

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2015 calendar year, or tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

B Check if applicable:	C Name of organization URBANPROMISE INTERNATIONAL	D Employer identification number 26-3389429
<input type="checkbox"/> Address change	Doing business as	E Telephone number 856-382-1858
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO BOX 156	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code PENNSAUKEN, NJ 08110	G Gross receipts \$ 1,723,636.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: BRUCE MAIN SAME AS C ABOVE	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Application pending	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	If "No," attach a list. (see instructions)
J Website: ▶ WWW.URBANPROMISEINTERNATIONAL.ORG		H(c) Group exemption number ▶
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 2008 M State of legal domicile: NJ

Part I Summary

1	Briefly describe the organization's mission or most significant activities: TO PREPARE EMERGING LEADERS TO INITIATE, DEVELOP, & SUSTAIN CHRISTIAN-BASED YOUTH DEVELOPMENT ORGS.		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	12
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	97
6	Total number of volunteers (estimate if necessary)	6	15
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 1,754,817.	Current Year 1,712,644.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	851.	875.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,216.	7,437.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,759,884.	1,720,956.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	690,667.	737,739.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	689,889.	503,677.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 95,715.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	322,413.	456,417.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,702,969.	1,697,833.	
19 Revenue less expenses. Subtract line 18 from line 12	56,915.	23,123.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 366,893.	End of Year 358,858.
	21 Total liabilities (Part X, line 26)	80,194.	49,036.
	22 Net assets or fund balances. Subtract line 21 from line 20	286,699.	309,822.

Part II Signature Block

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

Sign Here	Signature of officer BRUCE MAIN, PRESIDENT	Date
Preparer Use Only	Print/Type preparer's name JULIUS C. GREEN, CPA	Preparer's signature
	Firm's name ▶ BAKER TILLY VIRCHOW KRAUSE, LLP	Date
	Firm's address ▶ 1650 MARKET STREET, SUITE 4500 PHILADELPHIA, PA 19103	Check if self-employed <input type="checkbox"/> PTIN P00350393
		Firm's EIN ▶ 39-0859910
		Phone no. (215) 972-0701

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