

Return of Organization Exempt From Income Tax

OMB No. 1545-0047
2013
Open to Public Inspection

Form **990**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ 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.

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning **2013**, and ending **2013**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NATIONAL URBAN LEAGUE, INC.		D Employer identification number 13-1840489	
	Doing Business As		E Telephone number	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 120 WALL STREET 8TH FL		(212) 558-5300	
	City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10005		G Gross receipts \$ 51,574,476.	
F Name and address of principal officer MARC H. MORIAL 120 WALL STREET, 8TH FL NEW YORK, NY 10005		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)		
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		H(c) Group exemption number ▶		
J Website: ▶ WWW.NUL.ORG				
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: 1910 M State of legal domicile NY		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: ENABLE AFRICAN-AMERICAN AND OTHER UNDERSERVED URBAN RESIDENTS TO SECURE ECONOMIC SELF-RELIANCE, PARITY, POWER AND CIVIL RIGHTS.			
	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)	39		
	4 Number of independent voting members of the governing body (Part VI, line 1b)	38		
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	150		
	6 Total number of volunteers (estimate if necessary)	39		
	7a Total unrelated business revenue from Part VIII, column (C), line 12	0		
7b Net unrelated business taxable income from Form 990-T, line 34	0			
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,203,017.	Current Year 41,550,775.	
	9 Program service revenue (Part VIII, line 2g)	7,262,062.	6,379,093.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	173,468.	1,694,058.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	523,138.	601,857.	
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	48,161,685.	50,225,783.	
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	18,587,829.	19,566,793.
		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)	13,166,835.	13,235,085.
		16a Professional fundraising fees (Part IX, column (A), line 11e)	468,402.	432,819.
		b Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,172,799.		
		17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	15,034,453.	14,930,384.
		18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	47,257,519.	48,165,081.
19 Revenue less expenses. Subtract line 18 from line 12		904,166.	2,060,702.	
Net Assets or Fund Balances		20 Total assets (Part X, line 16)	Beginning of Current Year 46,644,943.	End of Year 48,152,607.
	21 Total liabilities (Part X, line 26)	16,397,353.	10,739,263.	
	22 Net assets or fund balances. Subtract line 21 from line 20	30,247,590.	37,413,344.	

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: <i>Paul Lynch</i>	▶ Date: <i>10/15/15</i>			
	▶ Type or print name and title: CFO				
Paid Preparer Use Only	Print/Type preparer's name: FREDERICK DAVIS	Preparer's signature: <i>[Signature]</i>	Date: <i>10/15/15</i>	Check <input type="checkbox"/> if self-employed	PTIN: P00446023
	Firm's name: ▶ MITCHELL & TITUS, LLP		Firm's EIN: ▶ 13-2781641		
	Firm's address: ▶ ONE BATTERY PARK PLAZA NEW YORK, NY 10004		Phone no: 212-709-4500		

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

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2013)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
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, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 22,435,650. including grants of \$ 17,102,140.) (Revenue \$ 541,588.)
ECONOMIC EMPOWERMENT INVESTS IN THE FINANCIAL LITERACY AND EMPLOYABILITY OF ADULTS THROUGH JOB TRAINING, HOME OWNERSHIP COUNSELING AND ENTREPRENEURSHIP SUPPORT.

4b (Code:) (Expenses \$ 5,396,729. including grants of \$ 1,945,990.) (Revenue \$ 1,192,551.)
EDUCATION AND YOUTH DEVELOPMENT ENSURES THE EDUCATION OF ALL CHILDREN BY PROVIDING ACCESS TO EARLY CHILDHOOD LITERACY, AFTER-SCHOOL PROGRAMS AND COLLEGE PREPARATION.

4c (Code:) (Expenses \$ 8,336,640. including grants of \$ 14,250.) (Revenue \$ 4,046,039.)
CIVIC ENGAGEMENT AND LEADERSHIP EMPOWERMENT ENCOURAGES ALL PEOPLE TO TAKE AN ACTIVE ROLE TO IMPROVE QUALITY OF LIFE THROUGH PARTICIPATION IN COMMUNITY SERVICE PROJECTS AND PUBLIC POLICY INITIATIVES.

4d Other program services (Describe in Schedule O.) ATTACHMENT 2
(Expenses \$ 3,558,466. including grants of \$ 504,413.) (Revenue \$ 1,308,729.)

4e Total program service expenses 39,727,485.

Part IV Checklist of Required Schedules

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

Part 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 government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	X	
24 a 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II.</i>		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? <i>If "Yes," complete Schedule L, Part III.</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c 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? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b 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 "Yes," complete Schedule R, Part V, line 2.</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part 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

Table with columns for question numbers (1a-14b), Yes, and No. Includes questions about Form 1096, Form W-2G, backup withholding, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4966, Form 501(c)(7), Form 501(c)(12), Form 4947(a)(1), and Form 501(c)(29).

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (39), 1b (38), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b (X), 11a (X), 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b (X).

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 3
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: PAUL WYCISK 120 WALL STREET 8TH FLOOR NEW YORK, NY 10005 212 558-5300

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

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

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) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN D HOFMEISTER CHAIR	1.00 0	X		X				0	0	0
(2) THE HONORABLE ALEXIS M HERMAN SENIOR VICE CHAIR	1.00 0	X		X				0	0	0
(3) PAUL MCKINNON SECRETARY	1.00 0	X		X				0	0	0
(4) JON R CAMPBELL TREASURER	1.00 1.00	X		X				0	0	0
(5) MARC H MORIAL PRESIDENT AND CEO	40.00 1.00	X		X			700,000.	0	146,070.	0
(6) CRYSTAL ASHBY TRUSTEE	1.00 0	X						0	0	0
(7) KENDRICK F ASHTON TRUSTEE	1.00 0	X						0	0	0
(8) KHARY P BARNES TRUSTEE	1.00 1.00	X						0	0	0
(9) LANESHA ANDERSON TRUSTEE	1.00 0	X						0	0	0
(10) ROBERT J BROWN TRUSTEE	1.00 0	X						0	0	0
(11) CATHERINE V BUELL TRUSTEE	1.00 0	X						0	0	0
(12) DAVID L COHEN TRUSTEE	1.00 0	X						0	0	0
(13) VICTOR L CRAWFORD TRUSTEE	1.00 0	X						0	0	0
(14) DAVID C DARNELL TRUSTEE	1.00 0	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
15) TRACY FAULKNER ----- TRUSTEE	1.00 0	X					0	0	0	
16) MYRON GRAY ----- TRUSTEE	1.00 0	X					0	0	0	
17) KENNETH D BYNUM ----- TRUSTEE	1.00 0	X					0	0	0	
18) DONNA EPPS ----- TRUSTEE	1.00 0	X					0	0	0	
19) SAMUEL H HOWARD ----- TRUSTEE	1.00 1.00	X					0	0	0	
20) HARRY E JOHNSON, SR ----- TRUSTEE	1.00 0	X					0	0	0	
21) LAWRENCE S JONES ----- TRUSTEE	1.00 0	X					0	0	0	
22) GALE V KING ----- TRUSTEE	1.00 0	X					0	0	0	
23) DR. KASE LUKMAN LAWAL ----- TRUSTEE	1.00 0	X					0	0	0	
24) CAROL JACKSON ----- TRUSTEE	1.00 0	X					0	0	0	
25) JOHN W MACK ----- TRUSTEE	1.00 0	X					0	0	0	
1b Sub-total							700,000.	0	146,070.	
c Total from continuation sheets to Part VII, Section A							1,008,132.	0	327,240.	
d Total (add lines 1b and 1c)							1,708,132.	0	473,310.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 20

- 3** Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 4		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 19

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
26) JULIA JOHNSON ----- TRUSTEE	1.00 0	X					0	0	0	
27) CHARLENE LAKE ----- TRUSTEE	1.00 0	X					0	0	0	
28) MICHAEL F NEIDORFF ----- TRUSTEE	1.00 0	X					0	0	0	
29) WILLIAM F PICKARD, PH.D ----- TRUSTEE	1.00 0	X					0	0	0	
30) BRANDI RICHARD ----- TRUSTEES	1.00 0	X					0	0	0	
31) RYNTHIA ROST ----- TRUSTEE	1.00 0	X					0	0	0	
32) STATE SENATOR JABA SHUMATE ----- TRUSTEE	1.00 0	X					0	0	0	
33) THE HONORABLE RODNEY E SLATER ----- TRUSTEE	1.00 0	X					0	0	0	
34) DENNIS WELCH ----- TRUSTEE	1.00 0	X					0	0	0	
35) DARNELL WILLIAMS ----- TRUSTEE	1.00 0	X					0	0	0	
36) REGINALD K BRACK JR ----- HONORARY TRUSTEE	1.00 0	X					0	0	0	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 20

- 3** Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				
37) M ANTHONY BURNS HONORARY TRUSTEE	1.00 0	X						0	0	0	
38) MICHAEL CRITELLI HONORARY TRUSTEE	1.00 0	X						0	0	0	
39) KENNETH D LEWIS HONORARY TRUSTEE	1.00 0	X						0	0	0	
40) JONATHAN S LINEN HONORARY TRUSTEE	1.00 0	X						0	0	0	
41) MICHAEL MILLER SVP OF PROGRAM SERVICES	40.00 0					X		200,000.	0	64,920.	
42) DENNIS SERRETTE SVP OF DEVELOPMENT	40.00 0					X		208,000.	0	67,517.	
43) CHANELLE HARDY EXECUTIVE DIRECTOR	40.00 0					X		200,000.	0	64,920.	
44) PAUL WYCISK SVP OF FINANCE/CFO	40.00 0					X		200,000.	0	64,920.	
45) RHONDA SPEARS BELL SVP OF MARKETING/COMMUNICATION	40.00					X		200,132.	0	64,963.	
1b Sub-total											
c Total from continuation sheets to Part VII, Section A											
d Total (add lines 1b and 1c)											

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **20**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 21,331.					
	b Membership dues	1b					
	c Fundraising events	1c 1,742,800.					
	d Related organizations	1d					
	e Government grants (contributions) . .	1e 17,579,383.					
	f All other contributions, gifts, grants, and similar amounts not included above .	1f 22,207,261.					
	g Noncash contributions included in lines 1a-1f: \$	21,759.					
	h Total. Add lines 1a-1f		41,550,775.				
Program Service Revenue	Business Code						
	2a FRANCHISE FEES	900099	961,748.	961,748.			
	b CONFERENCE	900099	443,341.	443,341.			
	c EXHIBITOR INCOME	900099	434,062.	434,062.			
	d MEMBERSHIP FEES	900099	207,332.	207,332.			
	e SPONSORSHIP INCOME	900099	4,332,610.	4,332,610.			
	f All other program service revenue						
	g Total. Add lines 2a-2f		6,379,093.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts). ATTACHMENT 5		294,339.			294,339.	
	4 Income from investment of tax-exempt bond proceeds		0				
	5 Royalties		0				
	6a Gross rents	(i) Real					
		(ii) Personal					
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)		0				
	7a Gross amount from sales of assets other than inventory	(i) Securities	2,483,755.				
		(ii) Other					
		b Less: cost or other basis and sales expenses	1,084,036.				
		c Gain or (loss)	1,399,719.				
	d Net gain or (loss)		1,399,719.			1,399,719.	
	8a Gross income from fundraising events (not including \$ 1,742,800. of contributions reported on line 1c). See Part IV, line 18	a	156,700.				
		b Less: direct expenses	264,657.				
		c Net income or (loss) from fundraising events		-107,957.			
	9a Gross income from gaming activities. See Part IV, line 19	a					
		b Less: direct expenses					
c Net income or (loss) from gaming activities			0				
10a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory		0				
Miscellaneous Revenue		Business Code					
11a PUBLICATION OF SALE	900099	32,096.	32,096.				
b STONEHENGE EARNED DEALS	900099	167,083.	167,083.				
c REBATES/COMMISSION	900099	116,078.	116,078.				
d All other revenue	900099	394,557.	394,557.				
e Total. Add lines 11a-11d		709,814.					
12 Total revenue. See instructions		50,225,783.	7,088,907.		1,694,058.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	19,524,612.	19,524,612.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	42,181.	42,181.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	1,196,205.	596,717.	599,488.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	9,088,769.	6,165,317.	1,669,056.	1,254,396.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	885,896.	603,588.	154,839.	127,469.
9 Other employee benefits	1,485,192.	1,010,115.	264,895.	210,182.
10 Payroll taxes	579,023.	392,777.	106,331.	79,915.
11 Fees for services (non-employees):				
a Management	0			
b Legal	370,759.	245,813.	78,601.	46,345.
c Accounting	155,936.	103,386.	33,058.	19,492.
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17.	432,819.			432,819.
f Investment management fees	0			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) ATCH 6	5,291,029.	4,562,623.	436,422.	291,984.
12 Advertising and promotion	0			
13 Office expenses	1,493,484.	1,089,530.	259,740.	144,214.
14 Information technology	0			
15 Royalties	0			
16 Occupancy	2,173,557.	1,442,624.	451,058.	279,875.
17 Travel	2,392,550.	1,800,544.	439,709.	152,297.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	1,481,933.	1,481,933.		
20 Interest	2,760.	1,822.	580.	358.
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	431,624.	286,466.	89,598.	55,560.
23 Insurance	164,705.	109,388.	34,136.	21,181.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>SUBSCRIPTIONS / PUBLICATIONS</u>	145,650.	93,513.	24,647.	27,490.
b <u>BAD DEBTS</u>	441,575.		441,575.	
c <u>AWARD AND GRANT</u>	6,370.		3,446.	2,924.
d <u>MISCELLANEOUS</u>	378,452.	174,536.	177,618.	26,298.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	48,165,081.	39,727,485.	5,264,797.	3,172,799.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0			

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	8,039,052.	1	6,073,671.
	2	Savings and temporary cash investments	5,194,727.	2	2,843,600.
	3	Pledges and grants receivable, net	9,858,451.	3	12,215,780.
	4	Accounts receivable, net	698,155.	4	818,220.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	423,402.	9	532,289.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	8,490,225.	
	b	Less: accumulated depreciation	10b	4,285,563.	
	10c		1,835,281.	10c	4,204,662.
	11	Investments - publicly traded securities	20,368,924.	11	21,172,723.
	12	Investments - other securities. See Part IV, line 11	0	12	0
	13	Investments - program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
15	Other assets. See Part IV, line 11	226,951.	15	291,662.	
16	Total assets. Add lines 1 through 15 (must equal line 34)	46,644,943.	16	48,152,607.	
Liabilities	17	Accounts payable and accrued expenses	4,794,817.	17	4,465,142.
	18	Grants payable	0	18	0
	19	Deferred revenue	2,247,769.	19	397,833.
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	98,193.
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	9,354,767.	25	5,778,095.	
26	Total liabilities. Add lines 17 through 25	16,397,353.	26	10,739,263.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	-4,395,009.	27	-1,298,664.
	28	Temporarily restricted net assets	14,620,534.	28	18,689,943.
	29	Permanently restricted net assets	20,022,065.	29	20,022,065.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	30,247,590.	33	37,413,344.	
34	Total liabilities and net assets/fund balances.	46,644,943.	34	48,152,607.	

Part 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	50,225,783.
2	Total expenses (must equal Part IX, column (A), line 25)	2	48,165,081.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,060,702.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	30,247,590.
5	Net unrealized gains (losses) on investments	5	209,839.
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	1,507,465.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3,387,748.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	37,413,344.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed 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?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization NATIONAL URBAN LEAGUE, INC.	Employer identification number 13-1840489
---	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

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

- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

	Yes	No
11g(i)		
 - (ii) A family member of a person described in (i) above?

	Yes	No
11g(ii)		
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	37,159,307.	41,611,245.	37,128,976.	40,203,017.	41,550,775.	197,653,320.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3.	37,159,307.	41,611,245.	37,128,976.	40,203,017.	41,550,775.	197,653,320.
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).						2,959,146.
6 Public support. Subtract line 5 from line 4.						194,694,174.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	37,159,307.	41,611,245.	37,128,976.	40,203,017.	41,550,775.	197,653,320.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	486,743.	381,899.	547,515.	454,946.	294,339.	2,165,442.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	4,901,201.	803,182.	1,015,296.	515,979.	709,814.	7,945,472.
11 Total support. Add lines 7 through 10						207,764,234.
12 Gross receipts from related activities, etc. (see instructions)					12	31,204,889.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	93.71 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	91.88 %
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.); 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

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

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, Percentage. Row 15: Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)). Row 16: Public support percentage from 2012 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Line number, Description, Percentage. Row 17: Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)). Row 18: Investment income percentage from 2012 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization []

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization []

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

Part IV **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).

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
 ▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization NATIONAL URBAN LEAGUE, INC.	Employer identification number 13-1840489
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

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

Schedule C (Form 990 or 990-EZ) 2013

Part II-A Complete if the filing organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	65,786.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	153,631.													
c	Total lobbying expenditures (add lines 1a and 1b)	219,417.													
d	Other exempt purpose expenditures	47,945,664.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	48,165,081.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0	0												
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0	0												
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c Total lobbying expenditures	240,530.	217,793.	176,948.	153,631.	788,902.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	29,635.	30,468.	27,278.	65,786.	153,167.

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; b If "Yes," enter the amount of any tax incurred under section 4912; c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

Table with 2 main columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); a Current year; b Carryover from last year; c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?; 5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

Series of horizontal dashed lines for providing supplemental information.

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year, and two Yes/No questions about donor informed.

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

Form for Part II Conservation Easements. Includes questions about purpose of easements, number of easements, and monitoring details. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, 2d.

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

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting requirements and amounts for revenues and assets.

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

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

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

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 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's collection?

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

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

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

2a Did the organization include an amount on Form 990, Part X, line 21?

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.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a-1g (Balance, Contributions, Net investment earnings, Grants, Other expenditures, Administrative expenses, End of year balance).

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 93.3807 %
c Temporarily restricted endowment 6.6193 %

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:

Table with 2 columns: Yes, No. Rows: 3a(i) unrelated organizations, 3a(ii) related organizations, 3b 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.

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a Land, 1b Buildings, 1c Leasehold improvements, 1d Equipment, 1e Other, Total.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 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. (Column (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. (Column (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) ACCRUED PENSION BENEFIT COST	4,153,490.
(3) DEFERRED RENT CREDIT	313,353.
(4) ACCRUED PAYROLL AND VACATION	780,013.
(5) ACCRUED DEFINED CONTRIBUTION COST	531,239.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	5,778,095.

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

Part XIII Supplemental Information (continued)

FORM 990, SCHEDULE D, PART V, LINE 4

THE INTENDED USE OF THE ENDOWMENT IS TO UTILIZE ITS EARNINGS FOR GENERAL OPERATIONS.

FORM 990, SCHEDULE D, PART X, LINE 2

MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE LEAGUE AND HAS CONCLUDED THAT AS OF DECEMBER 31, 2013 AND 2012, THERE ARE NO UNCERTAIN TAX POSITIONS TAKEN OR ARE TO BE TAKEN. ACCORDINGLY, NO INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS HAVE BEEN ACCRUED IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS.

FORM 990, SCHEDULE D, PART XI, LINE 4B AND PART XII, LINE 2D

SPECIAL EVENTS DIRECT EXPENSES: \$264,657.00

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 FAIRCOM NEW YORK, INC.	DIRECT MAIL		X	291,182.	280,990.	10,192.
2 SANKY COMMUNICATIONS	ONLINE DONATIONS		X	57,728.	59,320.	-31,592.
3 PROJECT PLUS	SPECIAL EVENTS		X	1,769,500.	63,053.	1,706,447.
4						
5						
6						
7						
8						
9						
10						
Total				2,118,410.	403,363.	1,685,047.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, FL, GA, HI, IL,
KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH,
OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI,

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-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		EQUAL OPPORTUNI (event type)	BENEFIT CONCR (event type)	(total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	1,694,500.	205,000.	0	1,899,500.
	2	Less: Contributions	1,537,800.	205,000.	0	1,742,800.
	3	Gross income (line 1 minus line 2).	156,700.		0	156,700.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	264,657.		0	264,657.
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				264,657.
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				-107,957.	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		Yes _____ % No _____ %	Yes _____ % No _____ %	Yes _____ % No _____ %	
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor			
	7	Direct expense summary. Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If "No," explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 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? Yes No
- 13 Indicate the percentage of gaming activity operated in:

a 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:

Name ▶ -----

Address ▶ -----

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ -----

Address ▶ -----

16 Gaming manager information:

Name ▶ -----

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ -----

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2013

Open to Public
Inspection

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

Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Governments and Organizations in the United States. 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) URBAN LEAGUE OF SOUTHERN CONNECTICUT 46 ATLANTIC STREET STAMFORD, CT 06901	06-0856692	501(C)(3)	25,000.				SEE PART IV
(2) URBAN LEAGUE OF GREATER HARTFORD 140 WOODLAND AVENUE HARTFORD, CT 06105	06-6066491	501(C)(3)	73,500.				SEE PART IV
(3) NEW YORK URBAN LEAGUE 204 WEST 136TH STREET NEW YORK, NY 10030	13-1671035	501(C)(3)	51,000.				SEE PART IV
(4) URBAN LEAGUE OF WESTCHESTER COUNTY 61 MITCHELL PLACE WESTCHESTER, NY 10022	13-1671035	501(C)(3)	1,527,733.				SEE PART IV
(5) BUFFALO URBAN LEAGUE 15 EAST GENESEE STREET ROCHESTER, NY 14203	16-0743940	501(C)(3)	89,200.				SEE PART IV
(6) URBAN LEAGUE OF ROCHESTER 265 NORTH CLINTON AVE ROCHESTER, NY 14605	16-0906150	501(C)(3)	188,842.				SEE PART IV
(7) MORRIS COUNTY URBAN LEAGUE 300 MADISON AVENUE MORRISTOWN, NJ 07960	22-1449251	501(C)(3)	15,000.				SEE PART IV
(8) URBAN LEAGUE FOR BERGEN COUNTY 40 N. VAN BRUNT ST. ENGLEWOOD, NJ 07631	22-1487175	501(C)(3)	13,546.				SEE PART IV
(9) URBAN LEAGUE OF UNION COUNTY 272 N. BROAD ST. ELIZABETH, NJ 07207	22-1487366	501(C)(3)	189,240.				SEE PART IV
(10) URBAN LEAGUE OF ESSEX COUNTY 508 CENTRAL AVENUE NEWARK, NJ 07107	22-1554540	501(C)(3)	1,611,288.				SEE PART IV
(11) URBAN LEAGUE OF PHILADELPHIA 121 S. BROAD ST. PHILADELPHIA, PA 19107	23-1429810	501(C)(3)	314,570.				SEE PART IV
(12) TUCSON URBAN LEAGUE 2305 SOUTH PARK AVENUE TUCSON, AZ 85713	23-7063141	501(C)(3)	37,182.				SEE PART IV

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Governments and Organizations in the United States. 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) URBAN LEAGUE OF EASTERN MASSACHUSETTS 88 WARREN STREET ROXBURY, MA 02119	23-7349132	501(C)(3)	1,238,076.				SEE PART IV
(2) URBAN LEAGUE OF LONG ISLAND 50 CLINTON STREET HEMPSTEAD, NY 11550	23-7423001	501(C)(3)	27,116.				SEE PART IV
(3) URBAN LEAGUE OF GREATER PITTSBURGH 610 WOOD STREET PITTSBURGH, PA 15222	25-0985592	501(C)(3)	1,394,559.				SEE PART IV
(4) URBAN LEAGUE OF SHENANGO VALLEY 601 INDIANA AVENUE FARRELL, PA 16121	25-1193018	501(C)(3)	27,500.				SEE PART IV
(5) URBAN LEAGUE OF GREATER CINCINNATI 3458 READING ROAD CINCINNATI, OH 45229	31-0565428	501(C)(3)	536,863.				SEE PART IV
(6) COLUMBUS URBAN LEAGUE 788 MOUNT VERNON AVENUE COLUMBUS, OH 43203	31-4379453	501(C)(3)	272,462.				SEE PART IV
(7) AKRON COMMUNITY SERVICE CENTER AND URBAN LE 440 VERNON ODOM BLVD AKRON, OH 44307	34-0714520	501(C)(3)	10,000.				SEE PART IV
(8) GREATER WARREN-YOUNGSTOWN URBAN LEAGUE 290 W. MARKET ST. WARREN, OH 44481	34-0714784	501(C)(3)	16,000.				SEE PART IV
(9) URBAN LEAGUE OF GREATER CLEVELAND 2930 PROSPECT AVENUE CLEVELAND, OH 44115	34-0720563	501(C)(3)	433,080.				SEE PART IV
(10) LORAIN COUNTY URBAN LEAGUE 401 BOARD ST. ELYRIA, OH 44035	34-1263379	501(C)(3)	387,882.				SEE PART IV
(11) FORT WAYNE URBAN LEAGUE 2135 S. HANNA STREET FORT WAYNE, IN 46803	35-0869052	501(C)(3)	78,020.				SEE PART IV
(12) INDIANAPOLIS URBAN LEAGUE 777 INDIANA AVENUE INDIANAPOLIS, IN 46202	35-6060655	501(C)(3)	10,000.				SEE PART IV

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2013)

JSA

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2013

**Open to Public
Inspection**

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Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Governments and Organizations in the United States. 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CHICAGO URBAN LEAGUE 4510 S. MICHIGAN AVE. CHICAGO, IL 60653	36-2225483	501(C)(3)	743,661.				SEE PART IV
(2) QUAD COUNTY URBAN LEAGUE 808 E. GALENA AURORA, IL 60505	36-2882693	501(C)(3)	126,763.				SEE PART IV
(3) SPRINGFIELD URBAN LEAGUE INC 100 NORTH 11TH STREET SPRINGFIELD, IL 62703	37-0765550	501(C)(3)	32,000.				SEE PART IV
(4) URBAN LEAGUE OF SPRINGFIELD ONE FEDERAL STREET SPRINGFIELD, MA 01109	37-0765550	501(C)(3)	238,253.				SEE PART IV
(5) TRI COUNTY URBAN LEAGUE 317 S MACARTHUR HIGHWAY PEORIA, IL 61605	37-0888235	501(C)(3)	132,129.				SEE PART IV
(6) DETROIT URBAN LEAGUE 208 MACK AVENUE DETROIT, MI 48201	38-1358487	501(C)(3)	1,817,322.				SEE PART IV
(7) URBAN LEAGUE OF GREATER MADISON 2222 S. PARK STREET MADISON, WI 53713	39-1098146	501(C)(3)	29,000.				SEE PART IV
(8) MINNEAPOLIS URBAN LEAGUE 2100 PLYMOUTH AVE N MINNEAPOLIS, MN 55411	41-0706915	501(C)(3)	177,419.				SEE PART IV
(9) URBAN LEAGUE METROPOLITAN ST LOUIS 3701 GRANDEL SQUARE ST LOUIS, MO 63108	43-0653605	501(C)(3)	62,796.				SEE PART IV
(10) URBAN LEAGUE OF KANSAS CITY 1710 PASEO BOULEVARD KANSAS CITY, KS 64108	44-0546273	501(C)(3)	84,876.				SEE PART IV
(11) URBAN LEAGUE OF KANSAS INC 1802 EAST 13TH STREET WICHITA, KS 67214	48-0602109	501(C)(3)	49,867.				SEE PART IV
(12) METROPOLITAN WILMINGTON URBAN LEAGUE 100 WEST 10TH STREET WILMINGTON, DE 19801	51-0391465	501(C)(3)	55,768.				SEE PART IV

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

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Internal Revenue Service

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Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Governments and Organizations in the United States. 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) GREATER WASHINGTON URBAN LEAGUE 2901 14TH STREET, N.W. WASHINGTON, DC 20009	53-0208981	501(C)(3)	80,750.				SEE PART IV
(2) URBAN LEAGUE OF HAMPTON ROADS 3225 HIGH STREET PORTSMOUTH, VA 23707	54-1083985	501(C)(3)	258,919.				SEE PART IV
(3) NORTHERN VIRGINIA URBAN LEAGUE 1315 DUKE STREET ALEXANDRIA, VA 22314	54-1530324	501(C)(3)	91,111.				SEE PART IV
(4) WINSTON SALEM URBAN LEAGUE 201 WEST 5TH STREET WINSTON-SALEM, NC 27101	56-0532301	501(C)(3)	25,000.				SEE PART IV
(5) URBAN LEAGUE OF CENTRAL CAROLINAS INC 740 WEST 5TH STREET CHARLOTTE, NC 28202	56-1218704	501(C)(3)	37,479.				SEE PART IV
(6) COLUMBIA URBAN LEAGUE 1400 BARNWELL STREET P.O. BOX 50125	57-0482767	501(C)(3)	83,528.				SEE PART IV
(7) THE URBAN LEAGUE OF THE UPSTATE 15 REGENCY HILL DRIVE GREENVILLE, SC 29607	57-0541039	501(C)(3)	157,645.				SEE PART IV
(8) URBAN LEAGUE OF GREATER ATLANTA 100 EDGEWOOD AVENUE, N.E. ATLANTA, GA 30303	58-0593386	501(C)(3)	436,171.				SEE PART IV
(9) URBAN LEAGUE GREATER CHATTANOOGA, INC. 730 MLK BLVD CHATTANOOGA, TN 37402	58-1436933	501(C)(3)	60,000.				SEE PART IV
(10) JACKSONVILLE URBAN LEAGUE 903 WEST UNION ST. JACKSONVILLE, FL 32204	59-0637865	501(C)(3)	155,594.				SEE PART IV
(11) URBAN LEAGUE OF GREATER MIAMI 8500 N.W. 25TH AVENUE MIAMI, FL 33147	59-0699445	501(C)(3)	10,000.				SEE PART IV
(12) URBAN LEAGUE OF PALM BEACH COUNTY INC 1700 AUSTRALIAN AVE. W PALM BEACH, FL 33407	59-1533710	501(C)(3)	422,873.				SEE PART IV

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Governments and Organizations in the United States. 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) URBAN LEAGUE OF BROWARD COUNTY 11 N.W. 36TH AVE. FORT LAUDERDALE, FL 33311	59-1564384	501(C)(3)	418,073.				SEE PART IV
(2) METROPOLITAN ORLANDO URBAN LEAGUE 2804 BELCO DRIVE ORLANDO, FL 32808	59-1766368	501(C)(3)	262,393.				SEE PART IV
(3) LOUISVILLE URBAN LEAGUE 1535 WEST BROADWAY LOUISVILLE, KY 40203	61-0444771	501(C)(3)	1,318,846.				SEE PART IV
(4) MEMPHIS URBAN LEAGUE 413 N. CLEVELAND STREET MEMPHIS, TN 38104	62-0481465	501(C)(3)	30,000.				SEE PART IV
(5) URBAN LEAGUE OF MIDDLE TENNESSEE 2550 METRO CENTER BLVD NASHVILLE, TN 37228	62-0795167	501(C)(3)	117,750.				SEE PART IV
(6) KNOXVILLE AREA URBAN LEAGUE 1514 E. 5TH AVENUE KNOXVILLE, TN 37917	62-0797293	501(C)(3)	132,166.				SEE PART IV
(7) BIRMINGHAM URBAN LEAGUE 1229 3RD AVENUE, NORTH BIRMINGHAM, AL 35203	63-0516655	501(C)(3)	213,037.				SEE PART IV
(8) URBAN LEAGUE OF GREATER NEW ORLEANS 2322 CANAL STREET NEW ORLEANS, LA 70119	72-0423627	501(C)(3)	471,198.				TECH ASSIST
(9) URBAN LEAGUE OF GREATER OKLAHOMA CITY 3900 N. MLK AVE. OKLAHOMA CITY, OK 73101	73-0590037	501(C)(3)	328,554.				TECH ASSIST
(10) METROPOLITAN TULSA URBAN LEAGUE 240 EAST APACHE STREET TULSA, OK 74106	73-0610288	501(C)(3)	52,607.				TECH ASSIST
(11) UL OF GREATER DALLAS & NORTH CENTRAL TEXAS 4315 SOUTH LANCASTER 700 DALLAS, TX 75216	74-1590488	501(C)(3)	545,417.				SEE PART IV
(12) HOUSTON AREA URBAN LEAGUE 1301 TEXAS AVENUE HOUSTON, TX 77002	74-1611455	501(C)(3)	564,531.				SEE PART IV

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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OMB No. 1545-0047

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Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Governments and Organizations in the United States. 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) GREATER PHOENIX URBAN LEAGUE 1402 SOUTH SEVENTH AVENUE PHOENIX, AZ 85007	86-0124189	501(C)(3)	73,950.				SEE PART IV	
(2) URBAN LEAGUE OF METROPOLITAN SEATTLE 105 14TH AVENUE SEATTLE, WA 98122	91-0575954	501(C)(3)	212,002.				SEE PART IV	
(3) GREATER SACRAMENTO URBAN LEAGUE 3725 MARYVILLE BLVD. SACRAMENTO, CA 95838	94-1686314	501(C)(3)	116,691.				SEE PART IV	
(4) LOS ANGELES URBAN LEAGUE 3450 MOUNT VERNON DR. LOS ANGELES, CA 90008	95-1691288	501(C)(3)	354,592.				SEE PART IV	
(5) URBAN LEAGUE OF SAN DIEGO COUNTY 720 GATEWAY CENTER DR. SAN DIEGO, CA 92102	95-1772854	501(C)(3)	119,312.				SEE PART IV	
(6) URBAN LEAGUE OF METROPOLITAN DENVER 700 E 24TH ST AVE STE 8 DENVER, CO 80205	84-0404264	501(C)(3)	6,000.				SEE PART IV	
(7) LAS VEGAS - CLARK COUNTY URBAN LEAGUE, CA 930 WEST OWENS AVE LAS VEGAS, NV 89106	20-0873314	501(C)(3)	196,060.				SEE PART IV	
(8) URBAN LEAGUE OF FLINT PO BOX 1102 FLINT, MI 48501	38-1358229	501(C)(3)	20,000.				SEE PART IV	
(9)								
(10)								
(11)								
(12)								
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table								68
3 Enter total number of other organizations listed in the line 1 table								

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

Schedule I (Form 990) (2013)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 ANN TANNEYHILL	1.	1,000.			
2 GO GREEN SCHOLARSHIP CONTEST	3.	22,500.			
3 YOUTH LEADERSHIP SUMMIT	3.	1,500.			
4 REIMBURSEMENT	3.	23,551.			
5					
6					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

FORM 990, SCHEDULE I, PART I, LINE 2

THE LEAGUE MONITORS THE USE OF THE GRANT FUNDS BY COMPARING THE ACTUAL TO THE APPROVED BUDGET BY THE RESPECTIVE FUNDER.

FORM 990, SCHEDULE I, PART II, LINE 1, COLUMN H

SUBCONTRACT PAYMENTS TO AFFILIATES ARE FOR PROGRAM SERVICES THAT INCLUDE ECONOMIC EMPOWERMENT, EDUCATION AND YOUTH EMPOWERMENT, CIVIC ENGAGEMENT AND LEADERSHIP EMPOWERMENT, AND HEALTH AND QUALITY OF LIFE EMPOWERMENT.

ACCORDING TO 2013 STATEMENT OF FUNCTIONAL EXPENSES, TOTAL GRANT AND OTHER

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

1	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

ARE \$19,573,163 WHICH INCLUDES \$19,524,612 GOT SUBCONTRACT PAYMENTS, \$48,551 AWARDS/GRANTS.

FORM 990, SCHEDULE I, PART III

ANN TANNEXHILL- AWARD FOR EXEMPLARY WORK.

GO GREEN SCHOLARSHIP CONTEST -STUDENTS WHO DEMONSTRATED AN EFFORT OR INITIATIVE THAT THEY HAVE BEGUN IN THEIR COMMUNITY/SCHOOL TO IMPROVE THE ENVIRONMENT OR TACKLE POLLUTION THROUGH THE PRODUCTION OF A VIDEO.

YOUTH LEADERSHIP SUMMIT - INDIVIDUALS WHO PROVIDED SERVICES TOWARDS LEADERSHIP AND EXPERTISE AS A HOUSING MANAGER DURING THE YOUTH LEADERSHIP

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SUMMIT (SLEEP OVER EVENT ON A CAMPUS FOR THE TEENAGERS) .

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
- ▶ Attach to Form 990. ▶ See separate instructions.
- ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
 - b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
 - b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MARC H MORIAL PRESIDENT AND CEO	(i) 450,000.	250,000.	0	19,108.	126,962.	846,070.	0
	(ii) 0	0	0	0	0	0	0
2 MICHAEL MILLER SVP OF PROGRAM SERVICES	(i) 200,000.	0	0	13,883.	51,037.	264,920.	0
	(ii) 0	0	0	0	0	0	0
3 DENNIS SERRETE SVP OF DEVELOPMENT	(i) 208,000.	0	0	14,643.	52,874.	275,517.	0
	(ii) 0	0	0	0	0	0	0
4 CHANELLE HARDY EXECUTIVE DIRECTOR	(i) 200,000.	0	0	13,883.	51,037.	264,920.	0
	(ii) 0	0	0	0	0	0	0
5 PAUL WYCISK SVP OF FINANCE/CFO	(i) 200,000.	0	0	13,883.	51,037.	264,920.	0
	(ii) 0	0	0	0	0	0	0
6 RHONDA SPEARS BELL SVP OF MARKETING/COMMUNICATION	(i) 200,132.	0	0	13,883.	51,080.	265,095.	0
	(ii) 0	0	0	0	0	0	0
7	(i) 0	0	0	0	0	0	0
(ii) 0	0	0	0	0	0	0	0
8	(i) 0	0	0	0	0	0	0
(ii) 0	0	0	0	0	0	0	0
9	(i) 0	0	0	0	0	0	0
(ii) 0	0	0	0	0	0	0	0
10	(i) 0	0	0	0	0	0	0
(ii) 0	0	0	0	0	0	0	0
11	(i) 0	0	0	0	0	0	0
(ii) 0	0	0	0	0	0	0	0
12	(i) 0	0	0	0	0	0	0
(ii) 0	0	0	0	0	0	0	0
13	(i) 0	0	0	0	0	0	0
(ii) 0	0	0	0	0	0	0	0
14	(i) 0	0	0	0	0	0	0
(ii) 0	0	0	0	0	0	0	0
15	(i) 0	0	0	0	0	0	0
(ii) 0	0	0	0	0	0	0	0
16	(i) 0	0	0	0	0	0	0
(ii) 0	0	0	0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

FORM 990, SCHEDULE J, PART I, LINE 1A

THE SPOUSE OF THE CEO HAS TRAVELED FIRST-CLASS FOR ANY OF THE LEAGUE'S

OUT OF TOWN EVENTS. THE FIRST CLASS TRAVEL FOR THE CEO'S SPOUSE WAS NOT

INCLUDED AS TAXABLE.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

**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.**

Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

FORM 990, PART III, LINE 4D

(1) NATIONAL URBAN LEAGUE AFFILIATES OFFER SERVICES IN 36 STATES AND THE DISTRICT OF COLUMBIA, TO OVER 350 COMMUNITIES ACROSS THE COUNTRY. THESE PROFESSIONALLY STAFFED OFFICES ARE WHERE NUL SERVICES COME TO LIFE: WHERE PEOPLE AND THEIR NEIGHBORHOODS GROW, CHANGE, AND ARE STRENGTHENED. THE LEAGUE'S AFFILIATE SERVICES DEPARTMENT GOAL IS TO PROVIDE INFORMATION AND TRAINING TO AFFILIATE CEOS, BOARDS, STAFF, AND VOLUNTEERS TO INCREASE THEIR UNDERSTANDING OF THE LEAGUE'S MISSION, AND TO ENHANCE THEIR PROFESSIONAL SKILLS AND EFFECTIVENESS.

(2) HEALTH AND QUALITY OF LIFE EMPOWERMENT PROMOTES COMMUNITY WELLNESS THROUGH A FOCUS ON PREVENTION, INCLUDING FITNESS, HEALTHY EATING AND ACCESS TO AFFORDABLE HEALTHCARE.

(3) CIVIL RIGHTS AND RACIAL JUSTICE EMPOWERMENT GUARANTEES EQUAL PARTICIPATION IN ALL FACETS OF AMERICAN SOCIETY THROUGH PROACTIVE PUBLIC POLICIES AND COMMUNITY-BASED PROGRAMS.

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

THE LEAGUE'S 990 WILL BE REVIEWED BY THE SVPS, LEGAL COUNSEL, AUDIT COMMITTEE AND THE BOARD.

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

ANNUALLY, HUMAN RESOURCES REQUESTS THAT EACH EMPLOYEE REVIEWS AND SIGNS

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

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization NATIONAL URBAN LEAGUE, INC.	Employer identification number 13-1840489
---	--

THE POLICY. IN ADDITION, PLEASE NOTE THAT SELF-DISCLOSURE AND THE REVIEW OF CONTRACTS BEFORE APPROVAL HELPS MONITOR AND ENFORCE THE POLICY.

FORM 990, PART VI, SECTION B, LINE 15A & 15B

CEO COMPENSATION IS APPROVED BY THE BOARD'S COMPENSATION COMMITTEE, AND STAFF MEMBERS' COMPENSATIONS ARE REVIEWED BY HUMAN RESOURCES AND THE CEO. LASTLY, THE LEAGUE DOES NOT HAVE ANY TRUSTEES OR KEY EMPLOYEES THAT ARE PAID. THE CEO IS THE ONLY STAFF MEMBER WHO IS ON THE BOARD. THERE ARE NO OTHER KEY EMPLOYEES. THE OTHER HIGH LEVEL STAFF MEMBERS LISTED ABOVE ARE NOT KEY EMPLOYEES. HOWEVER, THEY LEAD AND MANAGE OUR DEPARTMENTS, BUT THEY DO NOT HAVE THE OVERALL ORGANIZATIONAL RESPONSIBILITIES, POWERS OR INFLUENCE OVER THE TOTAL ORGANIZATION THAT THE CEO AND THE TRUSTEES HAVE.

FORM 990, PART VI, SECTION C, LINE 19

GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE, IN ANNUAL REPORT, AND UPON REQUEST.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS OR FUND BALANCES: PENSION-RELATED CHANGES OTHER THAN NET PERIODIC PENSION COSTS: \$3,387,748.

FORM 990, PART VII, SECTION A

THIS REPRESENTS THE 2012-2013 BOARD TERM LISTING.

Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

REINSTATEMENT

IN 2013 AND YEARS PRIOR, UNCONDITIONAL CONTRIBUTIONS RECEIVED THAT WERE TO BE USED IN SUBSEQUENT PERIODS, WERE RECORDED AS CONTRACT ADVANCES AND OTHER DEPOSITS (LIABILITIES) AND RECOGNIZED AS CONTRIBUTION OR SPONSORSHIP REVENUES IN SUBSEQUENT PERIODS WHEN THE TIME OR PURPOSE RESTRICTIONS FULFILLED. HOWEVER, UPON FURTHER EVALUATION OF THESE CONTRIBUTIONS, IT WAS DETERMINED THAT IT WAS MORE APPROPRIATE TO RECORD THESE AMOUNTS AS TEMPORARILY RESTRICTED REVENUES IN THE PERIODS IN WHICH THE AMOUNTS WERE RECEIVED.

NUL'S NET ASSETS AT JANUARY 1, 2013 AND DECEMBER 31, 2013 HAVE BEEN INCREASED, REFLECTING ADJUSTMENTS TO CORRECT THE RECOGNITION OF CONTRIBUTIONS AND OTHER REVENUE RECEIVED FOR WHICH THERE WERE PURPOSE OR TIME RESTRICTIONS FOR DONORS.

THE ORGANIZATION IS AMENDING THE FORM 990 BASED ON THE AUDITED FINANCIAL STATEMENTS ISSUED. PLEASE SEE THE ATTACHED SCHEDULE FOR DETAILED CHANGES.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE URBAN LEAGUE IS A NONPARTISAN, CIVIL RIGHTS AND COMMUNITY-BASED MOVEMENT THAT SERVES OVER TWO MILLION PEOPLE EACH YEAR, PROVIDING DIRECT SERVICES, RESEARCH, AND POLICY ADVOCACY TO HELP INDIVIDUALS AND COMMUNITIES REACH THEIR FULLEST POTENTIAL. PRIMARILY WORKING WITH AFRICAN-AMERICANS AND OTHER EMERGING ETHNIC COMMUNITIES, THE LEAGUE'S NETWORK OF OVER 100 PROFESSIONALLY STAFFED AFFILIATES IN OVER 36

Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

ATTACHMENT 1 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

STATES AND THE DISTRICT OF COLUMBIA ACROSS THE NATION WORKS TO CLOSE
EQUALITY GAPS FOR PEOPLE AT ALL ECONOMIC LEVELS AND STAGES OF LIFE,
AND GIVES CITIZENS A CHANCE TO GIVE BACK AS VOLUNTEERS.

ATTACHMENT 2FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>EXPENSES</u>	<u>REVENUE</u>
NATIONAL URBAN LEAGUE AFFILIATES	68,000.	1,879,722.	1,308,729.
HEALTH AND QUALITY OF LIFE EMPOWERMENT	436,413.	1,398,294.	
CIVIL RIGHTS AND RACIAL JUSTICE EMPOWERMENT		280,450.	
TOTALS	<u>504,413.</u>	<u>3,558,466.</u>	<u>1,308,729.</u>

ATTACHMENT 3FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CO, CT,
FL, GA, HI, IL, KS, KY, ME, MD, MA, MI,
MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,
RI, SC, TN, UT, VA, WA, WV, WI,

ATTACHMENT 4990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
COMMUNITY COUNSELING SERVICES CO., LLC P.O. BOX 27462 NEW YORK, NY 10002	FUNDRAISING SERVICES	270,200.
PATTERSON, BELKNAP WEBB & TYLER 1133 AVENUE OF AMERICAS	LEGAL SERVICES	600,728.

Name of the organization NATIONAL URBAN LEAGUE, INC.	Employer identification number 13-1840489
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ATTACHMENT 4 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
NEW YORK, NY 10036		
REGENCY COMMERCIAL CONSTRUCTION 12300 KIN COURT, SUITE F BELTSVILLE, MD 20705	CONSTRUCTION SERVICE	478,172.
WCP/FERN EXP SVC LLC 645 LINN STREET CINCINNATI, OH 45203	SHOW MGMT SERVICES	408,865.
VISION TECHNICAL GROUP INC. 216 BROOKE ROAD POTTSTOWN, PA 19464	LIGHTS/AUDIO SERVICE	842,476.

ATTACHMENT 5

FORM 990, PART VIII - INVESTMENT INCOME

<u>DESCRIPTION</u>	(A) <u>TOTAL REVENUE</u>	(B) <u>RELATED OR EXEMPT REVENUE</u>	(C) <u>UNRELATED BUSINESS REV.</u>	(D) <u>EXCLUDED REVENUE</u>
INTEREST INCOME	231,113.			231,113.
DIVIDEND INCOME	63,226.			63,226.
TOTALS	<u>294,339.</u>			<u>294,339.</u>

ATTACHMENT 6

FORM 990, PART IX - OTHER FEES

<u>DESCRIPTION</u>	(A) <u>TOTAL FEES</u>	(B) <u>PROGRAM SERVICE EXP.</u>	(C) <u>MANAGEMENT AND GENERAL</u>	(D) <u>FUNDRAISING EXPENSES</u>
SHOW MANAGEMENT SERVICES	750,302.	700,811.	0	49,491.
EVENT PLANNING/ARRANGING	447,785.	429,785.	8,000.	10,000.
OTHER	4,092,942.	3,432,027.	428,422.	232,493.

Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

ATTACHMENT 6 (CONT'D)FORM 990, PART IX - OTHER FEES

<u>DESCRIPTION</u>	<u>(A) TOTAL FEES</u>	<u>(B) PROGRAM SERVICE EXP.</u>	<u>(C) MANAGEMENT AND GENERAL</u>	<u>(D) FUNDRAISING EXPENSES</u>
TOTALS	<u>5,291,029.</u>	<u>4,562,623.</u>	<u>436,422.</u>	<u>291,984.</u>

National Urban League, Inc
 FYE 12/31/2013
 EIN: 13-1840489

Balance Sheet	NUL - restated	NUL - Original	Diff.
Assets			
Cash & Cash equivalents (see note 1)	8,917,271	8,917,271	-
Grants and pledges receivables, net	12,215,780	12,215,780	-
Franchise fee receivable, net	818,220	818,220	-
Prepaid expenses and other assets	823,951	823,951	-
Investments	21,172,723	21,172,723	-
PP&E, net	4,204,662	4,204,662	-
Total assets	48,152,607	48,152,607	-
Liabilities			
Accounts payable & accrued exp	4,465,142	4,465,142	-
Accrued payroll & vacation benefits (see note 2)	780,013	780,013	-
Accrued pension benefits costs (see note 2)	4,153,490	4,153,490	-
Accrued defined contribution costs (see note 2)	531,239	531,239	-
Deferred rent credit (see note 2)	313,353	313,353	-
Contract advances & other deposits	397,833	2,924,598	(2,526,765)
Loan payable	98,193	98,193	-
Total liabilities	10,739,263	13,266,028	(2,526,765)
Net assets			
Unrestricted	(1,298,664)	(1,298,664)	-
Temporarily restricted	18,689,943	16,163,178	2,526,765
Permanently restricted	20,022,065	20,022,065	-
Total net assets	37,413,344	34,886,579	2,526,765
Total liabilities and net assets	48,152,607	48,152,607	-
Note:			
(1) Cash and cash equivalents	6,073,671		
Cash - non-interest-bearing	2,843,600		
Savings and temporary cash investments	8,917,271		
Total			
(2) Other liabilities			
Accrued payroll & vacation benefits	780,013		
Accrued pension benefits costs	4,153,490		
Accrued defined contribution costs	531,239		
Deferred rent credit	313,353		
Total other liabilities	5,778,095		

Income Statement

	NUL - restated	NUL - Original	Diff.
Revenue			
Government grants and contracts	17,579,383	17,579,383	-
Contributions (see note 1)	22,207,261	20,158,996	2,048,265
Special events	1,742,800	1,817,800	(75,000)
Federated fundraising agencies	21,331	21,331	-
Program service fees (see note 2)	6,379,093	7,208,058	(828,965)
Investment income	294,339	294,339	-
Net gain from the sale of securities	1,399,719	1,399,719	-
Net loss from fundraising events	(107,957)	(107,957)	-
Other	709,814	859,814	(150,000)
Total revenue	50,225,783	49,231,483	994,300

Operating expenses

	NUL - restated	NUL - Original	Diff.
Program services			
Education empowerment	22,435,650	22,435,650	-
Education and youth empowerment	5,396,729	5,421,729	(25,000)
Civic engagement & leadership empowerment	8,336,640	8,336,640	-
Technical assistance to affiliates	1,879,722	1,879,722	-
Health and quality of life empowerment	1,398,294	1,398,294	-
Civil rights and racial justice empowerment	280,450	280,450	-
Urban empowerment	-	-	-
Total program services	39,727,485	39,752,485	(25,000)

Supporting services

Management and general	5,264,797	5,264,797	-
Fundraising	3,172,799	3,172,799	-
Total Expenses	48,165,081	48,190,081	(25,000)

Changes in net assets from operations

	2,060,702	1,041,402	1,019,300
--	-----------	-----------	-----------

Non-operating activities

Pension-related changes other than net periodic pension costs	3,387,748	3,387,748	-
Total non-operating activities	3,387,748	3,387,748	-

Unrealized gains on investments

Changes in net assets, as restated	209,839	209,839	-
Net assets (deficit), beginning of year, as restated	5,448,450	4,429,150	1,019,300
Net assets (deficit), end of year as restated	31,755,055	30,247,590	1,507,465

Note:

(1) Form 990, Part VIII, Line 1f

Contributions

Legacies and bequests

Total contribution reported on line 1f of Part VIII

(2) Form 990, Part VIII, Line 2g

Program service fees

Franchise fees

Total prog. Service revenue on line 2g

20,061,527

97,469

20,158,996

6,246,310

961,748

7,208,058

3,387,748

3,387,748

209,839

5,448,450

31,755,055

37,413,344

3,387,748

3,387,748

209,839

4,429,150

30,247,590

34,886,579

2,526,765

39,752,485

(25,000)

5,264,797

3,172,799

48,190,081

1,041,402

1,019,300

3,387,748

3,387,748

209,839

4,429,150

30,247,590

34,886,579

2,526,765

39,727,485

(25,000)

5,264,797

3,172,799

48,165,081

2,060,702

3,387,748

3,387,748

209,839

5,448,450

31,755,055

37,413,344

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

NATIONAL URBAN LEAGUE, INC.

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.

▶ See separate instructions.

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

Open to Public
Inspection

Name of the organization

NATIONAL URBAN LEAGUE, INC.

Employer identification number

13-1840489

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
(1) -----					
(2) -----					
(3) -----					
(4) -----					
(5) -----					
(6) -----					

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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) THE URBAN EMPOWERMENT FUND 120 WALL STREET 8TH FLOOR NEW YORK, NY 10005 90-0853595	SEE PART VII	NY	501(C)(3)	11A	NUL		X
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

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

Schedule R (Form 990) 2013

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) _____												
(2) _____												
(3) _____												
(4) _____												
(5) _____												
(6) _____												
(7) _____												

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 country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) _____									
(2) _____									
(3) _____									
(4) _____									
(5) _____									
(6) _____									
(7) _____									

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (e-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	THE URBAN EMPOWERMENT FUND	0	72,417.	COST
(2)				
(3)				
(4)				
(5)				
(6)				

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) _____													
(2) _____													
(3) _____													
(4) _____													
(5) _____													
(6) _____													
(7) _____													
(8) _____													
(9) _____													
(10) _____													
(11) _____													
(12) _____													
(13) _____													
(14) _____													
(15) _____													
(16) _____													

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

SCHEDULE R, PART II, COLUMN B

THE URBAN EMPOWERMENT FUND (UEF) IS A TAX-EXEMPT COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION WITH A FOCUS ON PROVIDING FINANCIAL PRODUCTS (LOANS) AND SERVICES TO MINORITY BUSINESS ENTERPRISES THAT ARE LOCATED PRIMARILY IN THE 10 MARKETS IN WHICH THE NATIONAL URBAN LEAGUE'S ENTREPRENEURSHIP CENTERS ARE LOCATED.

SCHEDULE R, PART V, LINE 2

THE AMOUNT OF \$72,417 OF TRANSACTIONS WITH RELATED ORGANIZATION CONSIST OF THE FOLLOWING:

SHARED EMPLOYEE SALARY/FRINGE BENEFIT FOR 2013	\$45,750
MANAGEMENT FEE CHARGED TO UEF FOR 2013	\$26,667