Possible Dup.

Form 990

Department of the Treasury Internal Revenue Service

HTA

Return of Organization Exempt From Income Tax

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

2016

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.

Open to Public Inspection

OMB No 1545-0047

<u>A</u>	For the	2016 ca	endar year, or tax year	beginning			, and e	nding					
В	Check if a	pplicable	C Name of organization	Jacksonville U	Jrban League Eco	onomic &	Community D)evelopi	D Emplo	yer Ident	fication	number	
	Address c	hange	Doing business as										
	Name cha	nge	Number and street (or P.0 903 West Union Street		t delivered to street a	address)	Room/suite		23-70951 E Teleph				
	Initial retui	_	City or town	<u>`</u>	State		ZIP code		•				
	'		Jacksonville		FL	•	32204	ŀ	(904) 723	3-4007			
닏	Final retum/	l	Foreign country name	Foreign	province/state/count	ty	Foreign postal	code				_	
믬	Amended								G Gross	receipts \$			328,483
Ш	Application	n pending	F Name and address of prin	•	Nost Union I as	kaanulla	EL 22204	l ''	s a group retu			=	X №
_	<i></i>		Richard Danford, Jr., P			4947(a)(1)]	1 ' '	all subordir No," attach a			Yes	No
_	Tax-exemp		X 501(c)(3) 501(c)	, , , ,	(insert no)	4947(a)(1)	or 527	Į.	•	`		,	
				rust Associ	ation Other ▶				tup exemption			logal daminia	
_	Form of on			rust Associa	ation Other			of forma	130	59 M	State of I	legal domicile	FL
	Part I	Briefly d	nmary escribe the organization	n's mission or	most significant	activities	ENU The	organiza	ation's ac	tivities i	nclude	the	
8		acquisiti	on of commercial and r	esidential real	property	erties are	leased prov	iding?	2110113 40	uvides i	iciade		
ZE C		low cost	office space and low in	come tenant	residence a nek	Mani Lin	on also prov	vides					
Activities & Governance	2		nis box ▶ ☐ if the or						than 25°	% of its	net ass	ets.	
Ö	3	Number	of voting members of the	he aovernina l	hody (Part VI. lir	וֹ (בֹּוֹ פּר	•	_		3			10
e	4	N1	and the above and a make a second			4. (0.44)	Wine ABY			4			10
<u> </u>	5	Total nu	or independent voting i mber of individuals emp mber of volunteers (est	oloyed in cale	ndar year 2016 ((Part V, II	ne-gar 14			5			2
₹	6	Total nu	mber of volunteers (est	ımate if neces	sary)		2226 .			6			
. ₹			related business reveni		. , ,,					7a	<u></u> _		0
	<u> b</u>	Net unre	lated business taxable	income from	Form 990-T, line	<u> 34 </u>			<u></u>	7b	<u> </u>		0
				AU 1				ļ	Prior Year			Current Yea	
Revenue	8		tions and grants (Part \					·	1	46,306	 	1	66,246
Revenue	9	_	service revenue (Part							0			16 00E
2 8	110		ent income (Part VIII, co venue (Part VIII, colum							93,800	 -		16,905
3	12		enue—add lines 8 throug							35,600 40,106	<u> </u>		45,332 28,483
()	13									0,100			0
	14		s and similar amounts paid (Part IX, column (A), lines 1–3)						0 89,365				
9	15		s, other compensation, employee benefits (Part IX, column (A), lines 5–10) .									90,121	
Expenses	16a	Professi	onal fundraising fees (F	Part IX, columi	n (A), line 11e).					0			0
90	b	Total fur	ndraising expenses (Pa	rt IX, column (D), line 25) 🕨		<u>. </u>						
ú	17		penses (Part IX, colum							91,248		2	27,187
	18		penses. Add lines 13-1	•						80,613		3	17,308
	19	Revenue	e less expenses. Subtra	act line 18 fron	n line 12	<u></u>	<u></u>	 -		59,493			11,175
ts or		Total as	note (Dort V. line 16)					Beginni	ing of Curre	49,957		End of Year	
A 86	20 21		sets (Part X, line 16) . bilities (Part X, line 26) .							56,461			02,058 16,722 -
ž	22		ets or fund balances. Su				· : · ·			93,496			85,336
	art II		nature Block	abtract into 2.			· · · · ·			.00, 100			00,000
Un	der penaltie	s of perjury	, I declare that I have examine						-		je		
and	belief, it is	true, corre	ct, and complete Declaration	of preparer (other	than officer) is based	d on all infor	mation of which	n preparer	has any kno	wledge			
Si	gn		Signature of officer	I tellet	takab.								
Here			1 1 1 1 1	MULIC TH	ו שען אינען		Presi	idant	Date	"]	-/0	7-20	17
			Richard Danford, Vf. V Type or print name and title		-//		Piesi	ident					
_		Print	Type preparer's name		Preparer's signatur	'e		Date				PTIN	
Pá	aid								l	Check			_
	eparer	Geo	rge A Spencer		George A Spen	ncer			0/2017	self-emp		P0078621	9
	se Only	Firm	's name ► George A. S						Firm's EIN	≥ 23-0	590896	<u> </u>	
			's address ➤ 3450 Dunn						Phone no.		<u> </u>		
Ma	ay the IR	S discus	s this return with the pre	eparer shown	above? (see ins	structions)		<u></u>	<u> </u>	<u> [</u>	Yes [X No
E	- Banan	and Dad	uction Act Notice and t	he constate in	ot-uctions.							5am 99	0 (2040)

Form 9	990 (2016) Jacksonville Urban League Economic & Community Development Foundation 23-7095139	Page Z
Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	. [_]
1	Briefly describe the organization's mission.	
	The organization mission is to provide development services related to establishing	
	affordable housing opportunities and offer economic development projects in low income	
	communities.	
2	Did the organization undertake any significant program services during the year which were not listed on	
_	the prior Form 990 or 990-EZ?	es X No
	If "Yes," describe these new services on Schedule O.	, o <u>E</u>
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
3		es X No
		S V NO
	If "Yes," describe these changes on Schedule O	h
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	₃rs,
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code.) (Expenses \$ 147,971 including grants of \$ 160,066) (Revenue \$	160,066)
	Economic Development Program provides economic development client counseling services.	
4b	(Code) (Expenses \$ 142,562 including grants of \$ 0) (Revenue \$	145,332)
	Community Development Program provides affordable housing to clients.	

		- -
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	<u> </u>	
	<u></u>	
4d	, •	
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)	

290,533

Total program service expenses

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II			V
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4	├	X
3	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	5		X
v	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	-		^
	complete Schedule D, Part III	8	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? If "Yes," complete Schedule D, Part IV.	9	x	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10	<u>. </u>	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			の変え
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	×	
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? If "Yes," complete Schedule D, Part VII	11b		Х
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? If "Yes," complete Schedule D, Part VIII	11c		_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	1	1	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		<u>X</u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		_X_
τ	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)? If "Yes," complete Schedule D, Part X	446	1	v
1 22	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	-	<u> </u>
120	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"		1	
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	}	· j	
	fundraising, business, investment, and program service activities outside the United States, or aggregate	j	1	
-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		<u> </u>
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? If "Yes," complete Schedule F, Parts II and IV.	1 4=	j	v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		_X_
13	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		T	
46	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	į	Х

Par	V Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	[1	
	employees? If "Yes," complete Schedule J	23		x
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	 -		 ^`
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	1		ļ
	24b through 24d and complete Schedule K If "No," go to line 25a	24a	1	×
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		x
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	270		 ^-
C	·	240	ľ	
	to defease any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		 ^-
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			1
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or		}	
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	1		l
	current or former officers, directors, trustees, key employees, highest compensated employees, or	i i	(ł
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			[
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	1		}
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		L X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		i	İ
	Schedule L, Part IV	28b	<u> </u>	<u> </u>
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	}	ļ	•
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	{		
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	[L _X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		LX_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	ł	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
-	III, or IV, and Part V, line 1	34	ł	l x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled		T	
-	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ļ)
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	1	-	
J J	organization? If "Yes," complete Schedule R, Part V, line 2	36	l	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1	 	
JI	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	1	ł	1
	VI	37	Ì	×
		\ <u>~</u>	 	† ^`
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	38	~]
	19? Note. All Form 990 filers are required to complete Schedule O		<u> 220</u>	(2016)
		rom	330	(2010)

Form 990 (2016)

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

Form 990 (2016) Part VI

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 10			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar	!		
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		-	-
	any other officer, director, trustee, or key employee?	2	L	<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_		
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
_	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following:			
a	The governing body?	8a 8b	X	
b		80		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Soot	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C		<u> </u>	
Sect	ion B. Poncies (This Section B requests information about policies not required by the internal Revenue C	oue.	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	-155	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10Ь		x
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	 -
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	-
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	1		
а	The organization's CEO, Executive Director, or top management official.	15a	Х	<u> </u>
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	,		J
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	}		L
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	Į		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			1
	the organization's exempt status with respect to such arrangements?	16b	L	L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed FL 1000 (1000 FL)			
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			
40	Own website Another's website X Upon request Other (explain in Schedule O)	av ==	d	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest poli-	су, аг	iu	
20	financial statements available to the public during the tax year.	_		
20	State the name, address, and telephone number of the person who possesses the organization's books and records George A. Spencer, CPA, P.A. (904) 765-7918			
	George A. Spencer, CPA, P.A. (904) 765-7918			

Form 990 (2016)	Jacksonville Urban League Econo	mic & Communi	ty De	velo	pme	ent l	Found	<u>datı</u>	on	23-7095	139Page 7
Part VII	Compensation of Officers, Dire									ensated	
	Employees, and Independent C						•				
	Check if Schedule O contains a r	esponse or no	te to	an	y lir	ne II	n this	Pa	art VII		<u></u>
Section A.	Officers, Directors, Trustees, Key E	mployees, and	High	est	Cor	npe	nsat	ed E	mployees		
1a Complete	this table for all persons required to be	listed. Report co	mper	nsat	on :	for t	he ca	len	dar year ending	with or within the)
organization's	s tax year.										
of compensat List all List the who received organization a	of the organization's current officers, d ion. Enter -0- in columns (D), (E), and (of the organization's current key emplo organization's five current highest con reportable compensation (Box 5 of For and any related organizations. of the organization's former officers, ke	F) if no compens byees, if any. Se npensated emplo m W-2 and/or Bo	sation e inst oyees ox 7 d	wa ruct s (ot of Fo	s pa ions her orm	aid. for thai 109	defin n an (9-Ml	itior offic SC)	n of "key employ er, director, trust of more than \$1	ee." lee, or key emplo 00,000 from the	oyee)
\$100,000 of re	eportable compensation from the organ	ization and any	relate	d o	rgar	nizat	tions.				
	of the organization's former directors of more than \$10,000 of reportable compo						-	•			the
compensated	n the following order individual trustees employees, and former such persons.										
Check th	is box if neither the organization nor an	y related organiz	ation	cor	npe	nsa	ted a	ny c	urrent officer, du	rector, or trustee	
	(A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) compensation							(E) Reportable compensation	(F) Estimated amount of
	line)	Individual trustee or director	_	Officer	Key employee		Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
(1) Ray Alf	red	2.00									
Board of Dire	ctor	0.00		<u> </u>						<u></u>	
3-6	line Williams	2.00	1	l	l		l		į		
Board of Dire		0.00		 _	!	 	 	ļ.,	<u> </u>		
	rper-Vice Chair	2.00	1]	1	1	}	Ì	}		
Board of Direc		2.00		├	_	├	 	-	}		
(4) Jacque Secretary	line noimes	0.00		1	1	ŀ	}	1			
(5) Bingha	m Parkinson	2.00	_	┞╌	-	-		 -			
Board of Direct		0.00		l	l	ļ	Į	l	Į		
(6) Lock Ire		2.00		Ι-	_	┝╌	_	┢			
Board of Direct		0.00	•	1	Ì]	1			
(7) Phil Pa		2.00		\vdash							
4-6	ctor-Chairman	0.00		1	1	1	İ	,			
(8) Robert		2.00			Г			ļ —			
Board of Dire	ctor	0.00		L	L	L		L			 <u></u>
- (9) Richard	Danford, Jr	15.00	_	Г		ļ _					
President	·	15.00		L	X	X		L	18,000	84,880	
	A. Spencer, CPA, P.A.	10.00		1		_					
CFO - Consul	tant	20.00	<u> </u>		X	X	L		24,000	48,000	
(11)		I	1	1	į .	ı	1	l			

(12)

Pa	art VII Section A. Officers, Directors, Tr	ustees, Key Em	ployees, and Highest Compensated Employees (continued										
	(A) Name and title	(B) Average hours per week (list any	box,	unle: er an	Pos neck ss pe d a d	rson	than o	an	(D) Reportable compensation from	(E) Reportable compensation from related	E:		
		hours for related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	(ey employee	Highest compensated employee	omer	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org an	other spensate om the anizate de relate anizate de relate anizate de relate anizate de relate anizate de relate anizate de relate anizate de relate anizate de relate anizate de relate de	on ed
(15)									ļ .				
(16)		 	_					-					
(17)			-					-				<u> </u>	
(18)				-	-		-	-					
(19)				-					 	<u> </u>			
(20)			-	-	-			-					
(21)				-	_			_					
		<u> </u>		_	_								
(23)			-	-	 			-					
		<u> </u>	_	-		_							
(25)		 	_	-	_		_	-					
1b	Sub-total	<u> </u>	<u> </u>	L	<u> </u>	L		_	42,000	132,880	 		0
C	Total from continuation sheets to Part VII, S	section A						•	0 42,000	0			0
d 2	Total (add lines 1b and 1c)							vec		132,880 ,000 of	L		
	reportable compensation from the organization	<u> </u>			0							Yes	Nia
3	Did the organization list any former officer, dire					e, c	r higi	hes	t compensated			Tes	_
4	employee on line 1a? If "Yes," complete Scheol For any individual listed on line 1a, is the sum					ond o	other	con	nnensation from		3		<u>_x</u>
•	the organization and related organizations greater									ተ			
_	individual				•	٠.		•			4		X
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "Y	•			-			_			5	1	X
Sec	tion B. Independent Contractors							_					
1	Complete this table for your five highest compecompensation from the organization. Report coyear.										tax		
	(A) Name and business add	dress				_			(B) Description of ser	vices ((C Compen		
													0
													0
													0
				A.L.	•	lat-			Vba anasisas				0
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the	-	ted to ►	เกด	se l	uste	d abo O	ve)	wno received	ĺ			

Par	t VIII	Statement of Revenue Check if Schedule O contains a response of	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
9 6	1a	Federated campaigns	a 0				T
Contributions, Gifts, Grants and Other Similar Amounts	b		b 0				
e, G	С		c 0				į
Gift lar,	d	Related organizations	<u> </u>				
in 3	е	Government grants (contributions) 1	e 0				
er S	f	, g., g., g., g., g., g., g., g., g., g.					1
물 등		L	f 166,246				
Cor	g		<u>0</u>	466.046			
	h	Total. Add lines 1a-1f	Business Code	166,246			
Program Service Revenue	2a			o	-	-	
Seve	b			0			
8	c			0			
PIV.	d		•	0			
E .	е			0			
ogra	f	All other program service revenue		0			
<u> </u>	g	Total. Add lines 2a-2f		0			
	3	Investment income (including dividends, interes					
		other similar amounts)		16,905		ļ	
	4	Income from investment of tax-exempt bond pr		0		-	
	5	Royalties	(II) Personal	0		 	
	6-		· · ·				
	6a b	Gross rents	02				
	C	Rental income or (loss)	32 0				
	ď	Net rental income or (loss)		145,332			
	7a	Gross amount from sales of (i) Securities	(II) Other	140,002			
		assets other than inventory	0 0				
	b	Less cost or other basis					
		and sales expenses	0 0				
	С	Gain or (loss)	0 0			_	
	d	Net gain or (loss)	. <u></u>	0			
Other Revenue	8a	Gross income from fundraising events (not including \$0 of contributions reported on line 1c). See Part IV, line 18	a 0				
ŧ	b	Less ⁻ direct expenses	b0			- -	
0		Net income or (loss) from fundraising events .	<u> </u>	0			
		Gross income from gaming activities.				İ	
-		- See Part IV, line 19.					
	b		b [0	-	-		
		Net income or (loss) from gaming activities	· · · · · · · · · · · · · · · · · · ·	0		 	
	IVa	Gross sales of inventory, less returns and allowances	a 0				
	h		0			ì	
		Net income or (loss) from sales of inventory	- <u> </u>	ام			* ** - * **
	<u> </u>	Miscellaneous Revenue	Business Code				
	11a			0	=		
	b			0			
	С			0			
	d	All other revenue		0			
	е	Total. Add lines 11a-11d		0			
	12	Total revenue. See instructions		328,483	0	0	0

	990 (2016) Jacksonville Urban League Economic & C rt IX Statement of Functional Expenses			23-709	5139 Page
Sect	ion 501(c)(3) and 501(c)(4) organizations must complete all	columns. All other or	ganizations must c	omplete column (A)	
	Check if Schedule O contains a response or note	to any line in this Pa	rt IX		[
	not include amounts reported on lines 6b, 7b, 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 domestic organizations	_			
	domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign	ĺ		ĺ	
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			<u> </u>
5	Compensation of current officers, directors,	. 1			
	trustees, and key employees	48,000	48,000	0	. <u> </u>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2 <u>7,</u> 178	27,178		

-	domestic governments. See Part IV, line 21	o			
2	Grants and other assistance to domestic				-
-	individuals. See Part IV, line 22	ol			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0	Ì		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
3	trustees, and key employees	48,000	48,000	0	
6	Compensation not included above, to disqualified	40,000			
· ·	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	27,178	27,178		
7	Other salaries and wages	27,178			<u> </u>
8	Pension plan accruals and contributions (include				
0	, , ,	o			
•	section 401(k) and 403(b) employer contributions)	9,286	0.206		
9	Other employee benefits		9,286	<u> </u>	
10	Payroll taxes	5,657	5,657		
11	Fees for services (non-employees)	52,000	40,400	7.500	
a	Management	53,929	46,429	7,500	
b	Legal	3,430		3,430	
C	Accounting	10,800	8,000	2,800	-
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
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.)	0		<u> </u>	
12	Advertising and promotion	652	652		
13	Office expenses	8,990	5,370	3,620	
14	Information technology	3,122	1,024	2,098	
15	Royalties	0			
16	Occupancy	13,222	13,222		
17	Travel	205		205	·
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	1,469		1,469	<u> </u>
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	32,950		0	0
23	Insurance	18,149	16,334	1,815	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Building repairs	42,764	42,764		
b	Utilities	27,859	27,859		<u> </u>
C	Taxes & licenses	2,838		2,838	
d	Audit fee	6,000	5,000	1,000	
е	All other expenses	808	808		
25	Total functional expenses. Add lines 1 through 24e	317,308	290,533	26,775	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here ▶ if				
	following SOP 98-2 (ASC 958-720)				, , , , , , , , , , , , , , , , , , , ,
_					

23-7095139

Form 990 (2016)

P	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X .	· <u>.</u>		X
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	189,962	1	180,788
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	5,775	4	0
	5	Loans and other receivables from current and former officers, directors,			
	ļ	trustees, key employees, and highest compensated employees.	_		_
		Complete Part II of Schedule L		5_	
	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			
ħ	ł	organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	0	7	0
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
	1	other basis. Complete Part VI of Schedule D 10a 1,410,443			
	Ь	Less accumulated depreciation 10b 294,424	1,148,969	10c	1,116,019
	11	Investments—publicly traded securities	0	11	0
	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	5,251	15	5,251
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,349,957	16	1,302,058
	17	Accounts payable and accrued expenses	25,211	17	16,722
	18	Grants payable		18	
	19	Deferred revenue	31,250	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D [21	
8	22	Loans and other payables to current and former officers, directors,			
Liabilities	}	trustees, key employees, highest compensated employees, and			
뎙		disqualified persons. Complete Part II of Schedule L		22	
ت	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	
	25	Other liabilities (including federal income tax, payables to related third	_		
	1	parties, and other liabilities not included on lines 17-24). Complete			
	ļ	Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	56,461	26	16,722
88		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
Ĕ	27	Unrestricted net assets	1,272,851	27	1,264,691
ğ	28	Temporarily restricted net assets	20,645	. 28	- 20,645
- <u>-</u> <u>-</u>	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC958), check here and complete lines 30 through 34.			
鞍	30	Capital stock or trust principal, or current funds	-	30	/
38	31	Paid-in or capital surplus, or land, building, or equipment fund.		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ž	33	Total net assets or fund balances	1,293,496		1,285,336
_	34	Total liabilities and net assets/fund balances	1,349,957		1,302,058

					,
Part	990 (2016) Jacksonville Urban League Economic & Community Development Foundation XI Reconciliation of Net Assets	2:	3-7095139	Pag	ge 12
	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		328	 3,483
2	Total expenses (must equal Part IX, column (A), line 25)	2		317	7,308
3	Revenue less expenses. Subtract line 2 from line 1	3		1	1,175
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,293	3,496
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-19	9,335
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,]]			
	column (B))	10		1,285	5,336
Part					
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u></u>	•	<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990 Cash _X Accrual Other		_		[
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				l
	Schedule O.		-		 _
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		1 1		ł
	reviewed on a separate basis, consolidated basis, or both				ļ
	Separate basis X Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a) !		ļ
	separate basis, consolidated basis, or both				Į.
	Separate basis X Consolidated basis Both consolidated and separate basis				i
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of]
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?	•	. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				ł
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	<u> </u>	3b		X
			Form	990	(2016)

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. ► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

Inspection

Name	of th	ne organization					Employer Identificatio	n number
Jack	son	ville Urban League Economic &	Community Develo	pment Foundation			23-70	095139
Par		Reason for Public Char	ity Status (All or	ganizations must co	mplete t	his part.)	See instructions.	
The o	orga	anization is not a private foundat	·			-	•	
1	Ц	A church, convention of church	es, or association o	f churches described i	n section	170(b)(1)	(A)(i).	
2	Ш	A school described in section	1 70(b)(1)(A)(ii). (Att	ach Schedule E (Form	1 990 or 99	90-EZ).)		
3		A hospital or a cooperative hos	pital service organia	zation described in sec	ction 170(b)(1)(A)(ii	i).	
4		A medical research organizatio	n operated in conju	nction with a hospital o	described	ın section	170(b)(1)(A)(iii). E	nter the
		hospital's name, city, and state	,					
5		An organization operated for the section 170(b)(1)(A)(iv). (Com		e or university owned	or operate	ed by a go	vernmental unit des	cribed in
6		A federal, state, or local govern	ment or governmer	ntal unit described in se	ection 17	0(b)(1)(A)	(v).	
7		An organization that normally redescribed in section 170(b)(1)			om a gove	rnmental	unit or from the gene	eral public
8		A community trust described in	section 170(b)(1)(A)(vi). (Complete Part	!! }			
9		An agricultural research organi or university or a non-land-grar university	zation described in at college of agricult	section 170(b)(1)(A)(i) ure (see instructions).	k) operate Enter the	d in conju name, city	nction with a land-gr y, and state of the co	ant college ollege or
10	X	An organization that normally receipts from activities related to support from gross investment acquired by the organization af	to its exempt function income and unrelated	ns—subject to certain ed business taxable in	exception come (les	is, and (2) s section	no more than 33 1/5511 tax) from busine	3% of its
11		An organization organized and	operated exclusive	ly to test for public safe	ety. See s	ection 50	9(a)(4).	
12		An organization organized and of one or more publicly support Check the box in lines 12a thro	ed organizations de	scribed in section 50	9(a)(1) or	section 5	09(a)(2). See sectio	n 509(a)(3).
_	ŗ	-	-	• • • • • • • • • • • • • • • • • • • •			•	
а	L	Type I. A supporting organiz the supported organization(s organization. You must con	s) the power to regu	larly appoint or elect a				
b	{	Type II. A supporting organic control or management of the organization(s) You must control to the control organization organization (s)	e supporting organi	zation vested in the sa				
C	[Type III functionally integration its supported organization(s)	ated. A supporting of	organization operated i	in connect	ion with, a	and functionally integ	grated with,
d	[Type III non-functionally in that is not functionally integr	itegrated. A suppor ated. The organizat	ting organization opera ion generally must sat	ated in coi isfy a distr	nnection w	vith its supported org	janization(s) tentiveness
	r	requirement (see instruction						
e	Ļ	Check this box if the organiz functionally integrated, or Ty					Type I, Type II, Typ	e III
f		Enter the number of supported			ng organiz	.auon.		
q		Provide the following information						· · · L
		Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization or governing ment?	(v) Amount of monetary support (see instructions)	(vI) Amount of other support (see - instructions)
					Yes	No		
(A)								
(B)					†			
(C)					 			
(D)					 			
					<u> </u>			
(E)				 	{			
Total							0	0

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

	tion A. Public Support	 		,			
Caler	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and	ł	ì	ì	4	ł	
	membership fees received. (Do not	}	į	į	,	Ì	
	include any "unusual grants.")	251,241	99,204	219,283	161,870	165,066	896,664
	Tax revenues levied for the organization's	}	S	ſ	ļ	}	
	benefit and either paid to or expended on	j	})	
	its behalf						0
3	The value of services or facilities	Į.	ł		}	1	
	furnished by a governmental unit to the	{	1			†	_
	organization without charge						0
	Total. Add lines 1 through 3	251,241	99,204	219,283	161,870	165,066	896,664
5	The portion of total contributions by each	ļ	j	}	\		
	person (other than a governmental unit	}]		
	or publicly supported organization)	l		i		i i	
	included on line 1 that exceeds 2%	l		l	Į.	1	
	of the amount shown on line 11,	ł	ì	•	ł	1	
	column (f)						200.004
	Public support. Subtract line 5 from line 4.					-	896,664
	tion B. Total Support ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
_	· ' ' - ' - '						
7	Amounts from line 4	251,241	99,204	219,283	161,870	165,066	896,664
8	Gross income from interest, dividends,	į.	ł	{	ł	ł	
	payments received on securities loans, rents, royalties and income from similar	f		İ	1		
	sources	261,205	345,466	123,235	209,485	145,332	1,084,723
9	Net income from unrelated business	201,203	343,400	125,255	203,403	143,332	1,004,723
9	activities, whether or not the business is)	1	,			
	regularly carried on	1	1	}			0
10	Other income. Do not include gain or						
10	loss from the sale of capital assets	1	{	}		<u> </u>	
	(Explain in Part VI.)	f	1			1	0
11	Total support. Add lines 7 through 10						1,981,387
12	Gross receipts from related activities, etc. (se	ee instructions)				12	
13	First five years. If the Form 990 is for the or						
	organization, check this box and stop here .						▶ □
Sec	tion C. Computation of Public Su						
_	Public support percentage for 2016 (line 6, c			<u>))</u>		14	45.25%
	Public support percentage from 2015 Sched					15	42.99%
	33 1/3% support test—2016. If the organiz						
IVa	and stop here. The organization qualifies as						▶ X
h	33 1/3% support test—2015. If the organiz						لنفا -
IJ	box and stop here. The organization qualified						
47.							
1/a	10%-facts-and-circumstances test—2016 is 10% or more, and if the organization meet						
	Part VI how the organization meets the "fact						
	organization						▶ []
b	10%-facts-and-circumstances test—2015	. If the organization					
	15 is 10% or more, and if the organization m	eets the "facts-and	-circumstances" te:	st, check this box a	and stop here. Ex		
	Part VI how the organization meets the "fact	s-and-circumstance	es" test. The organi	zation qualifies as	a publicly		
	supported organization						▶ 🔲
18	Private foundation. If the organization did r						
	instructions	<u> </u>	<u> </u>	<u></u>	<u> </u>		<u></u>
						Cabadula A (Farm	

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants ")	251,241	99,204	219,283	161,870	165,066	896,664
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities	1			n	1	
	furnished in any activity that is related to the organization's tax-exempt purpose	255,300	341,340	223,369	209,412	145,332	1,174,753
3	Gross receipts from activities that are not an	200,000	011,010	220,000	250,112	1,0,002	1,11,4,100
·	unrelated trade or business under section 513	j - 1]			0
4	Tax revenues levied for the organization's						<u>~</u>
•	benefit and either paid to or expended on	,					
	its behalf	,					0
5	The value of services or facilities						<u> </u>
3	furnished by a governmental unit to the			i		i	
	organization without charge	, .		ļ			0
6	Total. Add lines 1 through 5	506,541	440,544	442,652	371,282	310,398	2,071,417
	Amounts included on lines 1, 2, and 3	000,041	140,044	112,002	071,202	0.10,000	2,011,411
10	received from disqualified persons	. 1				1	0
_	Amounts included on lines 2 and 3 received						<u>~</u>
D		,				1	
	from other than disqualified persons that	i 1				j	
	exceed the greater of \$5,000 or 1% of the	i l				}	0
_	amount on line 13 for the year	0	0	0	0	0	0
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)	i 1				į	2,071,417
Sec	tion B. Total Support				·		2,071,417
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	506,541	440,544	442,652	371,282	310,398	2,071,417
	Gross income from interest, dividends,	000,041	-110,011	442,002	0, 1,202	010,000	2,011,411
IVa	· · · · · · · · · · · · · · · · · · ·	, (,		1	
	payments received on securities loans, rents, royalties and income from similar sources.	5,905	4,126	13,766	73	16,905	40,775
h	Unrelated business taxable income (less		7,120	10,700	· · · · · · · · · · · · · · · · · · ·	10,000	40,773
b	section 511 taxes) from businesses			i i		Ţ	
	·	,	ı			 	0
_	acquired after June 30, 1975	5,905	4,126	13,766	73	16,905	40,775
	Add lines 10a and 10b	3,903	4,120	13,700		10,905	40,775
11	activities not included in line 10b, whether	, (i i		
	or not the business is regularly carried on .	,				}	0
12	Other income. Do not include gain or						
12	loss from the sale of capital assets	i l		ļ			
	(Explain in Part VI.)	, (,	ł	{	^
13	Total support. (Add lines 9, 10c, 11,	,					0
	and 12.)	512 446	444,670	456;418	371,355	327,303	2,112,192
14		rganization's first, s	econd, third, fourth				2,112,102
•	organization, check this box and stop here .	~		-		•	▶□
Sec	ction C. Computation of Public Su						
15	Public support percentage for 2016 (line 8, c			f))		15	98.07%
16	Public support percentage from 2015 Sched				r	16	98.83%
	tion D. Computation of Investmen			 			22.0078
17	Investment income percentage for 2016 (line			olumn (f))		17	1.93%
18	Investment income percentage from 2015 Se					18	1.17%
	33 1/3% support tests—2016. If the organi						
	not more than 33 1/3%, check this box and s						▶ 🗶
b	33 1/3% support tests—2015. If the organi						
	line 18 is not more than 33 1/3%, check this	box and stop here	. The organization	ı qualifies as a publ	icly supported orga	ınızatıon	▶ 🛄
20	Private foundation. If the organization did r	not check a box on	line 14, 19a, or 19	b, check this box a	nd see instructions		▶□

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1	-	_
}			
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	3b	,i	
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}			
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- {	4b		
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	4c		<u> </u>
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	9b		
	9c		-
	- 10a		
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	10b	l	<u> </u>

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?]
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a	L_	
b	A family member of a person described in (a) above?	11b	<u> </u>	<u> </u>
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	<u> </u>	
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		ļ	l
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities If the organization had more than one supported organization,		i	ĺ
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1	ļ	}
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	1	
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			}
	VI how providing such benefit carned out the purposes of the supported organization(s) that operated,		l	
	supervised, or controlled the supporting organization	2	<u> </u>	1
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		l	
	or management of the supporting organization was vested in the same persons that controlled or managed]		Ì
	the supported organization(s).	1		
Secti	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		1	1
_	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		l	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	i		l
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	一		\vdash
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	1	ĺ	
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	-		├─
3	significant voice in the organization's investment policies and in directing the use of the organization's	1		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Secti	ion E. Type III Functionally Integrated Supporting Organizations	1 3	Ь	Ь
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	cuon	S)	
а	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ınstrud	ctions)
2	Activities Test Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	110
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		-	
	those supported organizations and explain how these activities directly furthered their exempt purposes,			1
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	- <u>2a</u>		
U	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		ļ i	
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	- · · · · · · · · · · · · · · · · · · ·			لـ ـا
2	activities but for the organization's involvement. Parent of Supported Organizations. Answer (a) and (b) below.	2b		
3	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>			i
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a	\vdash	
D	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		
	at the dealers of a desired in 100, addition in a dealer and total biglion of the ordented in this tadgit	70		

Schedule A (Form 990 or 990-EZ) 2016 Jacksonville Urban League Economic & Commun	ity De	evelopment Foundation23-7	<u>095139 Page 6</u>
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgar	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trus	st on Nov 20, 1970 (explain	ın Part VI). See
instructions. All other Type III non-functionally integrated supporting organ	nzatio	ons must complete Sections	A through E
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4	0	0
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	o	0
e Discount claimed for blockage or other	1	ļ	
factors (explain in detail in Part VI)	_		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	0	0
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by .035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	o	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
2 Enter 85% of line 1	2		0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
5 Income tax imposed in prior year	5		·
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	1 7		
emergency temporary reduction (see instructions).	6	[0
7 Check here if the current year is the organization's first as a non-functional	y inte	egrated Type III supporting	organization (see

instructions).

0

0

0

Breakdown of line 7:

Excess from 2013.

Excess from 2014.

Excess from 2015.

Excess from 2016.

b

	Jacksonville Urban League Economic & Community Development Foundation23-7095139	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part	_
	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section	
	B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b,	
	3a, and 3b, Part V, line 1, Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8, and Part V, Section E,	
	lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)	
	mice 2, e, and e. Alee complete time part to any additional information. (See instruction.)	

Schedule A (Form 990 or 990-EZ) 2016

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

	nent of the Treasury	► Attach to Form 990.	-41 I4 ·		Inspection
	Revenue Service Information about Schedul of the organization	e ה (רסוש Pard its instruc	ctions is at wy	ww.irs.gov/torm990. Employer identification	
		u Dougloomant Coundation		' -	
	sonville Urban League Economic & Communit Organizations Maintaining Don		har Cimile-	23-70	
eli	Organizations Maintaining Don Complete if the organization answ				.
	Complete if the organization arisv				
	Total number of and of upon	(a) Donor advised fur	ias	(b) runds and	other accounts
 	Total number at end of year				
<u>?</u> }	Aggregate value of contributions to (during year) .				
	Aggregate value of grants from (during year) .				
ւ 5	Aggregate value at end of year Did the organization inform all donors and do	por advisors in writing that th	o oposta beld	in departed used	
	funds are the organization's property, subject				☐ Yes ☐ No
i	Did the organization inform all grantees, don				Yes No
'	used only for charitable purposes and not for		-		
	purpose conferring impermissible private bei				Yes No
_			· · · · ·	 	iesnc
ar	Conservation Easements.		D (D ():	_	
	Complete if the organization answ)	
	Purpose(s) of conservation easements held	· - · · -	- · · · · · · · · · · · · · · · · · · ·		
	Preservation of land for public use (e.g., rec	reation or education)	₹	on of a historically imp	
	Protection of natural habitat	L_		on of a certified historic	c structure
	Preservation of open space				
:	Complete lines 2a through 2d if the organiza	tion held a qualified conserva	ition contributi	on in the form of a cor	nservation
	easement on the last day of the tax year.			Held a	the End of the Tax Yea
a	Total number of conservation easements .			2a	
b	Total acreage restricted by conservation eas	ements		2b	
C	Number of conservation easements on a cer	tified historic structure include	ed in (a) .	. 2c	
d	Number of conservation easements included	l in (c) acquired after 8/17/06,	, and not on a		
	historic structure listed in the National Regist			2d	
	Number of conservation easements modified	l, transferred, released, exting	guished, or tei	rminated by the organi	ization during
	the tax year ▶				
	Number of states where property subject to				
	Does the organization have a written policy r				
	violations, and enforcement of the conservat				Yes No
	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations	s, and enforcing	g conservation easemen	ts during the year
	•				
	Amount of expenses incurred in monitoring, inspe	ecting, handling of violations, an	d enforcing con	iservation easements du	iring the year
	\$				•••
	Does each conservation easement reported	· · · · · · · · · · · · · · · · · · ·	•	or section 170(h)(4)(E	_
					Yes No
	In Part XIII, describe how the organization re	-		•	
	balance sheet, and include, if applicable, the	-	ganization's fir	ianciai statements tha	t describes
	the organization's accounting for conservation Organizations Maintaining Coll		I Tananuraa	an Othan Cimilan	Appeto
a٢					Assets.
_	Complete if the organization answ				
a	If the organization elected, as permitted under	er SFAS 116 (ASC 958), not t	to report in its	revenue statement an	d balance sheet
	works of art, historical treasures, or other sin				
	of public service, provide, in Part XIII, the tex				
b	If the organization elected, as permitted under	er SFAS 116 (ASC 958), to re	eport in its rev	enue statement and ba	alance sheet
	works of art, historical treasures, or other sin	•	hibition, educa	ition, or research in fui	rtherance
	of public service, provide the following amou				
	(i) Revenue included on Form 990, Part VIII	, line 1			
	(ii) Assets included in Form 990, Part X			<i>.</i> > \$ _	
2	If the organization received or held works of	art, historical treasures, or otl	her sımılar ass	sets for financial gain,	provide the
	following amounts required to be reported ur				
а	Revenue included on Form 990, Part VIII, lin	e1		\$ _	
Ь	Assets included in Form 990, Part X			> \$ -	

	Jacksonville Urban Leagu							Page Z
Part								<u>1)</u>
3	Using the organization's acquisition, accession	on, and other records	s, check any	of the followi	ng that are a significan	it use of its	s	
	collection items (check all that apply)	_	_					
а	Public exhibition	d [Loan	or exchange	programs			
b	Scholarly research	е [Other					
С	Preservation for future generations							
4	Provide a description of the organization's co XIII.	illections and explain	how they for	urther the orga	anization's exempt purp	ose in Pa	ırt	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than to					□ v ,	es X	No
Part				9411124101130			<u>" </u>	
Fail	Complete if the organization answ 990, Part X, line 21.		m 990, Pa	art IV, line 9,	or reported an amo	unt on F	orm	
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for cont	ributions or ot	her assets not			
	included on Form 990, Part X?		•			☐ Ye	s X	No
b	If "Yes," explain the arrangement in Part XIII							
						Amount		
C	Beginning balance				1c			0
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance							0
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escr	ow or custodi	al account liability?	_	s X	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation h	as been provi	ded on Part XIII			i
Part			<u>. </u>	· · · · · ·				
I all	Complete if the organization answ	vered "Yes" on Fo	m 990 Pa	art IV line 10	า			
			Pnor year	(c) Two years		ck (e) Ec	ur years	hack
40	Beginning of year balance	O (D)	0		Dack (d) Three years bar	* (8)10	ui years	- Dack
1a b	Contributions			 	 - ·			
	Net investment earnings, gains,							
С	and losses	l						
	· ·			 				
d	Grants or scholarships							
е	Other expenditures for facilities			ļ		ŀ		
	and programs			 		_ 		
f	Administrative expenses			 				
g	End of year balance			<u> </u>		0]		0
2	Provide the estimated percentage of the curr			olumn (a)) nei	a as			
а	Board designated or quasi-endowment							
b	Permanent endowment	<u>_</u> %						
C	Temporarily restricted endowment	<u>%</u>						
_	The percentages on lines 2a, 2b, and 2c sho	-						
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are	e held and adr	ninistered for the	1	V	
	organization by					[<u>a</u> (i)	Yes	No
	(i) unrelated organizations					3a(i)		 -
	(ii) related organizations					3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	-				3b		L
4	Describe in Part XIII the intended uses of the		wment fund	<u>s</u>				
Part								
	Complete if the organization answ	vered "Yes" on For	<u>rm 990, Pa</u>	art IV, line 1	la. See Form 990, F	'art X, lin	<u>ie 10.</u>	
	Description of property	(a) Cost or other basis		ost or other	(c) Accumulated	(d) B	ook valu	е
		(investment)		is (other)	depreciation	<u> </u>		
1a	Land	\- 	0	248,695				8,695
b	Buildings		<u> </u>	1,126,130	279,055			7,075
C	Leasehold improvements	<u></u>	0	26,848	8,845	<u> </u>		8,003
d	Equipment		0	8,770	6,524	<u> </u>		2,246
<u>e</u>	Other	L	0	0	0			0
Total	Add lines 1a through 1e (Column (d) must e	auai ⊨orm 990 Part	x column (rs) iine 10c)	>		1.11	6.019

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

Sched	ule D (Form 990) 2016 Jacksonville Urban League Economic & Community Development Foundation	23-7095139	Page 4
Par		r Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	T 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains (losses) on investments		
a	* · · · · ·	1	
b		1	
C .	Recoveries of prior year grants	-	
d	Other (Describe in Part XIII.)	 	_
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	↓	
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	0
Par		er Return.	-
للنصب	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	 	
	Donated services and use of facilities		
a		1 1	
b	Prior year adjustments	-	
C	Other losses	-	
d	Other (Describe in Part XIII.)		_
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	_}	
b	Other (Describe in Part XIII.)	<u> </u>	
C	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	0
Par	XIII Supplemental Information.		<u>"</u>
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		·
			•••••

	m 990) 2016 Jacksonville Urban League Economic & Community Deve	elopment Foundation 23	-7095139 Page 5
Part XIII	Supplemental Information (continued)		
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		,	
			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Jacksonville Urban League Economic & Community Development Foundation	23-7095139
Form 990, Part VI, Section B. Policies, Line 11b: Form 990 is prepared by the CFO. After	
completion, the Form 990 is reviewed by the President/Executive Director. Prior to filing with	
the IRS, the Form 990 is made available for review by the members of the Board of Directors.	
Form 990, Part VI, Section C. Disclosure, Line 19. The Administrative Assistant maintains a	
file of the Organization's governing documents. The governing documents include articles of	
incorporation, bylaws, records of tax exempt status, letter assigning tax identification	
number, conflict of interest policies. These documents are made available to the public upon	
request. The organization maintains financial statements for prior years on file and they are	
also made available to the public upon request. During the tax year, interim financial	
statements are prepared by CFO and presented to the Board during board meetings	
Form 990, Part X, Section Reconciliation of Net Assets, Line 9: Adjustment required in order	
to reconcile the net asset beginning balance with the net assets for the current period.	
······································	

Name of the organization	Employer identification number
Jacksonville Urban League Economic & Community Development Foundation	23-7095139
Jacksonville Orban League Economic & Community Development Poundation	23-7093139
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