09/01 12/18/02 9/26/02 6/30/03 6/30/03 12/31/05 9/26/05 6/06/06 2/17/07 11/04/08	246,451 85,141 20,000 3,156 491,968 2,831 25,699 85,097 20,000 106,266 8,369 6,976 4,623 2,500 11,062 2,613 4,226 4,200 1,131,178	-	246,451 85,141 20,000 3,156 491,968 2,831 25,699 85,097 20,000 106,266 8,369 6,976 4,623 2,500 11,062 2,613 4,226 4,200 1,131,178	0 Land 27 MO S/L 0 Land 39 MO S/L 27 MO S/L 27 MO S/L 39 MO S/L 27 MO S/L 27 MO S/L 39 MO S/L 27 MO S/L 27 MO S/L 39 MO S/L 27 MO S/L 27 MO S/L 39 MO S/L 27 MO S/L	0 26,961 0 691 107,749 560 3,981 13,728 0 15,100 1,189 1,406 4,623 299 721 126 237 19	0 3,096 0 81 12,615 72 659 2,182 0 2,724 215 253 0 91 284 67 154 153 22,646
Total ACRS and Other Depr	eciation =	1.131.178	=	1,131,178	=	177.390	22,646
<u>Listed Property:</u> 132 2001 BUICK LESABRE Sold/Scrapped: 3/15/09	7/31/07 9 =	6,885	_	6,885	5 HY 200DB -	3,580	661
Grand Totals Less: Dispositions and Transfe Less: Start-up/Org Expense Net Grand Totals	ers 	1,831,382 6,885 0 1.824,497	Name of the State	1,803,204 6,885 0 1.796,319	 	515,281 3,580 0 511.701	48,616 661 0 47,955

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58-1322015 TN Asset Report

58-1322015

# Form 990, Page 1

FYE: 12/31/2009

As	set Description	Date In Service	Cost	Basis for Depr	TN Prior	TN Current	Federal Current	Difference Fed - TN
	-vear GDS Property: 42 HVAC - 120 EAST	4/21/09	11.450	11,450	0	382	6,011	5,629
1	12 HVAC - 120 DAD 1		11.450	11,450	0	382	6.011	5,629
		<b></b>		-				
Pr	or MACRS:					^	^	0
	3 BOOKCASES 9 PROJECTORS	2/16/94 1/07/93	336 370	336 370	336 370	0 0	- 0	0
	1 OTHER FULLY DEPR	2/19/93	7,032	7,032	7,032 311	0	0	0
	7 PRAYER ROOM TABLE 3 PAGING SYSTEM	12/31/94 7/23/96	311 2,270	311 2,270	2,270	0	0	0
1 4	4 FAX	6/06/96	520 456	520 456	520 456	0	0	0 0
	5 DESKJET PRINTER 7 COMPUTER	8/31/96 6/06/97	2,480	2,480	2,480	0	Ō	0
4	8 COMPUTER TOSH	8/01/97 10/23/97	2,211 2,017	2,211 2,017	2,211 2,017	0	0	0
I .	9 COMPUTER GATEWAY 0 BACKUP	10/29/97	280	280	280	0	0	0
	i PRINTER 2 PRINTER	8/29/97 6/30/97	280 300	280 300	280 300	0	0	0 0
5 5	=	6/30/97	70	70	70	0	0	0 0
5 5		4/30/97 4/30/97	620 419	620 419	620 419	0	0	0
5	6 STORAGE RACK	1/22/97	177	177	177	10.943	0 10,842	0
5 5		11/23/98 10/23/98	422,810 3,499	422,810 3,499	106,583 3,499	10,842 0	0	0
6	MUSIC EQUIPMENT	12/22/99	1,064	1,064 2,519	1,064 2,519	0	0	0
. 6'		12/22/99 8/03/99	2,519 1,190	1,190	1,190	Õ	0	0
6′	7 PIANO	11/01/99 11/10/99	6,400 1,303	6,400 1,303	6,400 1,303	0	0	. 0
68 69		11/19 <b>/</b> 99	7,154	7.154	7,154	0	0	. 0
7( 71		12/01/99 10/21/99	200 190	200 190	200 190	0	0	0
72	IMPROVEMENTS	11/22/99	3,163	3,163	721	82 0	82 0	0
73 78		12/22/99 7/12/00	245 2,200	245 2,200	245 1,356	130	130	0
79	115 EAST HOUSE - PAINT & FLOOR	5/10/00	5,456 21,946	5,456 21,946	5,456 21,946	0 0	0	0 0
82 83		6/01/00 6/01/00	38,660	38,660	38,660	Ö	0	0
84	COMPUTERS & NETWORK	6/01/00 6/01/00	17,719 14,070	17,719 14,070	17,719 14,070	0 0	0	0 0
. 85 86		4/20/01	<i>5</i> ,003	5,003	2,787	296	296 147	0
87 88	120 PAVING 120 FURNISHINGS	4/20/01 4/20/01	2,500 4,097	2,500 4,097	1,393 4,097	147 0	0	Ö
89	121 TABLES, ETC	5/16/01	846	846	<sup>*</sup> 846 3,311	0	0	0
90 93	121 OFFICE EQUIPMENT 122 EAST AVE FURNISHINGS	8/23/01 11/15/02	3,311 1,393	3,311 1,393	1,318	75	75	0
96	120 EAST HVAC	12/19/02	3,701	3,701 4,986	3,503 4,214	198 221	198 221	. 0
101 104	WATER HEATER - 120 EAST 121 EQUIPMENT	6/30/02 6/30/03	4,986 5,828	5,828	5,438	260	260	0
105	122 EAST - FURNISHINGS & APPLIAN(	6/30/03 9/22/03	7,577 7,471	7,577 7, <del>4</del> 71	7,069 7,471	339 0	339 0	0
110	COMPUTER EQUIPMENT RECORDING EQUIPMENT	3/01/04	4,780	4,780	4,247	214	214	0
111	LAPTOPS VOICE MAIL	1/30/04 4/05/04	2,083 .400	2,083 400	2,023 388	60 12	60 12	0
113	RECLINER	4/05/04	198	198	176	9	9 292	0 0
]]4 115	121 EAST LANDSCAPING DVD & CD RECORDERS	8/17/04 8/31/04	9,363 920	9,363 920	6,445 893	292 27	27	0
116	REFRIGERATOR	2/23/05	652	652	539	75 747	75 747	0 0
117 118	COMPUTER EQUIPMENT - 121 EAST PAGERS - 121 EAST	6/18/05 5/31/05	6,485 2,895	6,485 2,895	5,365 2,395	747 333	333	0
119	EQUIP & FURN - 121 EAST	7/25/05	784	784	539 1,178	70 266	70 266	0 0
121 123	115 EAST - HVAC 121 EAST - HVAC	1/26/05 12/14/05	3,833 4,438	3,833 4,438	1,364	308	308	0
124	122 EAST - HVAC	6/23/05	2,078	2,078 2,187	639 1,557	144 252	) 44 252	0
	COMPUTER & MUSIC EQUIPMENT COPIER & COMPUTERS	7/31/06 9/18/06	2,187 4,690	4,690	3,339	541	54]	0
128	ETAPESTRY	8/15/06 6/01/06	8,501 1,360	8,501 1,360	6,848 765	1,653 170	1,653 170	0
とより	PODIUM	0/01/00	1,500	1,200	, 50	- 1 -		

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TN Asset Report

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FYE: 12/31/2009

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Ass	set Description	Date In Servi		Basis for Dep	TN r Prìor	TN Current	Federal Current	Difference Fed - TN
13 13 13 13 13 13 14	4 COMPUTER 5 LAPTOPS 6 CAMERA & ACCESSORIES 7 LAWN MOWER 8 PRINTERS & COMPUTER EQUIP	6/08/06 4/07/07 6/23/07 11/28/07 11/28/07 7/07/07 2/13/08	3,15 7 1,63 7 1,31 7 1,17 7 1,01	34 1,6 19 1,3 78 1,1 74 1,0 77 6 90 60	34 85 19 68 78 61 14 39 77 35 00 120	6 24 0 31 6 25 3 22 5 17 2 13 0 19	4 314 3 253 6 226 8 178 0 130 2 192	0 0
Other 57 77 80 81 91 95 97 106 107 108 120 122 130 133 139	115 EAST AVE - HOUSE LAND - 115 EAST AVE HOUSE 120 EAST IMPROVEMENTS 121 EAST AVE IMPROVEMENTS 121 IMPROVEMENTS 120 EAST AVE IMPROVEMENTS 122 EAST AVE HOUSE	11/23/98 4/05/00 4/05/00 6/01/00 6/01/00 4/09/01 12/18/02 9/26/02 9/26/02 6/30/03 6/30/03 6/30/03 12/31/05 9/26/05 6/06/06 2/17/07 6/27/07 11/04/08	246,45: 85,14: 20,000 3,156 491,968 2,831 25,699 85,097 20,000 106,266 8,369 6,976 4,623 2,500 11,062 2,613 4,226 4,200	1 85,14 20,00 5 3,15 8 491,96 ( 2,83 25,69 85,09 0 20,00 6 106,20 6,97 4,623 2,500	1 26,961 0 6 691 8 107,749 1 560 9 3,981 7 13,728 0 0 6 15,100 9 1,189 6 1,406 8 4,623 0 299 1 721 8 126 6 237	3,096 0 81 12,615	3,096 0 0 81 12,615 72 659 2,182	. 0000000000000000000000000000000000000
. 10	Total Other Depreciation	11.0 11.00	1.131,178	1,131,178	• • • • • • • • • • • • • • • • • • • •	22,646	22,646	0
	Total ACRS and Other Deprec	ciation	1,131,178	1,131,178	177,390	22,646	22,646	0
Listed 132	Property: 2001 BUICK LESABRE Sold/Scrapped: 3/15/09	7/31/07	6,885	6,885	, 3,580	661	661	o
		-	6,885	6.885	3.580	661	661	0
	Grand Totals Less: Dispositions Less: Start-up/Org Expense		1,831,382 6,885 0	1,831,382 6,885 0	515,281 3,580 0	42,987 661 0	48,616 661 0	5,629 0 0
	Net Grand Totals		1,824,497	1.824,497	511.701	42,326	47,955	5.629

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# AMT Asset Report

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Bus Sec Basis Date 179Bonus for Depr PerConv Meth Current Prior Cost Description In Service Asset \_\_\_\_ 15-vear GDS Property: 5,916 5,725 15 HY S/L 4/21/09 11,450 142 HVAC - 120 EAST 0 5,916 5,725 11.450 Prior MACRS: 3 BOOKCASES 5 HY 150DB 336 336 2/16/94 336 5 HY 150DB 370 1/07/93 370 370 PROJECTORS 7 HY 150DB 7,032 7,032 2/19/93 7,032 OTHER FULLY DEPR 5 HY 150DB 5 HY 150DB 3 HY 150DB 311 12/31/94 311 311 PRAYER ROOM TABLE 2,270 520 2,270 2,270 PAGING SYSTEM 7/23/96 0 520 6/06/96 520 FAX 5 HY 150DB 5 HY 150DB 5 HY 150DB 456 456 DESKJET PRINTER 8/31/96 456 45 2,480 2,211 2,480 2,211 a 6/06/97 2,480 COMPUTER 2.211 COMPUTER TOSH 8/01/97 2,017 280 5 HY 150DB 2,017 10/23/97 COMPUTER GATEWAY 2,017 5 HY 150DB 280 10/29/97 280 BACKUP 50 280 280 8/29/97 280 PRINTER 51 300 6/30/97 300 PRINTER 70 53 HUTCH 620 620 4/30/97 620 DESK 54 419 419 4/30/97 419 CHAIR 55 5 HY 150DB 177 0 177 177 1/22/97 STORAGE RACK 56 422,810 40 MM S/L 3,499 5 HY 150DB 1,064 5 HY 150DB 107.024 10,570 BUILDING 11/23/98 422,810 58 3,499 0 3,499 10/23/98 COMPUTER 1.064 MUSIC EQUIPMENT 12/22/99 1.064 5 HY 150DB 2,519 2.519 1,190 0 12/22/99 2,519 COMPUTÈR 61 1,190 8/03/99 1,190 COMPUTER 62 6,400 11/01/99 6.400 6,400 67 PIANO 1.303 11/10/99 1,303 FURNITURE 68 7,154 HY 150DB HY 150DB HY 150DB 7,154 LAPTOP COMPUTERS 11/19/99 7,154 69 200 5 HY 150DB 190 5 HY 150DB 3,163 39 MM S/L 200 200 0 12/01/99 PRINTER 190 BREWER 10/21/99 190 740 81 11/22/99 IMPROVEMENTS SMOKE DETECTORS 3,163 72 73 HY 150DB HY 150DB HY 150DB 245 5 2,200 15 245 12/22/99 1,356 130 2,200 7/12/00 115 EAST - PAVING 5,456 5,456 79 115 EAST HOUSE - PAINT & FLOOR 5/10/00 5,456 5 HY 150DB 5 HY 150DB 5 HY 150DB 5 HY 150DB 21.946 n 6/01/00 21,946 21,946 115 EAST FURNISHINGS 82 38,660 17,719 38,660 38,660 6/01/00 FURNISHINGS 83 17,719 0 6/01/00 17,719 COMPUTERS & NETWORK 14,070 14,070 0 6/01/00 14,070 VIDEO EQUIPMENT 85 5,003 15 HY 150DB 2,500 15 HY 150DB 4,097 7 HY 150DB 2,787 296 4/20/01 5,003 121 PAVING 86 1,393 147 4/20/01 2,500 120 PAVING 87 4,097 7 HY 150DB
846 5 HY 150DB
975 7 HY 200DB
2,591 7 HY 200DB
3,490 10 HY 200DB
3,789 7 HY 200DB
3,789 7 HY 200DB
3,736 5 HY 200DB
2,390 7 HY 200DB
1,041 5 HY 200DB
200 5 HY 200DB
200 5 HY 200DB
200 5 HY 200DB
4,682 15 HY 150DB
460 5 HY 200DB
652 5 HY 150DB
6,485 5 HY 150DB
6,485 5 HY 150DB
2,895 5 HY 150DB
2,895 5 HY 150DB
3,833 15 HY 150DB
4,438 15 HY 150DB
4,438 15 HY 150DB
4,438 15 HY 150DB
2,078 15 HY 150DB 4,097 0 4/20/01 120 FURNISHINGS 4,097 846 5/16/01 121 TABLES, ETC 121 OFFICE BOUIPMENT 846 3,311 0 8/23/01 3,311 90 44 122 EAST AVE FURNISHINGS 120 EAST HVAC 1,349 11/15/02 1,393 3.585 116 12/19/02 3,701 220 4,185 4,986 WATER HEATER - 120 EAST 6/30/02 101 5,438 260 6/30/03 5,828 121 EQUIPMENT 104 7.069 339 7,577 105 122 EAST - FURNISHINGS & APPLIANC 6/30/03 6.971 7,471 COMPUTER EQUIPMENT 9/22/03 109 4.247 214 3/01/04 4,780 110 RECORDING EQUIPMENT 1,041 1,851 LAPTOPS VOICE MAIL 1/30/04 200 388 12 4/05/04 400 112 176 RECLINER 4/05/04 198 113 121 EAST LANDSCAPING DVD & CD RECORDERS 6,445 292 8/17/04 9,363 114 27 893 8/31/04 920 115 109 489 2/23/05 652 REFRIGERATOR 116 4.865 1.080 COMPUTER EQUIPMENT - 121 EAST 6/18/05 6,485 117 2,172 482 5/31/05 7/25/05 PAGERS - 121 EAST EQUIP & FURN - 121 EAST 2,895 96 119 1.178 266 115 EAST - HVAC 121 EAST - HVAC 1/26/05 3,833 4.438 15 HY 150DB 2,078 15 HY 150DB 2,187 5 HY 150DB 121 308 12/14/05 4,438 639 i44 6/23/05 2,078 122 EAST - HVAC 124 276 5 5 7 365 2,187 7/31/06 COMPUTER & MUSIC EQUIPMENT 126 HY 150DB 2,737 781 4,690 9/18/06 4.690 COPIER & COMPUTERS 1.360 HY 150DB 610 167 1,360 PODIUM 6/01/06 3.150 15 HY 150DB 6/08/06 3,150 12) EAST-HVAC ZONE SYSTEM

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58-1322015 AMT Asset Report

FYE: 12/31/2009

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	137 LAWN 138 PRINTE	Description  JTER PS RA & ACCESSORIES MOWER ERS & COMPUTER EQUIP HONE SYSTEM	Date In Service 4/07/07 6/23/07 11/28/07 11/28/07 7/07/07 2/13/08	e Cost  1,634 1,319 1,178 1,014 677 600 673,368	Bus %	Sec 179Bonus	Basis for Depr 1,634 1,319 1,178 1,014 677 300 650,735	PerConv Meth 5 HY 150DE 5 HY 150DE 5 HY 150DE 7 HY 150DB 5 HY 150DB 5 HY 200DB	662 534 477 303 274	Current 292 235 210 152 121 96 18.144
	77 LAND - 80 120 EAS 81 121 EAS 91 121 IMP 95 120 EAS 97 122 EAS 106 120 EAS 107 121 EAS 120 SOFTWAL 122 115 EAS 130 120 EAS 130 120 EAS 133 120 EAS 139 115 EAS 139 115 EAS 139 115 EAS 130 120 EAS 130 E	TT AVE - HOUSE 115 EAST AVE HOUSE TIMPROVEMENTS TT AVE IMPROVEMENTS TO AVE IMPROVEMENTS TO AVE HOUSE TO AVE HOUSE TO AVE - LAND TO IMPROVEMENTS	11/23/98 4/05/00 4/05/00 6/01/00 6/01/00 4/09/01 12/18/02 9/26/02 6/30/03 6/30/03 12/31/05 9/26/05 8/15/06 6/06/06 2/17/07 11/04/08	000000000000000000000000000000000000000			000000000000000000000000000000000000000	0 HY 0 HY 0 HY 0 HY 0 HY 0 HY 0 HY 0 HY	000000000000000000000000000000000000000	000000000000000000000000000000000000000
Average of the state of the sta		Total ACRS and Other Deprec	iation =	0		<del>-</del>	0	:	0	0
	isted Property: 32 2001 BUI	CK LESABRE Sold/Scrapped: 3/15/09	7/31/07	6,885		-	6,885	5 HY 150DB	2,788	615
		Grand Totals Less: Dispositions and Transfer Net Grand Totals	s	691,703 6,885 684.818			663,345 6,885 656.460	-	327,817 2,788 325.029	24,675 615 24,060

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201010 UNITED METHODIST RENEWAL SERVICES
58-1322015 Bonus Depreciation Report

58-1322015

FYE: 12/31/2009

Asset	Property Description	Date In Service	Tax Cost	Bus Pat	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
93 96 101 104 105 109 110 111 112 113 114 115	120 EAST HVAC WATER HEATER - 120 EAST 121 EQUIPMENT 122 EAST - FURNISHINGS & APPLIANCE COMPUTER EQUIPMENT RECORDING EQUIPMENT LAPTOPS VOICE MAIL RECLINER 121 EAST LANDSCAPING DVD & CD RECORDERS TELEPHONE SYSTEM	11/15/02 12/19/02 6/30/03 6/30/03 9/22/03 3/01/04 1/30/04 4/05/04 8/31/04 2/13/08 4/21/09	1,393 3,701 4,986 5,828 7,577 7,471 4,780 2,083 400 198 9,363 920 600 11,450		000000000000000000000000000000000000000	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	418 1,110 1,496 2,914 3,788 3,735 2,390 1,042 200 99 4,681 460 120 0	975 2,591 3,490 2,914 3,789 3,736 2,390 1,041 200 99 4,682 460 480 5,725
		nd Total	60,750		0	5,725	22,453	32,572

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201010 UNITED METHODIST RENEWAL SERVICES

58-1322015

# Depreciation Adjustment Report All Business Activities

FYE: 12/31/2009

Form U	Unit Asset	Description	Tax	AMT	Adjustments/ Preferences
MACRS	Adjustments				
age I	1 105 1 109 1 110 1 111 1 112 1 113 1 114 1 115 1 116 1 17 1 18 1 19 1 21 1 23 1 24 1 26 1 27 1 29 1 31 1 32	BOOKCASES PROJECTORS OTHER FULLY DEPR PRAYER ROOM TABLE PAGING SYSTEM FAX DESKJET PRINTER COMPUTER COMPUTER TOSH COMPUTER GATEWAY BACKUP PRINTER PRINTER HUTCH DESK CHAIR STORAGE RACK BUILDING COMPUTER MUSIC EQUIPMENT COMPUTER COMPUTER MUSIC EQUIPMENT COMPUTER PIANO FURNITURE LAPTOP COMPUTERS PRINTER BREWER BAPROVEMENTS SMOKE DETECTORS 115 EAST - PAVING 115 EAST FURNISHINGS FURNISHINGS FURNISHINGS COMPUTERS A NETWORK VIDEO EQUIPMENT 121 PAVING 120 PAVING 120 FURNISHINGS 121 TABLES, ETC 121 OFFICE EQUIPMENT 122 EAST AVE FURNISHINGS 120 EAST HOUSE COMPUTER & APPLIANCES COMPUTER EQUIPMENT 121 EQUIPMENT 122 EAST AVE FURNISHINGS 120 EAST HOUSE COMPUTER EQUIPMENT 121 EQUIPMENT 122 EAST AVE FURNISHINGS 120 EAST HVAC WATER HEATER - 120 EAST 121 EQUIPMENT 122 EAST - FURNISHINGS REFRIGERATOR COMPUTER EQUIPMENT LAPTOPS VOICE MAIL RECLINER 121 EAST LANDSCAPING DVD & CD RECORDERS REFRIGERATOR COMPUTER EQUIPMENT - 121 EAST PAGERS - 121 EAST 115 EAST - HVAC 121 EAST - HVAC 122 EAST - HVAC 121 EAST - HVAC 122 EAST - HVAC 121 EAST - HVAC 122 EAST - HVAC 123 EAST - HVAC 124 EAST - HVAC 125 EAST - HVAC 126 EAST - HVAC 127 EAST - HVAC 128 EAST - HVAC 129 EAST - HVAC 120 IBJICK LESABRE COMPUTER LAPTOPS	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	00 00 00 00 00 00 00 00 00 00 00 00 00

201010 UNITED METHODIST RENEWAL SERVICES
58-1322015 Depreciation Adjustment Report
FYE: 12/31/2009 All Business Activities

AMT

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Form	Unît	Asset	Description	Tax	AMT	Adjustments/ Preferences
Page I Page I Page I Page I Page I		136 137 138 141 142	CAMERA & ACCESSORIES LAWN MOWER PRINTERS & COMPUTER EQUIP TELEPHONE SYSTEM HVAC - 120 EAST	226 178 130 192 6.011 24,317	210 152 121 96 5,916 24.675	16 26 9 96 95 -358

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58-1322015 Future Depreciation Report FYE: 12/31/10 06/07/2010 2:46 PM

Form 990, Page 1 FYE: 12/31/2009

Asse	et Description	Date In Service	Cost	Tax	AMT	
Prior	- MACRS:					
131 134 135	BOOKCASES PROJECTORS OTHER FULLY DEPR PRAYER ROOM TABLE PAGING SYSTEM FAX DESKJET PRINTER COMPUTER COMPUTER COMPUTER GATEWAY BACKUP PRINTER PRINTER HUTCH DESK CHAIR STORAGE RACK BUILDING COMPUTER MUSIC EQUIPMENT COMPUTER PLANO FURNITURE LAPTOP COMPUTERS PRINTER BREWER IMPROVEMENTS SMOKE DETECTORS 115 EAST - PAVING 115 EAST FURNISHINGS FURNISHINGS COMPUTERS & NETWORK VIDEO EQUIPMENT 121 PAVING 120 PAVING 120 PAVING 121 OFFICE BOUIPMENT 122 EAST AVE FURNISHINGS 121 TABLES, ETC 121 OFFICE BOUIPMENT 122 EAST - FURNISHINGS 120 EAST HOAC WATER HEATER - 120 EAST 121 EQUIPMENT RECORDING EQUIPMENT RECORDING EQUIPMENT LAPTOPS VOICE MAIL RECLINER 121 EAST LANDSCAPING DVD & CD RECORDERS REFRIGERATOR COMPUTER EQUIPMENT - 121 EAST PAGERS - 121 EAST 115 EAST - HVAC 121 EAST - HVAC 121 EAST - HVAC 122 EAST - HVAC 123 EAST - HVAC 124 EAST - HVAC 125 EAST - HVAC 126 EAST - HVAC 127 EAST - HVAC 128 EAST - HVAC 129 EAST - HVAC 121 EAST - HVAC 121 EAST - HVAC 122 EAST - HVAC 123 EAST - HVAC 124 EAST - HVAC 125 EAST - HVAC 126 EAST - HVAC 127 EAST - HVAC 128 EAST - HVAC 129 EAST - HVAC 120 EAST - HVAC 121 EAST - HVAC 122 EAST - HVAC 123 EAST - HVAC 124 EAST - HVAC 125 EAST - HVAC 126 EAST - HVAC 127 EAST - HVAC 128 EAST - HVAC 129 EAST - HVAC 129 EAST - HVAC 121 EAST - HVAC 121 EAST - HVAC 122 EAST - HVAC 123 EAST - HVAC 124 EAST - HVAC 125 EAST - HVAC 126 EAST - HVAC 127 EAST - HVAC 128 EAST - HVAC 129 EAST - HVAC 129 EAST - HVAC 121 EAST - HVAC 121 EAST - HVAC 122 EAST - HVAC 123 EAST - HVAC 124 EAST - HVAC 125 EAST - HVAC 126 EAST - HVAC 127 EAST - HVAC 128 EAST - HVAC 129 EAST - HVAC 129 EAST - HVAC 120 EAST - HVAC 121 EAST - HVAC 121 EAST - HVAC 122 EAST - HVAC 123 EAST - HVAC 124 EAST - HVAC 125 EAST - HVAC 126 EAST - HVAC 127 EAST - HVAC 128 EAST - HVAC 129 EAST - HVAC 129 EAST - HVAC 120 EAST - HVAC 121 EAST - HVAC 121 EAST - HVAC 122 EAST - HVAC 123 EAST - HVAC 124 EAST - HVAC 125 EAST - HVAC 126 EAST - HVAC 127 EAST - HVAC 128 EAST - HVAC 129 E	2/16/94 1/07/93 2/19/93 12/31/94 7/23/96 6/06/96 8/31/96 6/06/97 8/01/97 10/23/97 10/29/97 6/30/97 6/30/97 4/30/97 11/23/98 10/23/98 10/23/98 10/23/98 10/23/99 11/10/99 11/10/99 11/10/99 11/19/99 11/19/99 12/01/99 10/21/99 11/19/99 12/01/99 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/90 11/19/00 6/01/00 11/15/02 12/19/02 6/30/03 9/22/03 3/01/04 1/30/04 4/05/04 8/17/04 8/31/04 2/23/05 6/18/05 6/23/05 1/26/05 12/14/05 6/23/07 11/28/07	336 370 7,032 311 2,270 520 456 2,480 2,211 2,017 280 300 70 620 419 1,77 422,810 3,499 1,064 2,519 1,190 6,400 1,303 7,154 200 5,456 21,946 38,660 17,719 14,070 5,003 4,097 8,466 17,719 14,070 5,828 7,577 7,471 4,780 2,833 400 198 9,363 9,20 6,485 2,787 7,471 4,780 2,886 2,886 1,946 3,311 1,393 3,701 4,986 7,577 7,471 4,780 2,888 7,577 7,471 4,780 2,888 7,577 7,471 4,780 2,888 7,577 7,471 4,780 2,883 400 198 9,363 9,20 6,485 2,895 7,577 7,471 4,780 2,885 7,577 7,471 4,780 2,885 7,577 7,471 4,780 2,885 7,577 7,471 4,780 2,885 7,577 7,471 4,780 2,885 7,577 7,471 4,780 2,883 4,097 8,463 1,178 1,178 1,178	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	

201010 UNITED METHODIST RENEWAL SERVICES
58-1322015 Future Depreciation Report

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Asset 137 138 141	Description  LAWN MOWER PRINTERS & COMPUTER EQUIP TELEPHONE SYSTEM	Date In Service 11/28/07 7/07/07 2/13/08	1,014 677 600	Tax 126 78 115	AMT 124 113 58 382
142 - Other I	HVAC - 120 EAST  Depreciation:	4/21/09	693,319	344 16,273	16,720
57 76 77 80 81 91 95 97 99 106 107 108 120 133 139 140	LAND  115 EAST AVE - HOUSE  LAND - 115 EAST AVE HOUSE  120 EAST IMPROVEMENTS  121 IMPROVEMENTS  121 IMPROVEMENTS  120 EAST AVE IMPROVEMENTS  122 EAST AVE HOUSE  122 EAST AVE - LAND  120 EAST IMPROVEMENTS  121 EAST IMPROVEMENTS  121 EAST IMPROVEMENTS  122 EAST IMPROVEMENTS  123 EAST IMPROVEMENTS  124 EAST IMPROVEMENTS  125 EAST - GUTTERGUARDS  120 EAST IMPROVEMENTS  120 EAST ADD WALL  115 EAST ROOF  115 EAST - WINDOWS  Total Other Depreciation	11/23/98 4/05/00 4/05/00 6/01/00 6/01/00 4/09/01 12/18/02 9/26/02 9/26/02 6/30/03 6/30/03 6/30/03 12/31/05 9/26/05 6/06/06 2/17/07 6/27/07 11/04/08	246,451 85,141 20,000 3,156 491,968 2,831 25,699 85,097 20,000 106,266 8,369 6,976 4,623 2,500 11,062 2,613 4,226 4,200 1,131,178	0 3,096 0 81 12,614 73 659 2,182 0 2,725 214 254 0 91 283 67 153 153	000000000000000000000000000000000000000
	Total ACRS and Other Depreciation		1,131,178	22,645	16 720
	Grand Totals		1,824,497	38.918	16,72

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TN Future Depreciation Report FYE: 12/31/10

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Date In Cost Service Description Asset Prior MACRS: 2/16/94 BOOKCASES 1/07/93 370 **PROJECTORS** 9 7,032 2/19/93 OTHER FULLY DEPR 11 PRAYER ROOM TABLE 12/31/94 311 27 2,270 7/23/96 PAGING SYSTEM 43 6/06/96 520 44 FAX 8/31/96 DESKJET PRINTER 456 45 COMPUTER 2,480 6/06/97 47 COMPUTER TOSH COMPUTER GATEWAY 2,211 8/01/97 10/23/97 2,017 49 10/29/97 280 BACKUP 8/29/97 280 51 PRINTER 300 PRINTER 6/30/97 70 53 54 6/30/97 HUTCH DESK 4/30/97 620 4/30/97 419 55 56 CHAIR 0 1/22/97 177 STORAGE RACK 11/23/98 422,810 10,841 BUILDING COMPUTER MUSIC EQUIPMENT 3,499 0 10/23/98 12/22/99 1,064 12/22/99 0 COMPUTER 2.519 61 COMPUTER 0 8/03/99 1.190 11/01/99 0 67 6,400 PIANO 11/10/99 1,303 **FURNITURE** 68 11/19/99 7,154 0 69 70 71 72 73 78 79 82 LAPTOP COMPUTERS 200 PRINTER 12/01/99 10/21/99 190 BREWER IMPROVEMENTS SMOKE DETECTORS 11/22/99 3,163 81 12/22/99 245 0 115 EAST - PAVING 115 EAST HOUSE - PAINT & FLOOR 2,200 129 7/12/00 5/10/00 5.456 0 6/01/00 21,946 115 EAST FURNISHINGS 6/01/00 38,660 **FURNISHINGS** 83 0 84 COMPUTERS & NETWORK 6/01/00 17,719 VIDEO EQUIPMENT 6/01/00 14,070 85 295 5,003 121 PAVING 4/20/01 86 120 PAVING 4/20/01 2,500 148 87 0 4,097 4/20/01 120 FURNISHINGS 88 5/16/01 0 121 TABLES, ETC 89 8/23/01 3,311 0 121 OFFICE ÉQUIPMENT 90 0 11/15/02 1,393 93 122 EAST AVE FURNISHINGS 3,701 12/19/02 0 120 EAST HVAC 96 220 WATER HEATER - 120 EAST 6/30/02 4,986 101 130 6/30/03 5,828 121 EQUIPMENT 104 122 EAST - FURNISHINGS & APPLIANCES 7,577 169 6/30/03 105 7.471 COMPUTER EQUIPMENT 9/22/03 109 213 3/01/04 4,780 RECORDING EQUIPMENT 110 1/30/04 2,083 LAPTOPS 111 0 VOICE MAIL 4/05/04 400 112 9 4/05/04 198 RECLINER 113 121 EAST LANDSCAPING 8/17/04 9,363 276 114 DVD & CD RECORDERS 920 8/31/04 115 38 2/23/05 652 REFRIGERATOR 116 COMPUTER EQUIPMENT - 121 EAST 6/18/05 6,485 373 117 2,895 167 5/31/05 PAGERS - 121 EAST 118 7/25/05 784 70 EQUIP & FURN - 121 EAST 119 115 EAST - HVAC 121 EAST - HVAC 239 1/26/05 3,833 121 276 12/14/05 4.438 2,078 129 122 EAST - HVAC 6/23/05 124 7/31/06 2,187 252 COMPUTER & MUSIC EQUIPMENT 126 4,690 540 127 128 COPIER & COMPUTERS 9/18/06 E TAPESTRY 8/15/06 8,501 6/01/06 1,360 129 PODIUM 3,150 219 121 EAST -HVAC ZONE SYSTEM 6/08/06 131 188 4/07/07 1.634 134 COMPUTER LAPTOPS 6/23/07 1.319 152 135 CAMERA & ACCESSORIES 11/28/07 1.178

201010 UNITED METHODIST RENEWAL SERVICES
58-1322015 TN Future Depreciation Report

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FYE: 12/31/10

Asset 137 138 141 142	Description  LAWN MOWER PRINTERS & COMPUTER EQUIP TELEPHONE SYSTEM HVAC - 120 EAST	Date In Service 11/28/07 7/07/07 2/13/08 4/21/09	Cost 1,014 677 600 11,450 693,319	TN 126 78 115 763 16,492
Other l	Depreciation:			
57 76 77 80 81 91 95 97 99 106 107 108 120 133 139	LAND  115 EAST AVE - HOUSE  LAND - 115 EAST AVE HOUSE  120 EAST IMPROVEMENTS  121 EAST AVE IMPROVEMENTS  121 IMPROVEMENTS  120 EAST AVE IMPROVEMENTS  122 EAST AVE HOUSE  122 EAST AVE - LAND  120 EAST IMPROVEMENTS  121 EAST IMPROVEMENTS  122 EAST IMPROVEMENTS  125 EAST IMPROVEMENTS  126 EAST IMPROVEMENTS  127 EAST IMPROVEMENTS  128 EAST GUTTERGUARDS  129 EAST IMPROVEMENTS  120 EAST ADD WALL  115 EAST ROOF  115 EAST - WINDOWS	11/23/98 4/05/00 4/05/00 6/01/00 6/01/00 4/09/01 12/18/02 9/26/02 6/30/03 6/30/03 6/30/03 12/31/05 9/26/05 6/06/06 2/17/07 11/04/08	246,451 85,141 20,000 3,156 491,968 2,831 25,699 85,097 20,000 106,266 8,369 6,976 4,623 2,500 11,062 2,613 4,226 4,200	0 3,096 0 81 12,614 73 659 2,182 0 2,725 214 254 0 91 283 67 153 153
	Total Other Depreciation		1,131.178	22,645
	Total ACRS and Other Depreciation		1,131,178	22,645
	Grand Totals	=	1,824,497	39,137

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201010 UNITED METHODIST RENEWAL SERVICES

58-1322015

### Federal Statements

FYE: 12/31/2009

#### Tax-Exempt Interest on Investments

Description	 Amount	Unrelated Business Code	Postal Code	Acquired after 6/30/75
INTEREST AND DIVIDENDS UNREALIZED GAIN	\$ 6,221 74,011		 TN TN	
Total	\$ 80,232			

### Forms 990 / 990-EZ Return Summary

For calendar year 2009, or tax year beginning

, and ending

UNITED METHODIST RENEWAL SERVICES 58-1322015 FELLOWSHIP, INC.

Net Asset / Fund Balance at B	eginning of Year			1,846,695
Revenue				
Contributions		627,469		
Program service revenue	*****	210,755		
Investment income	<del></del>	80,232		
Capital gain / loss		356		
Special events:	<del></del>	330		
Gross revenue				
Direct expenses				
Net income				
Other income		34,020		
Total revenue		01/020	952,832	
Expenses			3027002	
Program services		706,139		
Management and general	<del></del>	239,639		
Fundraising	<u> </u>	55,718		
Total expenses			1,001,496	
Excess / (deficit)				-48,664
,				
Other changes				
-				
Net Asset / Fund	Balance at End of Year			1,798,031
Reconciliation of otal revenue per financial statement	<sup>:</sup> Revenue		Reconciliation o penses per financial stateme	f Expenses
Reconciliation of otal revenue per financial statement ess:	<sup>:</sup> Revenue	Less:	penses per financial stateme	f Expenses
Reconciliation of otal revenue per financial statement ess: Unrealized gains	<sup>:</sup> Revenue	Less: Don	penses per financial stateme ated services	f Expenses
Reconciliation of otal revenue per financial statement ess: Unrealized gains Donated services	<sup>:</sup> Revenue	Less: Don Prior	penses per financial stateme ated services r year adjustments	f Expenses
Reconciliation of otal revenue per financial statement ess: Unrealized gains Donated services Recoveries	<sup>:</sup> Revenue	Less: Don Prior Loss	penses per financial stateme ated services r year adjustments ses	f Expenses
Reconciliation of otal revenue per financial statement ess: Unrealized gains Donated services Recoveries Other	<sup>:</sup> Revenue	Less: Don Prior Loss Othe	penses per financial stateme ated services r year adjustments ses	f Expenses
Reconciliation of otal revenue per financial statement ess: Unrealized gains Donated services Recoveries Other	<sup>:</sup> Revenue	Less: Don Priot Loss Othe Plus:	penses per financial stateme ated services r year adjustments ses	f Expenses
Reconciliation of otal revenue per financial statement ess:  Unrealized gains  Donated services  Recoveries  Other  Unvestment expenses	<sup>:</sup> Revenue	Less: Don Priot Loss Othe Plus: Inves	penses per financial stateme ated services r year adjustments ses er stment expenses	f Expenses
Reconciliation of otal revenue per financial statement ess:  Unrealized gains Donated services Recoveries Other Investment expenses Other	Revenue 952,832	Less: Don Prior Loss Othe Plus: Inver	penses per financial stateme ated services r year adjustments ses er stment expenses	f Expenses ents 1,001,49
Reconciliation of otal revenue per financial statement ess:  Unrealized gains  Donated services  Recoveries  Other  Investment expenses	<sup>:</sup> Revenue	Less: Don Prior Loss Othe Plus: Inver	penses per financial stateme ated services r year adjustments ses er stment expenses	f Expenses ents 1,001,49
Reconciliation of otal revenue per financial statement ess:  Unrealized gains Donated services Recoveries Other Investment expenses Other	Revenue 952,832	Less: Don Prior Loss Othe Plus: Inver	penses per financial stateme ated services r year adjustments ses er stment expenses	f Expenses ents 1,001,49
Reconciliation of otal revenue per financial statement ess: Unrealized gains Donated services Recoveries Other Unvestment expenses Other	Revenue 952,832	Less: Don Prior Loss Othe Plus: Inver	penses per financial stateme ated services r year adjustments ses er stment expenses er Fotal expenses per return	f Expenses ents 1,001,49
Reconciliation of otal revenue per financial statement ess:  Unrealized gains Donated services Recoveries Other Univestment expenses Other	952,832 952,832	Less: Don Prior Loss Othe Plus: Inver	penses per financial stateme ated services r year adjustments ses er stment expenses er Fotal expenses per return	f Expenses 2,001,49
Reconciliation of otal revenue per financial statement ess: Unrealized gains Donated services Recoveries Other Unvestment expenses Other	Revenue 952,832	Less: Don Prior Loss Othe Plus: Inver Othe	penses per financial stateme ated services r year adjustments ses er stment expenses er Fotal expenses per return Differences	f Expenses 2,001,49
Reconciliation of otal revenue per financial statement ess:  Unrealized gains Donated services Recoveries Other  Is: Investment expenses Other Total revenue per return	FRevenue 952,832 952,832 952,832 Beginning	Less: Don Prior Loss Othe Plus: Inver Othe  Balance Sheet Ending	penses per financial statemented services r year adjustments ses er stment expenses er Fotal expenses per return Differences	f Expenses 2,001,49
Reconciliation of otal revenue per financial statement ess:  Unrealized gains Donated services Recoveries Other is: Investment expenses Other Total revenue per return  Assets	Revenue 952,832 952,832 952,832  952,832  Beginning 1,924,492	Less: Don Prior Loss Othe Plus: Inver Othe  Balance Sheet Ending 1,889,1	penses per financial statemented services r year adjustments ses er stment expenses er Fotal expenses per return  Differences	f Expenses 1,001,49
Reconciliation of otal revenue per financial statement ess:  Unrealized gains Donated services Recoveries Other us: Investment expenses Other Total revenue per return  Assets Liabilities	Peginning 1,924,492 77,797	Less: Don Prior Loss Othe Plus: Inver Othe  Balance Sheet Ending 1,889,1	penses per financial statemented services r year adjustments ses er stment expenses er Fotal expenses per return  Differences	f Expenses 1,001,49
Reconciliation of otal revenue per financial statement ess:  Unrealized gains Donated services Recoveries Other us: Investment expenses Other Total revenue per return  Assets Liabilities	Beginning 1,924,492 77,797 1,846,695	Less: Don Prior Loss Othe Plus: Inver Othe  Balance Sheet Ending 1,889,1 91,0	penses per financial statemented services r year adjustments ses er stment expenses er Fotal expenses per return  Differences	f Expenses
Reconciliation of otal revenue per financial statement ess:  Unrealized gains Donated services Recoveries Other us: Investment expenses Other Total revenue per return  Assets Liabilities	Beginning 1,924,492 77,797 1,846,695  Miscellaneous	Less: Don Prior Loss Othe Plus: Inver Othe  Balance Sheet Ending 1,889,1 91,0	penses per financial statemented services r year adjustments ses er stment expenses er Fotal expenses per return  Differences	f Expenses ents 1,001,49
Reconciliation of otal revenue per financial statement ess:  Unrealized gains Donated services Recoveries Other us: Investment expenses Other Total revenue per return  Assets Liabilities	Beginning 1,924,492 77,797 1,846,695	Less: Don Prior Loss Othe Plus: Inver Othe  Balance Sheet Ending 1,889,1 91,0 1,798,0	penses per financial statemented services r year adjustments ses er stment expenses er Fotal expenses per return  Differences 28 97 31 -48,	f Expenses