			EXTENDED TO APRIL 18, 201	6	
	0	90	Return of Organization Exempt From	n Income Tax	OMB No. 1545-0047
For	n J	30	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (2014
		of the Treasury enue Service	 Do not enter social security numbers on this form as it may l Information about Form 990 and its instructions is at www 		Open to Public Inspection
_				AUG 31, 2015	mopeotion
	heck if		f organization	D Employer identificat	tion number
a	pplicab	ole:			
	Addr chan		N ECOLOGY CENTER INC		10660
	_]chan	ge Doing b	usiness as	39-171	2003
	_returr Final returr	1500	and street (or P.O. box if mail is not delivered to street address) Room/su EAST PARK PLACE	uite E Telephone number	964-8505
_	termi ated	City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	4,273,957.
	Amer returr		AUKEE, WI 53211-3587	H(a) Is this a group retu	
	Appli tion pend	^{ing} F Name a	nd address of principal officer:PETER CAMPBELL AS C ABOVE	for subordinates?	
		empt status:		H(b) Are all subordinates inclu	
			▲ 501(c)(3) 501(c) () URBANECOLOGYCENTER • ORG	527 If "No," attach a list	
				H(c) Group exemption r fear of formation: 1992 M S	
	art I				
	<u> </u>		be the organization's mission or most significant activities: $\frac{ ext{THE} ext{URBA}}{ ext{URBA}}$	N FCOLOCY CENT	
Se	1		S AND INSPIRES PEOPLE TO UNDERSTAND A	N BCOLOGI CENTI ND VALUE NATURI	2 Z G
nan			•		
Governance	2	Check this bo	- · · ·		32
ŝ	3		ting members of the governing body (Part VI, line 1a) lependent voting members of the governing body (Part VI, line 1b)		32
مە	45		of individuals employed in calendar year 2014 (Part V, line 2a)		143
itie	6				5174
Activities &			of volunteers (estimate if necessary)		0.
Ă			business taxable income from Form 990-T, line 34		0.
		Net difference		Prior Year	Current Year
	8	Contributions	and grants (Part VIII, line 1h)	3,657,950.	3,509,016.
Revenue	9		ce revenue (Part VIII, line 2g)	583,940.	663,405.
eve	10	•	come (Part VIII, column (A), lines 3, 4, and 7d)	11,695.	709.
č	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	84,900.	24,387.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,338,485.	4,197,517.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)	2,423,625.	312,008.
	14		to or for members (Part IX, column (A), line 4)	0.	0.
ŝ		.		2,788,593.	2,925,603.
Expenses	16a	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5·10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) ▶447,770.	0.	0.
e de	b	Total fundrais	ing expenses (Part IX, column (D), line 25) 447, 770 .		
ш			es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,417,283.	1,245,437.
	18	Total expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,629,501.	4,483,048.
	19	Revenue less	expenses. Subtract line 18 from line 12	-2,291,016.	-285,531.
s or				Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (I	Part X, line 16)	12,071,245.	11,790,273.
it As	21	Total liabilities	(Part X, line 26)	1,327,719.	1,330,886.
Fur	22		fund balances. Subtract line 21 from line 20	10,743,526.	10,459,387.
Pa	art II	•			
			I declare that I have examined this return, including accompanying schedules and sta		nowledge and belief, it is
true,	corre	ct, and complete	Declaration of preparer (other than officer) is based on all information of which prepared	arer has any knowledge.	

Sign Signature of officer Date Here PETER CAMPBELL, TREASURER										
	Type or print name and title									
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN						
Paid	KELLY K MILLER, CPA		02/03/10	$5 \frac{\text{if}}{\text{self-employed}} \mathbb{P}00562808$						
Preparer		, , ,	CPAS Firm	's EIN ▶ 39-1210538						
Use Only	Firm's address 400 EAST MASON S	TREET, SUITE 300								
	MILWAUKEE, WI 53	202	Pho	ne no.(414) 271-1700						
May the I	RS discuss this return with the preparer shown abo	ove? (see instructions)		X Yes No						
432001 11-0	7-14 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.		Form 990 (2014)						

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	1 990 (2014) URBAN ECOLOGY CENTER INC 39-1712663	Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	Χ
1	Briefly describe the organization's mission:	
	THE URBAN ECOLOGY CENTER EDUCATES AND INSPIRES PEOPLE TO UNDERSTAND	
	AND VALUE NATURE AS MOTIVATION FOR POSITIVE CHANGE, NEIGHBORHOOD BY	
	NEIGHBORHOOD. OUR ENVIRONMENTAL COMMUNITY CENTERS: PROVIDE OUTDOOR	
	SCIENCE EDUCATION FOR URBAN YOUTH; PROTECT AND USE PUBLIC NATURAL	<u> </u>
2	Did the organization undertake any significant program services during the year which were not listed on	
-		XNo
	the prior Form 990 or 990-EZ?	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	XNo
3		
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, a	Ind
	revenue, if any, for each program service reported.	124
4a		124.)
	PROVIDE OUTDOOR SCIENCE EDUCATION FOR URBAN YOUTH. THE URBAN ECOLO	צי
	CENTER PARTNERS WITH SCHOOLS TO PROVIDE 24 HALF-DAY FIELD TRIPS	
	ANNUALLY WHICH PROVIDE HANDS-ON SCIENCE AND ENVIRONMENTAL EDUCATION	
	PROGRAMS DESIGNED TO COMPLEMENT THE SCHOOLS' SCIENCE CURRICULA AND	
	CONNECT STUDENTS TO THE NATURAL WORLD IN THE CITY OF MILWAUKEE.	
	PRESCHOOL, AFTER SCHOOL AND SUMMER CAMP PROGRAMS COMPLEMENT THE SCHO	
	PROGRAM THROUGHOUT THE YEAR. OVER 31,000 CHILDREN WERE SERVED THROU	JGH
	THESE EDUCATIONAL PROGRAMS.	
4b		768.)
	PROMOTE COMMUNITY BY OFFERING RESOURCES THAT SUPPORT LEARNING,	
	VOLUNTEERISM, STEWARDSHIP, RECREATION AND CAMARADERIE. THE URBAN	
	ECOLOGY CENTER'S ACTIVE COMMUNITY CENTERS ENGAGE ADULTS, YOUTH AND	
	FAMILIES IN OPPORTUNITIES TO CONNECT WITH EACH OTHER THROUGH	
	PROGRAMMING AND VOLUNTEER OPPORTUNITIES. 24,000 YOUTH AND ADULTS	
	PARTICIPATED IN COMMUNITY PROGRAMS SUCH AS BIRTHDAY PARTIES AND	
	FESTIVALS. AN ADDITIONAL 22,000 PEOPLE VISITED OUR CENTERS THROUGH	
	UNSTRUCTURED ACTIVITIES AND 14,000 PEOPLE VISITED AS PART OF FACILI	ГҮ
	RENTAL EVENTS. OUR ROBUST VOLUNTEER PROGRAM SERVED 5,174 VOLUNTEER	
4c	(Code:) (Expenses \$ 427,054. including grants of \$) (Revenue \$ 12,	545.)
10	PROTECT AND USE PUBLIC NATURAL AREAS, MAKING THEM SAFE, ACCESSIBLE 2	AND
	VIBRANT. THE CENTER'S CITIZEN SCIENCE PROGRAM HAS TURNED A ONCE	
	CRIME-RIDDEN PARK INTO A FIELD RESEARCH SITE FOR LOCAL COLLEGES AND	
	UNIVERSITIES. A VARIETY OF RESEARCH OPPORTUNITIES ARE AVAILABLE TO	THE
	PUBLIC, INCLUDING SURVEYS OF BIRDS, BATS, MAMMALS, TURTLES, ETC., A	
	WELL AS VEGETATION SURVEYS AND PARK USE SURVEYS. URBAN ADVENTURES	
	PROVIDES CANOEING, KAYAKING, SNOWSHOEING, ROCK CLIMBING, SKIING AND	
	BIKING OUTINGS. OVER 12,000 ADULTS AND YOUTH PARTICIPATED IN THESE	<u> </u>
	PROGRAM OFFERINGS.	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 694,610. including grants of \$ 312,008.) (Revenue \$ 7,745.)	
4e	Total program service expenses 3,563,835.	
43200	P Form 9	90 (2014)
11-07-	-14	
	$\frac{2}{1202}$	0.0.01
090	203 768059 139390000 2014.05060 URBAN ECOLOGY CENTER INC 1393	9001

Form 990 (2014)

Part IV Checklist of Required Schedules

URBAN ECOLOGY CENTER INC

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2		2	Х	
3		3		x
4	If 'Yes,' complete Schedule A. Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part II Section 501(c)(9) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II Did the organization as action 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amutoms as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule D, Part II Did the organization reports an amount or investment of amounts in such funds or accounts for which donors have the right to provide advice or the distribution or investment of amounts in such cludes generated use. <i>Provide advice and the environment</i> . Including easements to preserve open space, the environment. Instoric land areas, or historic structures? If 'Yes,' complete Schedule D, Part II Did the organization report an amount in Part X, line 21, for secrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit ourseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part II Did the organization report an amount for investment - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part IV 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 VI 10 the organization report an amount for investments - other securities 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 VI 11 Did the organization report an amount for investme			x
5		4		
5		5		x
6				
Ŭ		6		x
7				
-		7		x
8				
	-	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
		11a	X	<u> </u>
b				x
_		11b		
С		110		x
Ч		11c		- 23
u	- · · ·	11d		x
۵		11e	Х	
f				<u> </u>
•		11f	х	
12a				
		12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
		14b		X
15				37
		15		X
16				v
17		16		X
17		17		x
18				<u> </u>
10		18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII line 9a? If "Yes "			
		19		x
20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2014)

432003 11-07-14

07090203 768059 139390000

URBAN ECOLOGY CENTER INC

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	L
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			x
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
~ ~	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		х	
05-	Part V, line 1	34		x
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	35b		1
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	350		<u> </u>
36	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u> </u>
07	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		1	_ <u>-</u>
	Note. All Form 990 filers are required to complete Schedule O	38	х	1

Form **990** (2014)

432004 11-07-14

07090203 768059 139390000

13939001

Form	URBAN ECOLOGY CENTER INC 39-1712	663	Р	age 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 9			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 143			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	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)?	4a		x
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
q	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	9 90	(2014)

432005 11-07-14

Form 990 (2014

URBAN ECOLOGY CENTER INC

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

	Check if Schedule O contains a response or note to any line in this Part VI				Σ
Sec	tion A. Governing Body and Management				_
		1 1	2 o 🕅	Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	32		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.		2.0		
b	Enter the number of voting members included in line 1a, above, who are independent		32		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	nip with any other			
	officer, director, trustee, or key employee?		2		
3	Did the organization delegate control over management duties customarily performed by or under the	he direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?		3		
4	Did the organization make any significant changes to its governing documents since the prior Form	990 was filed?	4		
5	Did the organization become aware during the year of a significant diversion of the organization's a	ssets?	5		
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or				
	more members of the governing body?		7a	x	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,				
~	persons other than the governing body?		7b	x	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y		10		
			8a	x	
d L	The governing body? Each committee with authority to act on behalf of the governing body?		8a 8b	X	+
			uo	- 23	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		<u> </u>
ec	tion B. Policies (This Section B requests information about policies not required by the Internal	Revenue Code.)		V	Γ.
~			40	Yes X	1
	Did the organization have local chapters, branches, or affiliates?		10a	<u> </u>	-
b	If "Yes," did the organization have written policies and procedures governing the activities of such				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10 b	X	
1 1 a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy before filing the form	? 11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	se to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If '	Yes," describe			
	in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?			X	
4	Did the organization have a written document retention and destruction policy?			Х	
5	Did the process for determining compensation of the following persons include a review and appro				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	•			
а	The organization's CEO, Executive Director, or top management official		15a	x	
	Other officers or key employees of the organization			x	
5	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
6-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	ement with a			
₽d			46-		
Ŀ	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu		16a		ľ
D					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	anization's			
	exempt status with respect to such arrangements?		16 b		
ec	tion C. Disclosure				
7	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright WI				
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-T (Section 501(c)(3)s or	ıly) availal	ole	
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain the context of the con	in in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or		and finar	ncial	
		ormer or interest policy,	anu iiidi	iciai	
20	statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization's the THE ORGANIZATION $-414-964-8505$	oooks and records:			
	1500 EAST PARK PLACE, MILWAUKEE, WI 53211-3587			000	10-
2006	5 11-07-14 C		Forr	n 990	(20
• •			4 0	0 2 0	<u> </u>
90	203 768059 139390000 2014.05060 URBAN ECOLOGY	CENTER INC	13	939	υÜ

Part VII	Compensation of Officers,	Directors,	Trustees,	Key Em	ployees,	Highest	Compens	ated
	Employees, and Independe	ent Contra	ctors					

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

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

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

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

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

(A)	(B)		411120	(C		npei	iout	(D)	(E)	(F)
Name and Title	Average			Pos	ition			Reportable	Reportable	Estimated
Nume and The	hours per					than is bot		compensation	compensation	amount of
	week					or/trus		from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dire	a			ated		organization	(W-2/1099-MISC)	from the
	related	istee	truste		e	pens		(W-2/1099-MISC)		organization
	organizations below	ual tru	ional		ploye	t com				and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) ED KRISHOK	2.00	<u> </u>	<u> </u>	Ó	l ₹	포뇽	포			
PRESIDENT		x		x				0.	0.	0.
(2) MONIQUE CHARLIER	2.00									
VICE PRESIDENT		X		Х				0.	0.	0.
(3) JENNIFER BOLGER-BRECEDA	2.00									
SECRETARY		X		Х				0.	0.	0.
(4) PETER CAMPBELL	2.00									
TREASURER		Х		Х				0.	0.	0.
(5) BOB BOURGEOIS	2.00									
BOARD MEMBER		Х						0.	0.	0.
(6) JOSEPH BROOKS	2.00								_	
BOARD MEMBER		х						0.	0.	0.
(7) DAVID CARR	2.00									
BOARD MEMBER		х						0.	0.	0.
(8) JOHN CLANCY	2.00									•
BOARD MEMBER		X						0.	0.	0.
(9) ERIC CRAWFORD	2.00									0
BOARD MEMBER		X						0.	0.	0.
(10) PENNY CRUSE	2.00									0
BOARD MEMBER		X						0.	0.	0.
(11) DAN DAVIS	2.00	v						0	0	0
BOARD MEMBER	2.00	X						0.	0.	0.
(12) DAVID FROILAND BOARD MEMBER	2.00	x						0.	0.	0.
(13) DENNIS GRZEZINSKI	2.00					-		0.	0.	0.
BOARD MEMBER	2.00	x						0.	0.	0.
(14) EDWARD HAMMOND	2.00									
BOARD MEMBER		x						0.	0.	0.
(15) TONY HANING	2.00									
BOARD MEMBER		x						0.	0.	0.
(16) TROY HILLARD	2.00									
BOARD MEMBER		x						0.	0.	0.
(17) JENNIFER MATTES	2.00									
BOARD MEMBER		х						0.	0.	0.
				_	_	_				Form 990 (2014)

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2014.05060 URBAN ECOLOGY CENTER INC

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Form 990 (2014) URBAN EC	COLOGY C	EN'	ΓEF	R I	INC	2			39-17	12	663	Page 8
Part VII Section A. Officers, Directors, Tru	ustees, Key Em	ploy	/ees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)			
(A) Name and title	(B) Average hours per	box	not c , unle	(C Posi heck i ss per id a di	ition more erson i	than is bot	th an	(D) Reportable compensation	(E) Reportable compensatior	ı	Est amo	(F) imated ount of
	week (list any hours for related organizations below line)	tee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS		comp fro orga and	other pensation om the nization related nizations
(18) ANTOINE MCDUFFIE BOARD MEMBER	2.00	x	-	0	×	10		0.		0.		0
(19) REBECCA MITICH	2.00											
BOARD MEMBER		X						0.		0.		0.
(20) JOSHUA MORBY BOARD MEMBER	2.00	x						0.		0.		0
(21) BLAKE MORET	2.00							0.		0.		0
BOARD MEMBER		x						0.		0.		0.
(22) DEREK MOSLEY	2.00											
BOARD MEMBER		X						0.		0.		0.
(23) WILL NASGOVITZ	2.00											0
SOARD MEMBER (24) KATE NELSON	2.00	X						0.		0.		0.
30ARD MEMBER	2.00	x						0.		0.		0.
(25) MOLLY SCHISSLER	2.00											
BOARD MEMBER		x						0.		0.		0
(26) CALLAN SCHOONENBERG	2.00											-
BOARD MEMBER		X					Ļ	0.		0.		0.
1b Sub-total c Total from continuation sheets to Part								100,593.		0.	12	2,676.
d Total (add lines 1b and 1c)								100,593.		0.		2,676.
2 Total number of individuals (including but compensation from the organization							ho re	eceived more than \$100),000 of reportable)		1
3 Did the organization list any former office												Yes No
line 1a? <i>If "Yes," complete Schedule J for</i> 4 For any individual listed on line 1a, is the											3	
and related organizations greater than \$1 5 Did any person listed on line 1a receive o	50,000? If "Yes,	," со	mple	ete S	Sche	edul	e J f	or such individual			4	X
rendered to the organization? If "Yes," co					-			-			5	X
Section B. Independent Contractors												
1 Complete this table for your five highest of the organization. Report compensation for	•	•							•	oensa	ation fr	om
(A) Name and busines	ss address	N	ONI	2				(B) Description of s	ervices	С	(C) ompen	
							_					
2 Total number of independent contractors	(including but r	oot li	mito	d to	tho	soli	stod	abovo) who received r	pore than			
\$100,000 of compensation from the orga				u 10		0 0	Jieu					
SEE PART VII, SECTIO		ΓII	NUZ	AT I	101	N S	SHI	EETS			Form 9	990 (2014)
432008 11-07-14						0						
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Form 990 URBAN ECO									39-171	2663
					ligh	est	t Compensated Employees (continued)			
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	-				Reportable	Reportable	Estimated		
	hours	(cl	heck	all t	that	app	ly)	compensation	compensation	amount of
	per week					Ð		from the	from related organizations	other compensation
	(list any	to				ploye		organization	(W-2/1099-MISC)	from the
	hours for	direc				d em		(W-2/1099-MISC)	(11 2/1000 11100)	organization
	related	tee or	istee			en sate				and related
	organizations	l trus	nal tri		oyee	dwo				organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
	line)	hl	lns	Offi	Key	Hig	For			
(27) JIM SCHLEIF	2.00								0	•
BOARD MEMBER		X						0.	0.	0.
(28) JEFF SPENCE	2.00							0	0	0
BOARD MEMBER		X						0.	0.	0.
(29) BRIAN VANDERWEELE	2.00								<u>^</u>	<u>^</u>
BOARD MEMBER		X				<u> </u>	<u> </u>	0.	0.	0.
(30) DANIEL VAN HOUSEN	2.00								~	^
BOARD MEMBER	0.00	X						0.	0.	0.
(31) ANDRE WILLIAMS	2.00							0	0	0
BOARD MEMBER	2 00	X						0.	0.	0.
(32) MARY GUTE WITTE	2.00	v						0	0	0
BOARD MEMBER	40.00	X						0.	0.	0.
(33) KEN LEINBACH	40.00			x				100 503	0.	10 676
EXECUTIVE DIRECTOR				~				100,593.	0.	12,676.
						-				
		1								
		1								
Total to Part VII, Section A, line 1c								100,593.		12,676.

art '	VIII							
		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII	(B)	(C)	L
					Total revenue	Related or exempt function revenue	Unrelated business revenue	(D) Revenue exclud from tax unde sections 512 - 514
1	1 a	Federated campaigns	1a	17,317.				
		Membership dues		1				
	С	Fundraising events		155,246.				
		Related organizations		04 505				
		Government grants (contribut		24,506.				
	f	All other contributions, gifts, gran		211 047				
		similar amounts not included abor		311,947.				
	g	Noncash contributions included in lines	1a-1f: \$	114,240.	3 509 016			
	h	Total. Add lines 1a-1f		· · · · ·	3,509,016.			
	• -	PROGRAM SERVICE		Business Code 611600	553,140.	553,140.		
²		RENTAL REVENUE		532000	110,265.			
				552000	110,205.	110,205.		
	c d							
2	u e							
		All other program service reve						
		Total. Add lines 2a-2f			663,405.			
3		Investment income (including			-			
		other similar amounts)			3,295.			3,29
4	4	Income from investment of tax						
5	5	Royalties		🕨				
			(i) Real	(ii) Personal				
6	6 a	Gross rents	7 ,691.					
	b	Less: rental expenses	2,656.					
		Rental income or (loss)	5,035.					
	d	Net rental income or (loss)		►	5,035.			5,03
7	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	10,710.					
	b	Less: cost or other basis	10 696	2 610				
		and sales expenses	10,686.	2,610.				
	с	Gain or (loss)	24.	-2,010.	-2,586.			-2,58
		Net gain or (loss)		▶	-2,300.			-2,50
۲	ва	Gross income from fundraising \$ 155,2						
		contributions reported on line						
		Part IV, line 18		66,393.				
	h	Less: direct expenses		48,918.				
		Net income or (loss) from func		····· ►	17,475.			17,47
6		Gross income from gaming ac	•		•			
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam		►				
10	0 a	Gross sales of inventory, less	returns					
		and allowances	а	9,086.				
	b	Less: cost of goods sold	b	11,570.				
	с	Net income or (loss) from sale	s of inventory		-2,484.	-2,484.		
		Miscellaneous Revenu		Business Code				
11	1 a	MISCELLANEOUS R	LEVENUE	812900	4,361.	4,361.		
	b							
	С							
		All other revenue		L	1 2 4 1			
		Total. Add lines 11a-11d		r i i i i i i i i i i i i i i i i i i i	4,361. 4,197,517.	665 202	^	12 01
1 40	2	Total revenue. See instructions.		🕨	±,⊥>/,⊃⊥/•	665,282.	0	• 23,21 Form 990 (20

URBAN ECOLOGY CENTER INC

Form 990 (2014)

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2014.05060 URBAN ECOLOGY CENTER INC

39-1712663 Page 9

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Part IX Statement of Functional Expenses

URBAN ECOLOGY CENTER INC

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				· · · ·
	and domestic governments. See Part IV, line 21	312,008.	312,008.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	113,269.	10,194.	50,971.	52,104
6	Compensation not included above, to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,242,463.	1,752,978.	234,379.	255,106
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	43,934.	32,700.	6,174.	5,060 43,325
9	Other employee benefits	344,014.	267,020.	33,669.	
10	Payroll taxes	181,923.	138,159.	21,081.	22,683
11	Fees for services (non-employees):				
а	Management				
b	Legal			10.010	
с	Accounting	10,310.		10,310.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,		45 050	- 440	
	column (A) amount, list line 11g expenses on Sch 0.)	25,085.	17,972.	7,113.	10.010
12	Advertising and promotion	56,845.	43,803.		13,042
13	Office expenses	16,228.	11,766.	1,193.	3,269
14	Information technology	54,744.	32,005.	13,875.	8,864
15	Royalties				
16	Occupancy	54,160.	51,564.	1,298.	1,298
17	Travel	45,380.	44,930.	154.	296
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	50,492.	45,580.	3,484.	1,428
20	Interest	25,165.		25,165.	
21	Payments to affiliates				- 10-
22	Depreciation, depletion, and amortization	304,429.	290,055.	7,185.	7,189
23	Insurance	87,209.	70,108.	15,504.	1,597
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.) (
а	PROGRAM EXPENSES	188,753.	188,753.		
b	BUILDING MAINTENANCE AN	58,193.	56,115.	1,039.	1,039
С	RIVERLAND PROJECT EXPEN	54,740.	43,845.	10,895.	
d	WORKER'S COMPENSATION	50,285.	37,714.	6,034.	6,537
е	All other expenses	163,419.	116,566.	21,920.	24,933
25	Total functional expenses. Add lines 1 through 24e	4,483,048.	3,563,835.	471,443.	447,770
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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11 2014.05060 URBAN ECOLOGY CENTER INC Form **990** (2014)

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12 2014.05060 URBAN ECOLOGY CENTER INC 13939001

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Check if Schedule O contains a response or note to any line in this Part X

					(A) Beginning of year		(B) End of year	
	1	Cash - non-interest-bearing			1,933.	1	6,187.	
	2	Savings and temporary cash investments	2,197,898.	2	2,455,457.			
	3	Pledges and grants receivable, net		3,746,591.	3	3,390,332.		
	4	Accounts receivable, net			23,639.	4	54,075.	
	5	Loans and other receivables from current and fo			. ,		- /	
	Ū	trustees, key employees, and highest compensation						
		Part II of Schedule L		5				
	6	Loans and other receivables from other disquali		Ŭ				
	Ŭ	section 4958(f)(1)), persons described in section	-					
		employers and sponsoring organizations of sect		•				
,		employees' beneficiary organizations (see instr).		• • •		6		
200	7	Notes and loans receivable, net				7		
2	8	Inventories for sale or use				8		
	9	Prepaid expenses and deferred charges			96,993.	9	57,133.	
		Land, buildings, and equipment: cost or other			,			
		basis. Complete Part VI of Schedule D	10a	8,197,909.				
	b	Less: accumulated depreciation	10b	2,370,820.	6,004,191.	10c	5,827,089.	
	11	Investments - publicly traded securities				11		
	12		Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11					
	13							
	14	Intangible assets		14				
	15	Other assets. See Part IV, line 11		15				
	16	Total assets. Add lines 1 through 15 (must equa			12,071,245.	16	11,790,273.	
	17	Accounts payable and accrued expenses	202,333.	17	231,859.			
	18	Grants payable		18				
	19	Deferred revenue	92,090.	19	65,731.			
	20	Tax-exempt bond liabilities		20				
	21	Escrow or custodial account liability. Complete F		21				
ß	22	Loans and other payables to current and former						
		key employees, highest compensated employee						
		Complete Part II of Schedule L		22				
-	23	Secured mortgages and notes payable to unrela	1,025,000.	23	1,025,000.			
	24	Unsecured notes and loans payable to unrelated		24				
	25	Other liabilities (including federal income tax, pay						
		parties, and other liabilities not included on lines	17-24). Complete Part X of	0 000		0 000	
		Schedule D			8,296. 1,327,719.	25	<u>8,296.</u> 1,330,886.	
	26	Total liabilities. Add lines 17 through 25		· · N V ·	1,527,719.	26	1,330,000.	
		Organizations that follow SFAS 117 (ASC 958		ck nere 📂 🖾 and				
Š	07	complete lines 27 through 29, and lines 33 an			6,065,850.	27	5,731,697.	
8	27 28		Unrestricted net assets					
Š	20 29				4,677,676.	28 29	4,727,690.	
	23	Organizations that do not follow SFAS 117 (A		8) check here		29		
-		and complete lines 30 through 34.	50 55					
3	30	Capital stock or trust principal, or current funds				30		
	31	Paid-in or capital surplus, or land, building, or eq				31		
	32	Retained earnings, endowment, accumulated in				32		
	33	Total net assets or fund balances			10,743,526.	33	10,459,387.	
	34	Total liabilities and net assets/fund balances			12,071,245.	34	11,790,273.	

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Form 990 (2014)

39-1712663 Page 11

Form 990 (2014)

Assets

Liabilities

Net Assets or Fund Balances

Part X Balance Sheet

07090203 768059 139390000

Form	990 (2014) URBAN ECOLOGY CENTER INC	39-	-17126	563	Pa	ge 12
Pa	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				17.
2	Total expenses (must equal Part IX, column (A), line 25)	2				48.
3	Revenue less expenses. Subtract line 2 from line 1	3				31.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	10	,74:		26.
5	Net unrealized gains (losses) on investments	5			-	32.
6	Donated services and use of facilities	6			7	60.
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	10	,45	9,3	87.
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	в,			
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule (D.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	udit			
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	ıdit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2014)

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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.

	2014							
	Open to Public Inspection							
er	r identification numbe							

OMB No. 1545-0047

Department of the Treasury	
Internal Revenue Service	

Interna	nternal Revenue Service Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.									
Nam	e of l	the organizati								identification number
					CENTER INC					9-1712663
Pa	rt I	Reason	for Public (Charity Status (All organizations must c	omplete th	iis part.) Se	ee instruction	IS.	
The o	organ	ization is not a	a private found	ation because it is:	(For lines 1 through 11, o	check only	one box.)			
1		A church, co	nvention of ch	urches, or associatio	on of churches describe	d in sectio	on 170(b)(1	1)(A)(i).		
2		A school des	cribed in secti	ion 170(b)(1)(A)(ii).	Attach Schedule E.)					
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
		city, and state:								
5		An organizati	on operated fo	or the benefit of a co	ollege or university owne	d or opera	ted by a g	overnmental	unit descrik	bed in
		section 170	(b)(1)(A)(iv). (C	omplete Part II.)						
6		A federal, sta	te, or local gov	vernment or governr	mental unit described in	section 17	70(b)(1)(A)	(v).		
7	X				antial part of its support				the general	public described in
				omplete Part II.)		-			-	
8					(1)(A)(vi). (Complete Par	t II.)				
9		An organizati	on that norma	lly receives: (1) more	e than 33 1/3% of its su	oport from	contributio	ons, member	ship fees, a	Ind gross receipts from
					ct to certain exceptions					
					e (less section 511 tax) fr					-
				nplete Part III.)					-	
10		An organizati	on organized a	and operated exclus	ively to test for public s	afety. See	section 50)9(a)(4) .		
11		An organizati	on organized a	and operated exclus	ively for the benefit of, t	o perform	the functio	ons of, or to c	arry out the	e purposes of one or
		more publicly	supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3).	Check the box in
		lines 11a thro	ough 11d that	describes the type o	of supporting organization	on and con	nplete lines	s 11e, 11f, an	id 11g.	
а		Type I. A si	upporting orga	nization operated, s	supervised, or controlled	by its sup	ported org	ganization(s),	typically by	r giving
		the suppor	ted organizatio	on(s) the power to re	gularly appoint or elect	a majority	of the dire	ctors or trust	ees of the s	supporting
		organizatio	n. You must c	omplete Part IV, Se	ections A and B.					
b		Type II. A s	supporting org	anization supervised	d or controlled in connec	tion with it	ts support	ed organizati	on(s), by ha	iving
		control or n	nanagement o	f the supporting org	anization vested in the s	same perso	ons that co	ontrol or man	age the sup	ported
		organizatio	n(s). You mus	t complete Part IV,	Sections A and C.					
с] Type III fur	nctionally inte	grated. A supportin	g organization operated	in connec	tion with, a	and functiona	ally integrate	ed with,
		its supporte	ed organizatio	n(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.		
d		Type III no	n-functionally	/ integrated. A supp	oorting organization ope	rated in co	nnection v	vith its suppo	orted organi	zation(s)
		that is not f	functionally int	egrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement an	id an attent	iveness
		requiremen	it (see instruct	ions). You must cor	nplete Part IV, Section	s A and D,	, and Part	V .		
е		Check this	box if the orga	anization received a	written determination fro	om the IRS	6 that it is a	а Туре I, Туре	e II, Type III	
		functionally	integrated, or	Type III non-functio	onally integrated support	ting organi	zation.			
f	Ente	er the number	of supported o	organizations						
g			<u> </u>	about the supporte	ed organization(s).					
	(i) Name of supp		(ii) EIN	(iii) Type of organization		rganization in your	(v) Amount o		(vi) Amount of
		organization	1		(described on lines 1-9 above or IRC section		document?	suppor Instruc	-	other support (see Instructions)
					(see instructions))	Yes	No	linstituc	10113)	

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Schedule A (Form 990 or 990-EZ) 2014

Total

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2014.05060 URBAN ECOLOGY CENTER INC

Schedule A (Form 990 or 990 EZ) 2014 URBAN ECOLOGY CENTER INC

39-1712663 Page 2

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

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

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2449048.	7263344.	6072369.	3657950.	3509016.	22951727.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3	2449048.	7263344.	6072369.	3657950.	3509016.	22951727.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						8210525.
6	Public support. Subtract line 5 from line 4.						14741202.
See	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total 22951727.
7	Amounts from line 4	2449048.	7263344.	6072369.	3657950.	3509016.	22951727.
8	Gross income from interest,	s income from interest,					
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources \dots	9,398.	4,902.	3,360.	2,640.	3,295.	23,595.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	10 005	40.056	10 005			40.450
	assets (Explain in Part VI.)	10,285.	12,376.	13,095.	8,055.	4,361.	
	Total support. Add lines 7 through 10						23023494.
	Gross receipts from related activities,	•	,				,278,999.
13	First five years. If the Form 990 is for	•	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	. —
Sec	organization, check this box and stor ction C. Computation of Publ	ic Support Pe	rcentage				>
	Public support percentage for 2014 (column (f))		14	64.03 %
	Public support percentage from 2013					15	66.38 %
	33 1/3% support test - 2014. If the c						7 -
	stop here. The organization qualifies	-					► V
b	33 1/3% support test - 2013. If the c		•				
-	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
_	and if the organization meets the "fac						
	meets the "facts-and-circumstances"				-	-	
b	10% -facts-and-circumstances tes						
	more, and if the organization meets th						
	organization meets the "facts-and-circ						▶□
18	Private foundation. If the organization						ns ►
) or 990-EZ) 2014

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

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

	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and				1		
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
Ŭ	furnished by a governmental unit to						
-	the organization without charge						
	Total. Add lines 1 through 5					+	_
7a	Amounts included on lines 1, 2, and				1		
-	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support				•		
ale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Tota
	Amounts from line 6	(,	(0) = 0 + 1	(0, 2012	(0, 2010	(0) = 0 + 1	(.,
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(lease section Edd to use) from husinesses						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
~	acquired after June 30, 1975						
	acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is required approximation of the second						
11	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.)						
11 12 13	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.)						
11 12 13	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for	the organization	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) orga	nization,
11 12 13 14	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here						•
11 12 13 14	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publi	c Support Pe	ercentage		-		•
11 12 13 14	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here	c Support Pe	ercentage		-		•
111 12 13 14 5ec 15	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publi Public support percentage for 2014 (li Public support percentage from 2013	c Support Pe ne 8, column (f) c Schedule A, Part	ercentage livided by line 13, t III, line 15	column (f))			•
111 12 13 14 5ec 15	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publi Public support percentage for 2014 (li	c Support Pe ne 8, column (f) c Schedule A, Part	ercentage livided by line 13, t III, line 15	column (f))		15	•
11 12 13 14 5ec 16 5ec	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Publi Public support percentage for 2014 (li Public support percentage from 2013	c Support Pe ne 8, column (f) c Schedule A, Part tment Incom	ercentage divided by line 13, t III, line 15 ne Percentage	column (f))		15	•
11 12 13 14 Sec 15 16 Sec 17	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here Ction C. Computation of Public Public support percentage for 2014 (li Public support percentage from 2013 ction D. Computation of Inves	c Support Pe ne 8, column (f) c Schedule A, Part tment Incom 14 (line 10c, colu	divided by line 13, t III, line 15 De Percentage mn (f) divided by li	column (f)) ne 13, column (f))		15	•
111 12 13 14 Sec 17 18	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage for 2014 (li Public support percentage for 2013 ction D. Computation of Invess Investment income percentage for 20 Investment income percentage from 20	c Support Pe ne 8, column (f) c Schedule A, Part tment Incom 14 (line 10c, colu 013 Schedule A,	divided by line 13, t III, line 15 De Percentage mn (f) divided by li Part III, line 17	column (f))		15 16 17 18	····· •
111 12 13 14 Sec 17 18	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage for 2014 (li Public support percentage for 2013 ction D. Computation of Invess Investment income percentage from 2 33 1/3% support tests - 2014. If the	c Support Pe ne 8, column (f) c Schedule A, Part tment Incom 14 (line 10c, colu 013 Schedule A, organization did	ercentage livided by line 13, t III, line 15 e Percentage mn (f) divided by li Part III, line 17 not check the box	column (f)) ne 13, column (f)) on line 14, and line	e 15 is more than	15 16 17 18 33 1/3%, and line	e 17 is not
11 12 13 14 Sec 15 16 Sec 17 18	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here Ction C. Computation of Public Public support percentage for 2014 (li Public support percentage for 2013 ction D. Computation of Invess Investment income percentage for 20 Investment income percentage from 20 33 1/3% support tests - 2014. If the more than 33 1/3%, check this box ar 33 1/3% support tests - 2013. If the	c Support Pe ne 8, column (f) c Schedule A, Part tment Incom 14 (line 10c, colu 013 Schedule A, organization did of stop here. The organization did	divided by line 13, t III, line 15 De Percentage mn (f) divided by li Part III, line 17 not check the box e organization qua not check a box or	column (f)) ne 13, column (f)) on line 14, and line lifies as a publicly n line 14 or line 19	e 15 is more than supported organiz a, and line 16 is m	15 16 17 18 33 1/3%, and line zation ore than 33 1/3%	● 17 is not
11 12 13 14 Sec 17 18 19a b	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage for 2014 (li Public support percentage for 2013 ction D. Computation of Invess Investment income percentage from 2013 31/3% support tests - 2014. If the more than 33 1/3%, check this box ar 33 1/3% support tests - 2013. If the line 18 is not more than 33 1/3%, check	c Support Pe ne 8, column (f) c Schedule A, Part tment Incom 14 (line 10c, colu 013 Schedule A, organization did d stop here. The organization did ck this box and s	ivided by line 13, t III, line 15 De Percentage mn (f) divided by li Part III, line 17 not check the box e organization qua not check a box or stop here. The org	column (f)) ne 13, column (f)) on line 14, and lin lifies as a publicly n line 14 or line 19 anization qualifies	e 15 is more than supported organiz a, and line 16 is m as a publicly supp	15 16 17 18 33 1/3%, and line zation ported organization	e 17 is not
11 12 13 14 5ec 17 18 19a b 20	acquired after June 30, 1975 Add lines 10a and 10b 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 VI.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here Ction C. Computation of Public Public support percentage for 2014 (li Public support percentage for 2013 ction D. Computation of Invess Investment income percentage for 20 Investment income percentage from 20 33 1/3% support tests - 2014. If the more than 33 1/3%, check this box ar 33 1/3% support tests - 2013. If the	c Support Pe ne 8, column (f) c Schedule A, Part tment Incom 14 (line 10c, colu 013 Schedule A, organization did d stop here. The organization did ck this box and s	ivided by line 13, t III, line 15 De Percentage mn (f) divided by li Part III, line 17 not check the box e organization qua not check a box or stop here. The org	column (f)) ne 13, column (f)) on line 14, and lin lifies as a publicly n line 14 or line 19 anization qualifies	e 15 is more than supported organiz a, and line 16 is m as a publicly supp his box and see in	15 16 17 18 33 1/3%, and line zation ported organization	e 17 is not

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in *Part VI* how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in *Part VI* how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in *Part VI* when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in *Part VI* what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes" and *if you checked 11a or 11b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If* "Yes," *provide detail in Part VI.*
- 7 Did the organization provide a grant, Ioan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in* **Part VI**.
- **10a** Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer (b) below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

432024 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

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2014.05060 URBAN ECOLOGY CENTER INC

17

Schedule A (Form 990 or 990-EZ) 2014 URBAN ECOLOGY CENTER INC Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above?If "Yes" to a, b, or c, provide detail in part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
-	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):			
а	The organization satisfied the Activities Test. <i>Complete</i> line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line</i> 3 <i>below</i> .			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
_	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	0.		
~	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	_		
	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	~		
10-1	of its supported organizations? If "Yes," describe in <i>Part VI</i> the role played by the organization in this regard.	<u>3b</u>		0044
43202	5 09-17-14 Schedule A (Form 9 18	90 or 99	∪- ヒ ∠)	2014

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Schedule A (Form 990 or 990-EZ) 2014 URBAN ECOLOGY CENTER INC

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

 1
 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See in

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

		(A) Prior Year	(optional)
Net short-term capital gain	1		
Recoveries of prior-year distributions	2		
Other gross income (see instructions)	3		
Add lines 1 through 3	4		
Depreciation and depletion	5		
Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
Other expenses (see instructions)	7		
Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
Average monthly value of securities	1a		
Average monthly cash balances	1b		
Fair market value of other non-exempt-use assets	1c		
Total (add lines 1a, 1b, and 1c)	1d		
Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt-use assets	2		
Subtract line 2 from line 1d	3		
Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by .035	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
on C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, Column A)	1		
Enter 85% of line 1	2		
Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
Enter greater of line 2 or line 3	4		
Income tax imposed in prior year	5		
Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
	Other gross income (see instructions) Add lines 1 through 3 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) ion B - Minimum Asset Amount Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) ion C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1	Other gross income (see instructions) 3 Add lines 1 through 3 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 sion B - Minimum Asset Amount 7 Average monthly value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a Average monthly value of securities 1a Average monthly cash balances 1b Fair market value of other non-exempt-use assets 1c Total (add lines 1a, 1b, and 1c) 1d Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by .035 6 Recoveries of prior-year distributions 7<	Other gross income (see instructions) 3 Add lines 1 through 3 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 ion B - Minimum Asset Amount (A) Prior Year Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a Average monthly value of securities 1a Average monthly value of other non-exempt-use assets 1c Total (add lines 1a, 1b, and 1c) 1d Discount claimed for blockage or other 3 factors (explain in detail in Part VI): 3 Acash deemed held for rexempt use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for rexempt use assets (subtract line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by .035 6 6 Recoveries of prior-year distributions 7

instructions).

Schedule A (Form 990 or 990-EZ) 2014

432026 09-17-14

Schedule A (Form 990 or 990 EZ) 2014 URBAN ECOLOGY CENTER INC

Pa	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Sect	ion D - Distributions		(Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exemption	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
			Pre-2014	Amount for 2014
_1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
<u>a</u>				
b				
<u> </u>				
d				
	From 2013			
-	Total of lines 3a through e			
	Applied to underdistributions of prior years			
-	Applied to 2014 distributable amount			
	Carryover from 2009 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2014 from Section D,			
4	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2014 distributions of phot years			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
0	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
Ŭ	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
-	and 4c.			
8	Breakdown of line 7:			
a				
b				
c				
-	Excess from 2013			
	Excess from 2014			
			Oshsalata A	E

Schedule A (Form 990 or 990-EZ) 2014

432027 09-17-14 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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SC	HEDULE D	Supplement	al Financial Statements		OMB No. 1545-0047
(For	m 990)	Complete if the org Part IV, line 6, 7, 8, 9, 10	anization answered "Yes" to Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		2014 Open to Public
	ment of the Treasury I Revenue Service	Information about Schedule D (For Information about Schedule D)	Attach to Form 990. rm 990) and its instructions is at <u>www.irs.gov</u>	/form990.	Inspection
Nam	e of the organizati		-		yer identification number 39–1712663
Pa	rt I Organiza		ed Funds or Other Similar Funds or	Account	
	organizatio	n answered "Yes" to Form 990, Part IV, lin	e 6.		
			(a) Donor advised funds	(b) Funds	and other accounts
1		nd of year			
2		f contributions to (during year)			
3		f grants from (during year)			
4		t end of year			
5	-		writing that the assets held in donor advised fu exclusive legal control?		Yes No
6			advisors in writing that grant funds can be used		
-			or donor advisor, or for any other purpose conf		
	impermissible priv		· · · ·	-	🖸 Yes 🗌 No
Pa	rt II Conserv		ganization answered "Yes" to Form 990, Part I		
1	Purpose(s) of cons	servation easements held by the organizat	ion (check all that apply).		
	Preservation	n of land for public use (e.g., recreation or e	education)	lly importar	nt land area
		f natural habitat	Preservation of a certified	historic str	ucture
_		n of open space			
2	•		fied conservation contribution in the form of a	conservatio	on easement on the last
	day of the tax yea	r.		н	eld at the End of the Tax Year
а	Total number of co	onservation easements			
b					
c	•		ructure included in (a)		
d			after 8/17/06, and not on a historic structure		
	listed in the Natior	nal Register		2d	
3			leased, extinguished, or terminated by the org		uring the tax
	year 🕨				
4		where property subject to conservation ea			
5	•	tion have a written policy regarding the pe			
6		orcement of the conservation easements			
6 7			, and enforcing conservation easements during enforcing conservation easements during the		
8			ve satisfy the requirements of section 170(h)(4)	_	
Ũ					Yes No
9			ion easements in its revenue and expense stat		
			tion's financial statements that describes the c		
	conservation ease				
Pa		-	f Art, Historical Treasures, or Othe	r Similar	Assets.
		f the organization answered "Yes" to Form			
1a			SC 958), not to report in its revenue statement		
			hibition, education, or research in furtherance of	of public se	ervice, provide, in Part XIII,
h		thote to its financial statements that descr	SC 958), to report in its revenue statement and	halance sl	peet works of art historical
b			ducation, or research in furtherance of public s		
	relating to these it				
	-			▶ \$	
					211,722.
2			easures, or other similar assets for financial gair	_	
		unts required to be reported under SFAS 1			
а				_	
b	Assets included in	Form 990, Part X		🕨 💲 _	
	5 D - -		- (F 000		
43205	1	eduction Act Notice, see the Instruction	s tor form 990.	Sc	hedule D (Form 990) 2014
10-01-	-14		26		

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PartILI Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets@continued) 4 Using the organization's accusition, accossion, and other records, check any of the following that are a significant use of its collection tems (check all that apply): a Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 Drong the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 6 Drovide a description of the organization's collections and explain how they further the organization's collection? 7 Provide a description of the organization's collections and explain how they further the organization's collection? Part IV Escrive and Outstodial Arrangements. Complete if the organization accustority organization accustority or ontibutions or other assets not included on form 980, Part X in a 21. 1a Is the organization an anount on form 980, Part X in a 21. 1a Escrive and out on form 980, Part X in a 21. 2a Del the organization in accustorial in accustorial account liability? 4a Additions during the year 1a Escrive accustorial account liability? 4a Del the organization include an amount on form 980, Part X, ine 21, for ecrore or custodial account liability? 4a Beginning of year balance	Sche	/	COLOGY CEN					39-17			age 2
cleak at that apply: d Loan or exchange programs b Scholarly research e Other	Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, o	r Othe	r Simila	ar Asse	ts (conti	nued)	
a ≧ Public schelation de la provide a description of the organization's collection? exempt purpose in Part XIII. 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During they are, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's exempt purpose in Part XIII. 5 During they are, did the organization answered "Vest to Form 990, Part X, line 0. 1 Foreward Cutoficial Arrangements. Complete the organization answerd "Vest to Form 990, Part X, line 0. 1 Fore," arguing balance 1 E and programs 2 Beginning balance 2 Beginning balance 3 Bed enginement in Part XIII and complete the following table: 1 E and programs 4 Provide a destination and part X, line 21, line 21, line escrew or cutodial account liability? 1 Ves 3 Both organization anagent, line XXII and Complete the following table: 1 T T as bit the organization include an amount on Form 900, Part X, line 21, line escrew or cutodial account liability? 2 No 3 Both organization include an amount on Form 900, Part X, line 21, line escrew or cutodial account liability? 3 Contributions 4 Device the argenization anagent in Part XIII. Check here if the escleantion has been provided in Part XIII 3 Beginning of year balance 4 Beginning of year balance 5 Device the escrewation and beginning and the escleant of able servers 5 Device the escrewation and beginning and the escleant on the beginning and the escleant on the beginning of year balance 5 Device the escrewation and beginning and the escleant on the beginning of year balance 5 Device the escleant proceent as a difference of the organization analyee of the companization analyee of the companization analyee of the companization analyee of	3		on, and other record	s, check any of the	following that	are a sig	gnificant	use of its	collectio	n item	S
b Scholarly research e Other c Prevention for future generations Provide a description of the organization scill of receive domains of art, historical treasures, or other similar assets to be soft the organization collection? Yes X No Part M Escrow and CutStodial Arrangements. Complete if the organization collection? Yes X No Part M Escrow and CutStodial Arrangements. Complete if the organization collection? Yes No b if the organization angent, trustee, cutstodian or other intermediary for contributions or other assets not included on form 900, Part X, line 21. Is the organization angent, trustee, cutstodian or other intermediary for contributions or other assets not included on form 900, Part X, line 21. Amount Ic c Beginning balance Ic Amount Ic Ic<											
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 4 Is the organization an agent, trustee, outsoldial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or a Is the organization an agent, trustee, outsoldial or other intermediary for contributions or other assets not included a form 900, Part X is a splan. b If "Yes," explain the arrangement in Part XIII and complete the following table:	а		d								
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization's collection?	b		е	Other							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets	С	-									
top out for raise funds rather than to be maintained as part of the organization's collection? Yes X No. Part W Escrow and Custodial Arrangements. Complete the organization answered 'Yes' to Form 990, Part XI, Ine 9, or reported an amount on Form 980, Part X, Ine 21. Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X No. 1a Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X No. b If 'Yes, 'explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 10 Indiana and the year d Additions during the year 10 Indiana and the year No. b If 'Yes, 'explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Indo Ind 'Yes, 'agent's the 'Addition's any and 'Addition's any and table'. No. Part Y Enclowment Funds. Complete if the organization answered 'Yes' to Form 980, Part X, Ine 21. No. So the organization include an amount on Form 980, Part X, Ine 21. No. Part Y Enclowment Funds. Complete if the organization answered 'Yes' to Form 980, Part X, Ine 10. No. No. No. No. So the organization include an amount on Form 98								ose in Par	XIII.		
Part IV Escrow and Custodial Arrangements. Complete if the organization answerd 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X. line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. line 21. Image: Contributions of the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. line 21. Image: Contributions of Contributions of the organization and the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? Image: Contributions during the year Image: Contributions	5			,	,			_	1	v	٦
Teported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Ves No b If 'Yes,'' explain the arrangement in Part XIII and complete the following table: Image: Complete the complete the explanation has been provided in Part XIII. Image: Complete the complete the explanation has been provided in Part XIII. Image: Complete the complete the explanation has been provided in Part XIII. Image: Complete the complete the explanation has been provided in Part XIII. Image: Complete the complete the complete the explanation has been provided in Part XIII. Image: Complete the complete the complete the explanation has been provided in Part XIII. Image: Complete the complete the complete the explanation has been provided in Part XIII. Image: Complete the comple	Do										J NO
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X Ives No b If "Yes," explain the arrangement in Part XIII and complete the following table: Image: Complete table: <	Fai		-	te if the organizatio	n answered "Y	res" to I	-orm 990	, Part IV, I	ine 9, or		
on Form 990, Part X? Yes No b If 'Yes,'' explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance Amount d Additions during the year 1d e Distributions during the year 1t g Distributions during the year 1t e Distributions during the year 1t g Distributions during the year 1t g Distributions during the year 1t g Distributions Distributions include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part N, line 10. 0ther expenditure to rability. I Beginning of year balance 88, 473, 59, 497, 48, 477, 40, 900, 28, 097, 48, 097, 48, 477, 40, 900, 28, 097, 40, 477, 40, 900, 28, 097, 40, 477, 40, 900, 28, 097, 40, 477, 40, 900, 28, 097, 40, 477, 40, 900, 200, 200, 097, 100, 005, 88, 473, 59, 497, 40, 477, 40, 900, 200, 200, 200, 200, 200, 200, 20	10			ion for contribution	o or other and	oto not	included				
b If 'Yes,' explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year d te d Additions during the d te	Id			•					Vac		
c Beginning balance It Amount d Additions during the year It It e Distributions during the year It It 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation nasweed "Yes" to Form 990, Part X, line 10. It It Part V Enclowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, 48, 477. 40, 900. 28, 907. 1b Contributions 117, 382. 20, 509. 4, 748. 4, 330. 11, 473. c Net investment examings, gains, and losses 632. 8, 784. 6, 527. 3, 464. 1, 489. d Grants or scholarships 106, 005. 88, 473. 59, 497. 48, 477. 40, 900. 2 Provide the estimated percentage of the current year end balance (line 1g, column (al) held as: Board designated or quasis-indowment ▶ 106, 005. 88, 473. 59, 497. 48, 477. 40,	h							······ └──	162		
c Beginning balance 1c d Additions during the year 1d e Distributions during the year 1e f Ending balance 1f 2a Distributions during the year 1e f Ending balance 1f 2a Distributions during the year 1e f Ending balance 1f 2a Distributions during the year 1e Part V Endowment Funds. Complete if the explanation has been provided in Part XII. No b f'se's to Form 990, Part X, line 21, for escar (c) Two years back a Beginning of year balance (a) Current year (b) Prior year (c) Two years back a Grants or scholarships 17, 382, 20, 599, 4, 748, 4, 330, 11, 473, 40, 900, 28, 097, 48, 477, 40, 900, 28, 097, 48, 477, 40, 900, 28, 097, 48, 477, 40, 900, 28, 097, 48, 477, 40, 900, 28, 097, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 473, 49, 477, 40, 900, 20, 97, 48, 473, 49, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 473, 49, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97, 48, 477, 40, 900, 20, 97,	D		and complete the for	iowing table.					Amoun	+	
d Additions during the year Id e Distributions during the year It 12 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes,'' explain the arrangement in Part XIII. Check here if the organization answered 'Yes' to Form 990, Part IV, line 10. Image: Complete if the organization answered 'Yes' to Form 990, Part X, line 10. Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part X, line 10. Image: Complete if the organization answered 'Yes' to Form 990, Part X, line 10. 10 Contributions Image: Complete if the organization answered 'Yes' to Form 990, Part X, line 10. Image: Complete if the organization answered 'Yes' to Form 990, Part X, line 10. 11 Beginning of year balance Image: Complete if the organization answered 'Yes' to Form 990, Part X, line 10. Image: Complete if the organization answered 'Yes' to Form 990, Part Y, line 10. 2 Provide the estimated percentage of the current year end balance (line 10, column (a)) held as: a Board designated or ganizations Image: Column (a) held as: a Board designated or ganizations Image: Column (a) Image: Column (a) held as: Image: Column (a) held as: a Describe	c	Beginning balance					1c		7 arrio arr		
e Distributions during the year 1e f Ending balance 1f 2a Did the organization incluide an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Image: Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back. (d) Three years back. (e) Four years back. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back. (d) Three years back. (e) Four years back. 1a Contributions 17, 382, 20, 599, 47, 48, 477, 40, 900, 28, 977, 34, 43, 30, 11, 473, 432, 20, 599, 47, 48, 477, 40, 900, 28, 973, 23, 464, 1, 489, 40, 900, 28, 973, 48, 477, 40, 900, 28, 973, 59, 497, 48, 477, 40, 900, 20, 905, 905, 905, 914, 748, 477, 400, 900, 20, 905, 916, 473, 59, 497, 48, 477, 40, 900, 29, 916, 708, 926, 927, 33, 461, 40, 900, 29, 926, 927, 33, 461, 40, 900, 20, 926, 927, 33, 461, 40, 900, 20, 926, 927, 33, 48, 477, 40, 900, 20, 926, 927, 33, 48, 477, 40, 900, 20, 926, 927, 34, 93, 48, 477, 40, 900, 20, 926, 927, 936, 708, 926, 708, 708, 708, 708, 708, 708, 708, 708											
f Ending balance 17 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If *\esc*, explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Image: State of the organization answered *Yes* to Form 990, Part N, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back. (d) Three years back. (e) Four years back. (e) Two years back. (e) Two years back. (e) Two years back. (e) Four years back. <th></th>											
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Yes No Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 15 Contributions 17, 382, 20, 509, 4, 748, 4, 330, 11, 473. (a) Current year 11, 489. 16 Grants or scholarships 632, 8, 784, 6, 527, 3, 464, 1, 489. (a) Current year deals and programs 4 Administrative expenses 482, 317, 255, 217, 159. (a) Current year deals and constraints a Board designated or quasi-endowment ▶ 100, 00, % (b) Permanent endowment ▶ 100, 00, % b Pervide the estimated percentage of the current year onb balance (line 1g, column (a)) held as: (a) (u) urelated organizations (a) (u) a Board designated or quasi-endowment ▶ 100, 00 % (b) (b) (c) Two year											
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Pror years (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (c) Two years back (d) Three years back (e) Four years back 1b Contributions 17, 382, 20, 509, 4, 748, 477, 40, 900, 28, 097, 48, 477, 40, 900, 28, 097, 48, 477, 40, 900, 28, 097, 48, 477, 40, 900, 28, 097, 48, 477, 300, 11, 473, 300, 11, 473, 300, 310, 310, 310, 310, 310, 310, 31									Yes		No
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance 88,473 59,497 48,477 40,900 28,097 b Contributions 17,382 20,509 4,748 4,330 11,473 c Met investment earnings, gains, and losses 632 8,784 6,527 3,464 1,489 d Grants or scholarships 632 317 255 217 159 e Other expenditures for facilities and programs 482 317 255 217 159 g End of year balance 106,005 88,473 59,497 48,477 40,900 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 80ard designated or quasi-endowment ▶	b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided in Pa	art XIII]
1a Beginning of year balance 10 88,473. 59,497. 48,477. 40,900. 28,097. b Contributions 17,382. 20,509. 4,748. 4,330. 11,473. c Net investment earnings, gains, and losses 632. 8,784. 6,527. 3,464. 1,489. d Grants or scholarships	Par	t V Endowment Funds. Complete in	f the organization an	swered "Yes" to Fo	rm 990, Part IV	V, line 10	0.				
b Contributions 17,382. 20,509. 4,748. 4,330. 11,473. c Net investment earnings, gains, and losses 632. 8,784. 6,527. 3,464. 1,489. d Grants or scholarships 632. 8,784. 6,527. 3,464. 1,489. e Other expenditures for facilities 106,005. 88,473. 59,497. 48,477. 40,900. g End of year balance 106,005. 88,473. 59,497. 48,477. 40,900. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 100.00 % b Permanent endowment ▶			(a) Current year	(b) Prior year	(c) Two years	back ((d) Three y	ears back	(e) Fou	r years	back
c Net investment earnings, gains, and losses 632. 8,784. 6,527. 3,464. 1,489. d Grants or scholarships 632. 8,784. 6,527. 3,464. 1,489. e Other expenditures for facilities and programs 1 <th>1a</th> <th>Beginning of year balance</th> <th>,</th> <th>59,497.</th> <th>48</th> <th>,477.</th> <th></th> <th>40,900.</th> <th></th> <th>28,</th> <th>097.</th>	1a	Beginning of year balance	,	59,497.	48	,477.		40,900.		28,	097.
d Grants or scholarships	b	Contributions		,		,748.		4,330.		,	
e Other expenditures for facilities and programs 482. 317. 255. 217. 159. g End of year balance 106.005. 88.473. 59.497. 48.477. 40.900. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 100.00 % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % main endowment Imes 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations % (i) unrelated organizations % % % % 4 Describe in Part XIII the intended uses of the organization's endowment funds.	С	Net investment earnings, gains, and losses	632.	8,784.	6	,527.		3,464.		1,	489.
and programs 482. 317. 255. 217. 159. g End of year balance 106,005. 88,473. 59,497. 48,477. 40,900. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶% b Permanent endowment ▶% % c Temporarily restricted endowment ▶% % i) unrelated organizations % ii) related organizations % ii) related organizations % iii) related organizations % Describe in Part XIII the intended uses of the organization's endowment funds.	d	Grants or scholarships									
f Administrative expenses 482. 317. 255. 217. 159. g End of year balance 106,005. 88,473. 59,497. 48,477. 40,900. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 100.00% b Permanent endowment ▶ % % % % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: % % (i) unrelated organizations % % % % 4 Describe in Part XIII the intended uses of the organization's endowment funds.	е	Other expenditures for facilities									
g End of year balance 106,005. 88,473. 59,497. 48,477. 40,900. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 100.00 % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) unrelated organizations % 3a(i) X 3a(ii) X b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?											
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Temporarily restricted endowment ▶% 3a Are there endowment Images in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (ii) related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (e) Accumulated depreciation (f) Buildings (f) 4, 25, 028, 709. (here		ſ	-								
a Board designated or quasi-endowment ▶ 100.00 % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) unrelated organizations 3a(i) X 3a(i) X (ii) related organizations 3a(ii) X b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3a(ii) X 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other (b) Cost or other (c) Accumulated 1a Land 5, 600. 5, 600. 5, 600. b Buildings 6, 491, 853. 1, 463, 1444. 5, 028, 709. c Leasehold improvements 15, 685. 6, 769. 8, 916. d Equipment 782, 313. 616, 625. 165, 688. e Other 902, 458. 284, 282. 618, 176.	-	-	,	,		,497.		48,477.		40,	900.
b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations Yes No (ii) unrelated organizations 3a(ii) X 3a(iii) X b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b					a)) held as:						
c Temporarily restricted endowment ▶% The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:		-		_%							
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (ii) related organizations (ii) related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. (i) Cost or other basis (other) (c) Accumulated depreciation (d) Book value basis (investment) (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value basis (investment) (f) Solo (f) Solo											
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by: (i) unrelated organizations (ii) related organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) buildings c Leasehold improvements d Equipment e Other Cother Council (c) Column (d) must equal Form 990, Part X, column (B), line 10c.) Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) (i) United the constant of the constant of the column (c) must equal Form 990, Part X, column (B), line 10c.) (i) United the constant of the column (c) must equal Form 990, Part X, column (B), line 10c.) (i) United the constant of the column (c) must equal Form 990, Part X, column (B), line 10c.) (i) United the constant of the column (c) must equal Form 990, Part X, column (c) mus	30			ation that are held a	nd administer	od for th	o organiz	ration			
(i) unrelated organizations 3a(i) X (ii) related organizations 3a(ii) X b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 3c 4 Describe in Part XII the intended uses of the organization's endowment funds. 3b 3c Part VI Land, Buildings, and Equipment. 3c 3c 3c Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other (b) Cost or other (c) Accumulated b Buildings 6, 491, 853. 1, 463, 144. 5, 600. b Buildings 15, 685. 6, 769. 8, 916. d Equipment 782, 313. 616, 625. 165, 688. e Other 902, 458. 284, 282. 618, 176. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 5, 827, 089.	ou						ic organiz	ation		Yes	No
(ii) related organizations 3a(ii) X b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b 3b Part VI Land, Buildings, and Equipment. 3b 3b Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land 5,600. 5,600. b Buildings 6,491,853. 1,463,144. 5,028,709. c Leasehold improvements 15,685. 6,769. 8,916. d Equipment 782,313. 616,625. 165,688. e Other 902,458. 284,282. 618,176. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 5,827,089.		-							3a(i)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land 5,600. 5,600. b Buildings 6,491,853. 1,463,144. 5,028,709. c Leasehold improvements 15,685. 6,769. 8,916. d Equipment 902,458. 284,282. 618,176. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 5,827,089.											Х
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1a Land 5,600. 5,600. b Buildings 6,491,853. 1,463,144. 5,028,709. c Leasehold improvements 15,685. 6,769. 8,916. d Equipment 782,313. 616,625. 165,688. e Other 902,458. 284,282. 618,176. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 5,827,089.		Description of property	(a) Cost or ot	her (b) Cost	or other	(c) Ac	cumulate	d	(d) Boo	k value	e
b Buildings 6,491,853. 1,463,144. 5,028,709. c Leasehold improvements 15,685. 6,769. 8,916. d Equipment 782,313. 616,625. 165,688. e Other 902,458. 284,282. 618,176. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 5,827,089.			basis (investr	,	. ,	dep	reciation				
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Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 5,827,089.					-						
						2	84,2			-	
	Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part .	X, column (B), line 1	0c.)				-		

Schedule D (Form 990) 2014

Complete if the organization answered "Yes"	to Form 990, Part IV, line 1	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	FUNDS HELD ON BEHALF OF OTHERS	8,296.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	8,296.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII 🚺

Schedule D (Form 990) 2014

Sche	dule D (Form 990) 2014 URBAN ECOLOGY CENTER I	INC	39-1712663 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial S	tatements With Rever	
	Complete if the organization answered "Yes" to Form 990, Part IV,	line 12a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1		
Pa	t XII Reconciliation of Expenses per Audited Financial		nses per Return.
	Complete if the organization answered "Yes" to Form 990, Part IV,		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
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	4a	
a b	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)		

5	T	otal	expe	enses. A	Add lir	nes 🕄	3 an	id 4c.	(This	must ee	qual Fo	orm 9	90, F	Part I, lir	ne 18.)	 	 	. 5	
Pa	irt (XIII	Su	ıppler	nent	tal I	Info	orma	ation										
								<u> </u>				<u> </u>				 	 		

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

PART III, LINE 4:

THREE LARGE IMMOVABLE STRUCTURES ARE LOCATED IN THE EXTERIOR OF OUR
RIVERSIDE PARK BRANCH, TWO ARTISTIC DONOR PIECES AND A LARGE STONE ARCH
ARE LOCATED IN THE MILWAUKEE ROTARY CENTENNIAL ARBORETUM AND A MOSAIC AND
DONOR WALL ARE INSTALLED AT OUR MENOMONEE VALLEY BRANCH. ALL PIECES OF
ARTWORK COMPLEMENT OUR MISSION TO EDUCATE AND INSPIRE PEOPLE TO UNDERSTAND
AND VALUE NATURE.
PART V, LINE 4:
WHEN THE ENDOWMENT BASIS REACHES \$250,000, A PORTION OF THE INCOME IT

GENERATES WILL BE USED TO SUPPLEMENT OPERATIONS AT THE URBAN ECOLOGY

CENTER.

PART X, LINE 2:

URBAN ECOLOGY CENTER FOLLOWS THE PROVISIONS OF FASB ASC 740-10-50, WHICH CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN THE ORGANIZATION'S FINANCIAL STATEMENTS. THE CODIFICATION PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE CODIFICATION ALSO PROVIDES GUIDANCE ON DERECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN.

URBAN ECOLOGY CENTER DID NOT HAVE UNRECOGNIZED TAX BENEFITS AS OF AUG 31, 2015 AND DOES NOT EXPECT THIS TO CHANGE SIGNIFICANTLY OVER THE NEXT 12 MONTHS. THE ORGANIZATION WOULD RECOGNIZE INTEREST AND PENALTIES ASSOCIATED WITH THE ORGANIZATION'S TAX POSITIONS AS A COMPONENT OF UNRELATED BUSINESS INCOME TAX EXPENSE ON THE STATEMENT OF ACTIVITIES. AS OF AUG 31,2015 AND 2014, URBAN ECOLOGY CENTER HAS NOT ACCRUED INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS.

Schedule D (Form 990) 2014

07090203 768059 139390000

SCHEDULE G	Suppleme	ental Information Reg	arding	Fund	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if the	e organization answered " organization entered more	Yes" to F	orm 9	90, P	art IV, lines 17, 18, o			2014
Department of the Treasury Internal Revenue Service		Attach to F	orm 990	or Fo	rm 99	0-EZ.			Open to Public Inspection
Name of the organization	า	bout Schedule G (Form 990 o		and its	Instru	ctions is at <u>www.irs.c</u>	iov/fo	Employer ic	lentification number
Fundrais		COLOGY CENTER		rod "V	'oe" to	Form 000 Part IV I	ino 1	39-171 Z Form 990 F	
	complete this par		Jnanswe	rea r	es to	9 Porti 990, Part IV, 1	ine i	r. Form 990-e	z mers are not
 Indicate whether th Mail solicitat 	•	sed funds through any of th e	1	•		Check all that apply overnment grants			
	email solicitations				Ũ	nment grants			
c Phone solici		g	Special	fundra	lising	events			
•		or oral agreement with any i	ndividual	(includ	ding o	fficers, directors, tru	stees	or	
		Part VII) or entity in connecti ividuals or entities (fundrais	•			U U		undraiser is t	
compensated at le	•	•			agre		uie i		5.56
(i) Name and addres				(iii) fundr have ci	Did	(iv) Gross receipts		Amount paid	(vi) Amount paid
or entity (fund		(ii) Activity		have ci or con contribu	trol of	from activity	`.	or retained by fundraiser ted in col. (i)	to (or retained by) organization
				Yes	No				
		· · · · · · · · · · · · · · · · · · ·		<u></u>					
or licensing.	ich the organizatio	on is registered or licensed t	O SOLICIT C	contrib	utions	s or has been notified	a it is	exempt from	registration
LHA For Paperwork Re	eduction Act Not	ice, see the Instructions f	or Form 9	990 or	990-I	EZ. S	Sched	lule G (Form	990 or 990-EZ) 2014
432081 08-28-14									

Schedule G (Form 990 or 990-EZ) 2014 URBAN ECOLOGY CENTER INC

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990.F7 lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gr	oss income on Form 990)-EZ, lines 1 and 6b. List e	events with gross recei	pts greater than \$5,000.
			(a) Event #1 SUMMER	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			SOLSTICE SOI	HKE MKE		(add col. (a) through col. (c))
anı			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	219,350.	2,289.		221,639.
	2	Less: Contributions	152,957.	2,289.		155,246.
	3	Gross income (line 1 minus line 2)	66,393.			66,393.
	4	Cash prizes				
SS	5	Noncash prizes				
kpense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	17,475.			17,475.
-	8	Entertainment				
	9	Other direct expenses				31,443.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)		►	48,918.
						17,475.
Ра	rt I	• • • • • • • • • • • • • • • •	answered "Yes" to Form	1990, Part IV, line 19, or n	eported more than	
		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
eve						
r	1	Gross revenue				
s	2	Cash prizes				
Ulrect Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
\neg	-		Yes %	Yes %	Yes %	
	6	Volunteer labor	Νο	No	No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
		ter the state(s) in which the organization condu				
		he organization licensed to conduct gaming a				L Yes L No
b	I† "	No," explain:				
l0a	We	ere any of the organization's gaming licenses re	evoked, suspended or te	erminated during the tax v	/ear?	Yes No
		Yes," explain:				
3208	32 OF	3-28-14			Schedule G (Fo	orm 990 or 990-EZ) 2014

32

<u>Sc</u> ho	edule G (Form 990 or 990-EZ) 2014 URBAN ECOLOGY CENTER INC 3	9-17	7120	<u>56</u> 3	Page 3
	Does the organization conduct gaming activities with nonmembers?		<u>ا</u>	/es	N
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed				
	to administer charitable gaming?		<u>ר וו</u>	/es	
13	Indicate the percentage of gaming activity conducted in:				
	The organization's facility		13a		
b	An outside facility	[13b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	:2			
	Name				
	Address				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		ר <u>ב</u> ו	/es	
	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount				
U	of gaming revenue retained by the third party \triangleright \$				
~	If "Yes," enter name and address of the third party:				
C	in res, entername and address of the time party.				
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation > \$				
	Description of services provided 🕨				
	Director/officer Employee Independent contractor				
	Mandatory distributions:				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		<u> </u>	_	<u> </u>
	retain the state gaming license?		L I	/es	
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the			
De	organization's own exempt activities during the tax year > \$				
Ра	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and (v), and (v), and (v), and (v), and (v)	rt III, lin	es 9, 9	9b, 10)b, 1 5b,
	15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).				
13208	33 08-28-14 Schedule G	(Form	990 o	r 990	-EZ) 201
	33		-	201	00001
190	2014.05060 URBAN ECOLOGY CENTER IN 2014.05060 URBAN ECOLOGY CENTER IN	NC	1	393	39001

432084 05-01-14	 139390	0.01.4	 34	ECOLOGY		Form 990 or 990-EZ

	SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service		Go Comp	Grants and Oth vernments, ar	nd Individual on answered "Yes" Attach to For	l s in the Ŭni ' to Form 990, Pai m 990.	ted States rt IV, line 21 or 22.	20	ОМВ No. 1 20 Ореп to Inspe	14 Public
Part II General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grants or assistance, and the selection individual searce to anyor the grants or assistance? IVec No 2 Describe in Part M the organization procedures for monotring the use of grant funds in the United States. IVec No 2 Describe in Part M the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. I(g) Meetind of valuation (book) or government. I(g) Peorphic of or granization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. I(g) Meetind of valuation (book) or government. I(g) Peorphic of or granization answered "Yes" to Form 990, Part IV, line 21, for any received more than \$5,000. Part II can be duplicated if additional space is needed. I(g) Amount of or government. I(g) Peorphic of or assistance I(g) Peorphic of or assistance I(g) Peorphic of or assistance If applicable	Name of the organizat				(i erni eee) unu na		www.irs.gov/formis	<i>40.</i>		
1 Des the organization maintain records to substantiate the amount of the grants or assistance, if a part of the organization's procedures for monitoring the use of grant funds in the United States. Image: Control of Control				ER INC					39-17	12663
Concrete used to avail the grants or assistance? Concrete used to avail the grants or assistance? Concrete used to avail the grants and Other Assistance to Committee in the United Bitates. PartII Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than 55,000. Part II can be duplicated if additional space is needed. (a) Nore and address of organization or government (b) EIN (c) IRO section (c) Anore and address of organization (c) Or		-								
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Completed the organization answered 'Yes' to Form 990, Part IV, line 21, for any necessary in the use of grant funds in the United States. 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Anount of cash grant (f) Method of cash grant (g) Description of or assistance (h) Purpose of grant or assistance 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Anount of cash grant (g) Description of or assistance (h) Purpose of grant or assistance 1 (a) Name and address of organization (b) EIN (c) IRC section (c) IRC section (g) Description of or assistance (h) Purpose of grant or assistance UEC LAND CORP 1500 EAST PARK PLACE 46-4292052 501(C) (3) 312,008 0. CAMPAICM MILHAUKEE, WI 53211 46-4292052 501(C) (3) 312,008 0. CAMPAICM 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 1. 0. 2 Enter total number of other organizations listed in the line 1 table 0. 0. 1.	•			•		•				
Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) 1 (a) Name ad address of organization or government (b) EIN (c) IRC section (d) Amount of cash grant (e) Amount of non cash organization (cash grant (f) Amount of non cash assistance (g) Description of non cash assistance (h) Purpose of grant or assistance UEC LAND CORP USC LAND CORP Support FOR THE RIVERLAND Support FOR THE RIVERLAND ISUB EAST PARK PLACE 46-4292052 \$01(C)(3) 312,008. 0. MILWAUKEE, WI 53211 46-4292052 \$01(C)(3) 312,008. 0. Charter of address of section 501(c)(3) and government organizations listed in the line 1 table 1. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 1. 1. 1.	2 Describe in Part	IV the organization's pr	ocedures for moni	toring the use of grant	t funds in the Unite	d States.			Tes	
1 (a) Name and address of organization or government (b) EIN (c) DEX (c) IRC section if applicable (d) Amount of cash grant (f) Method of cash grant (g) Description of non-cash assistance (g) Description of non-cash assistance (h) Purpose of grant or assistance UEC LAND CORP 1500 EAST PARK PLACE 46-4292052 501(C)(3) 312,008 0. SUPPORT FOR THE RIVERLAND CAMPAIGN MILWAUKEE, WI 53211 46-4292052 501(C)(3) 312,008 0. SUPPORT FOR THE RIVERLAND CAMPAIGN Image: Section 501(c)(3) and government organizations listed in the line 1 table Image: Section 501(c)(3) and government organizations listed in the line 1 table Image: Section 501(c)(3) and government organizations listed in the line 1 table Image: Section 501(c)(3) and government organizations listed in the line 1 table							anization answered "	Yes" to Form 990, Part	t IV, line 21, for any	
Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of of the organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of of the organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of of the organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of of the organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the line 1 table Iter total number of section 501(c)(3) and government organizations listed in the	recipient t	hat received more than	\$5,000. Part II car	be duplicated if addit	tional space is need	ded.				
1500 EAST PARK PLACE 46-4292052 501(C)(3) 312,008. 0. CAMPAIGN MILWAUKEE, WI 53211 46-4292052 501(C)(3) 312,008. 0. CAMPAIGN Image: Comparison of the comparizations listed in the line 1 table Image: Comparizations listed in the line 1 table Image: Comparization of the comparizations listed in the line 1 table Image: Comparization of the comparizations listed in the line 1 table			(b) EIN		• •	non-cash	valuation (book, FMV, appraisal,			
3 Enter total number of other organizations listed in the line 1 table	1500 EAST PARK PI		46-4292052	501(C)(3)	312,008.	0.				IVERLAND
3 Enter total number of other organizations listed in the line 1 table										
			-	-	he line 1 table				·····. •	
										-

(c) Amount of

cash grant

(d) Amount of non-

cash assistance

(e) Method of valuation (book, FMV, appraisal, other)

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

(b) Number of

recipients

PART I, LINE 2:

FINANCIAL REPORTS OF THE GRANTEE ARE REGULARLY REVIEWED.

(f) Description of non-cash assistance

Page 2

URBAN ECOLOGY CENTER INC

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance

Schedule I (Form 990) (2014) Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

e

Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Open To Public Inchaction

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	Information about a	Schedule M	(Form 990) and it	s instructions is at www.irs	s.aov/fc	rm990.	mope	0.1011
Nam	e of the organization						identificati	on number
	URBAN ECOLOG	Y CENT	ER INC			3	9-1712	663
Pa	rt I Types of Property							
		(a)	(b)	(c)			(d)	
		Check if	Number of	Noncash contribution		Method	of determin	ing
		applicable	contributions or	amounts reported on		oncash co	ntribution a	mounts
		x	items contributed	Form 990, Part VIII, line 1g		TIDOM	DOMOD	
1	Art - Works of art	X	/	1,256.	FWA	FROM	DONOR	
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	Х		32,612.	FMV	FROM	DONOR	
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	7	10,686.	FMV	AT T	IME OF	DONAT
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it			
	must hold for at least three years from the date of the initial contribution, and which is not required to be used for			
	exempt purposes for the entire holding period?	30a		Х
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Х	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash			
	contributions?	32a	Х	
b	If "Yes," describe in Part II.			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,			
	describe in Part II.			

3

31

12

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2014)

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FMV FROM DONOR

FMV FROM DONOR

FMV

FROM DONOR

432141 08-12-14

21

22

23 24

25

26

27

28

29

Taxidermy Historical artifacts

Scientific specimens

BICYCLES

(BUILDING MATE)

(**GIFT CERTIFIC**)

X

Х

Х

)

Number of Forms 8283 received by the organization during the tax year for contributions

for which the organization completed Form 8283, Part IV, Donee Acknowledgement

Archeological artifacts

(

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Other

Other 🕨

Other

Other

40,379.

22,655.

6,660.

29

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

WHEN STOCK OR SECURITIES ARE DONATED, THE URBAN ECOLOGY CENTER DIRECTS

THE DONEE TO THE ORGANIZATION'S ACCOUNT AT ROBERT W BAIRD. THE ACCOUNT

IS SET UP WITH INSTRUCTIONS TO IMMEDIATELY SELL THE ASSETS. PROCEEDS

FROM THE SALE ARE THEN DISBURSED TO THE URBAN ECOLOGY CENTER IN THE

FORM OF CASH.

Schedule M (Form 990) (2014)

432142 08-12-14

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

Employer identification number 39 - 1712663

URBAN ECOLOGY CENTER INC

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

MOTIVATION FOR POSITIVE CHANGE, NEIGHBORHOOD BY NEIGHBORHOOD.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AREAS, MAKING THEM SAFE, ACCESSIBLE AND VIBRANT; PRESERVE AND ENHANCE

THESE NATURAL AREAS AND THEIR SURROUNDING WATERS; PROMOTE COMMUNITY BY

OFFERING RESOURCES THAT SUPPORT LEARNING, VOLUNTEERISM, STEWARDSHIP,

RECREATION AND CAMARADERIE; PRACTICE AND MODEL ENVIRONMENTALLY

RESPONSIBLE BEHAVIORS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PREPARE LAND FOR FUTURE MISSION IMPACT.

PRESERVE AND ENHANCE PUBLIC NATURAL AREAS AND THEIR SURROUNDING WATERS.

PRACTICE AND MODEL ENVIRONMENTALLY RESPONSIBLE BEHAVIORS.

EXPENSES \$ 694,610. INCLUDING GRANTS OF \$ 312,008. REVENUE \$ 7,745.

FORM 990, PART VI, SECTION A, LINE 6:

THE URBAN ECOLOGY CENTER HAS OVER 4,000 MEMBERS WHO MAKE AN ANNUAL DONATION

THAT IS COMPLETELY TAX-DEDUCTIBLE AND SUPPORTS OUR MISSION.

FORM 990, PART VI, SECTION A, LINE 7A:

ALL OF OUR MEMBERS ARE INVITED TO AN ANNUAL MEETING HELD IN NOVEMBER. AT

THIS MEETING MEMBERS ELECT OUR BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B:

 CHANGES TO OUR MISSION OR BY-LAWS ARE SUBJECT TO APPROVAL BY OUR MEMBERS.

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2014)

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07090203 768059 139390000

9390000 2014.05060 URBAN ECOLOGY CENTER INC 13939001

URBAN ECOLOGY CENTER INC

FORM 990, PART VI, SECTION B, LINE 11:

AFTER THE DIRECTOR OF FINANCE & OPERATIONS HAS APPROVED THE 990, IT IS GIVEN TO OUR FINANCE COMMITTEE TO BE DISCUSSED AND REVIEWED. UPON THEIR APPROVAL, THE 990 IS GIVEN TO ALL BOARD DIRECTORS TO REVIEW. AFTER IT IS APPROVED BY THE BOARD OF DIRECTORS IT IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

ANNUALLY THE DIRECTOR OF FINANCE & OPERATIONS DISTRIBUTES A FORM TO ALL EMPLOYEES AND BOARD MEMBERS THAT REQUIRES EACH PERSON TO LIST ALL RELATIONSHIPS OR AFFILIATIONS WITH BUSINESSES THAT THE URBAN ECOLOGY CENTER HAS CONTRACTED WITH OR MAY CONTRACT WITH. THIS INFORMATION IS THEN REVIEWED BY THE DIRECTOR OF FINANCE & OPERATIONS TO DETERMINE ANY POSSIBLE CONFLICTS

OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

THE HUMAN RESOURCES COMMITTEE OF THE BOARD OF DIRECTORS PERFORMS AN IN-DEPTH STUDY TO DETERMINE COMPENSATION FOR OUR EXECUTIVE DIRECTOR AND OTHER KEY EMPLOYEES. THE FIRST STEP WAS TO CONSULT A SURVEY OF COMPENSATION AND BENEFITS FOR SIMILAR NONPROFIT POSITIONS THROUGHOUT THE CITY OF MILWAUKEE AND THROUGHOUT THE NATION. THEN EACH POSITION WAS EVALUATED ON A QUANTITATIVE BASIS TO DETERMINE HOW MUCH AUTONOMY AND SKILLS WERE REQUIRED TO COMPLETE THE JOB. THE POSITIONS WERE NEXT ORDERED FROM HIGHEST AMOUNT OF RESPONSIBILITY TO THE LOWEST ACCORDING TO THE SCORES AWARDED. EACH POSITION WAS ASSIGNED A RANGE OF EXPECTED SALARIES BASED ON THE MARKET RESEARCH DONE IN THE FIRST STEP AND THE EVALUATION OF SKILLS REQUIRED IN THE SECOND STEP. THE HUMAN RESOURCES COMMITTEE ADVISES THE BOARD DURING THE ANNUAL BUDGET DEVELOPMENT PROCESS AND BEFORE COMPENSATION CHANGES ARE MADE FOR THE 432212 08-27-14 Schedule O (Form 990 or 990-EZ) (2014) 40 13939001 07090203 768059 139390000 2014.05060 URBAN ECOLOGY CENTER INC

<u>'ORM 990</u> ,	, PART VI, SECTION C, LINE 19:
INANCIAI	L STATEMENTS ARE AVAILABLE ON OUR WEBSITE OR BY REQUESTING IT FROM
EITHER OU	JR DIRECTOR OF FINANCE AND OPERATIONS OR OUR DIRECTOR OF
DEVELOPME	ENT. OUR GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY CAN
DBTAINED	BY REQUESTING IT FROM OUR DIRECTOR OF FINANCE AND OPERATIONS.

41

EXECUTIVE DIRECTOR AND OTHER KEY EMPLOYEES FOR THE PREVIOUS YEAR IN

DETERMINING COMPENSATION.

Schedule O (Form 990 or 990-EZ) (2014)

EXECUTIVE DIRECTOR. THE BOARD ALSO CONSIDERED THE PERFORMANCE OF THE

07090203 768059 139390000

432212 08-27-14

Page 2

Name of the organization URBAN ECOLOGY CENTER INC Employer identification number 39-1712663

SCH	EDULE R

(Form 990)

Department of the Treasury Internal Revenue Service

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

URBAN ECOLOGY CENTER INC

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
UEC/MVP PROJECT INC - 27-2140266							
301 W WISCONSIN AVE SUITE 400B	TO SUPPORT THE "FROM THE						
MILWAUKEE, WI 53203	GROUND UP" CAMPAIGN	WISCONSIN	501(C)(3)	170(B)(1)(A)			x
UEC LAND CORPORATION - 46-4292052	TO PURCHASE, HOLD, AND						
1500 EAST PARK PLACE	SELL PROPERTY TO FURTHER				URBAN ECOLOGY		
MILWAUKEE, WI 53211	UEC'S EXEMPT PURPOSES	WISCONSIN	501(C)(3)	509(A)(3)	CENTER, INC.	X	
	_						
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

OMB No. 1545-0047

2014 Open to Public Inspection

Employer identification number

39-1712663

Schedule R (Form 990) 2014 URBAN ECOLOGY CENTER INC

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	()	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disprop alloca	ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag partn	or Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes I	lo
	1										
	1										
	1										
	1										
										+	
	1										
	-										
	-										
										+	-
	-										
	4										
	4										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	rect controlling Type of entity Share of total Share entity (C corp, S corp, income end-of-		(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(l contr ent	(i) ction (b)(13) trolled tity?
		country)				233013		Yes	No

Schedule R (Form 990) 2014 URBAN ECOLOGY CENTER INC

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

ring the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? ceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity t, grant, or capital contribution to related organization(s) t, grant, or capital contribution from related organization(s)			
, grant, or capital contribution to related organization(s)			
, grant, or capital contribution to related organization(s)			Σ
, grant, or capital contribution from related organization(s)	1b		
, J ,	1c	X	
ans or loan guarantees to or for related organization(s)			2
ans or loan guarantees by related organization(s)		X	
idends from related organization(s)	1f		2
e of assets to related organization(s)	1g		
chase of assets from related organization(s)			
change of assets with related organization(s)			
ase of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		
ase of facilities, equipment, or other assets from related organization(s)	1k	x	
formance of services or membership or fundraising solicitations for related organization(s)			
formance of services or membership or fundraising solicitations by related organization(s)	1m		
aring of facilities, equipment, mailing lists, or other assets with related organization(s)			
aring of paid employees with related organization(s)			
mbursement paid to related organization(s) for expenses	1p		
mbursement paid by related organization(s) for expenses			
ner transfer of cash or property to related organization(s)	1r		
her transfer of cash or property from related organization(s)			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) UEC LAND CORP	В	312,008.	CASH GRANT
(2) UEC LAND CORP	Е	1,025,000.	OUTSTANDING LOAN BALANCE
(3)			
<u>(4)</u>			
(5)			
<u>(6)</u>	ΔΔ		Sabadula D (Farm 000) 2014

Schedule R (Form 990) 2014 URBAN ECOLOGY CENTER INC

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)				(f)	(g)	()	•	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	e Are partner 501(c orgs	all	Share of	Share of		• 7 opor-	Code V-UBI	(J) General o	(N)
of entity	T finally doubley	(state or foreign	(related, unrelated,	501 (c	s sec. c)(3)	total	end-of-year	tion	opor- nate tions?	amount in box 20	managing	ownership
,		country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Yes	No	income		Yes	No		Yes NO	- ·
			,	165	NU			163		,		
												ļ

Schedule R (Form 990) 2014

Part VII | Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

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