

Return of Organization Exempt From Income Tax

2019

Open to Public Inspection

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.
- Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

A For the 2019 calendar year, or tax year beginning 2019, and ending 20

B Check if applicable:
 Address change
 Name change
 Extension
 First-time filer
 Amended return
 Application pending

C Name of organization: ARLINGTON-MANSFIELD AREA YOUNG MEN'S CHRISTIAN ASSOCIATION
 Doing business as _____
 Number and street (or P.O.) box (if mail is not delivered to street address): _____ Room/suite _____
1148 W FIDONFER PARKWAY SUITE H
 City or town, state or province, country, and ZIP or foreign postal code:
ARLINGTON, TX 76013

D Employer identification number: 75-1000839

E Telephone number: (817) 239-9529

F Name and address of principal officer: T. ERIC TUCKER
SAME AS C ABOVE

G Gross receipts \$: 9,165,407

H (a) Is this a subsection 513(c) organization? Yes No
 (b) Are all subsidiaries included? Yes No
 If "No," attach a list (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) _____ 501(c)(2) 501(c)(29) 507

J Website: WWW.AWAYMOA.ORG

K Form of organization: Corporation Trust Association Other _____ L Year of formation: 1958 M State of legal domicile: TX

Part I Summary			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>TO PUT CHRISTIAN PRINCIPLES INTO PRACTICE THROUGH PROGRAMS THAT BUILD HEALTHY SPIRIT, MIND AND BODY FOR ALL</u>	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	3 27
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 27
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5 614
	6	Total number of volunteers (estimate if necessary)	6 957
	7a	Total unrelated business revenue from Part VIII, column (C), line 2	7a (36,795)
	7b	Net unrelated business taxable income from Form 990-T, line 39	7b (36,795)
Revenue	8	Contributions and grants (Part VI, line 1b)	Prior Year: 7,154,391 Current Year: 7,277,102
	9	Program service revenue (Part VIII, line 2g)	7,505,680 7,939,530
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	47,236 96,833
	11	Other revenue (Part VIII, column (A), lines 5, 6c, 8c, 9c, 10c, and 11e)	73,048 107,990
	12	Total revenue - add lines 8 through 11 (must equal Part VII, column (A), line 12)	8,472,400 8,671,305
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)
14		Benefits paid to or for members (Part IX, column (A), line 4)	
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,700,051 5,140,216
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0 0
16b		Total fundraising expenses (Part IX, column (C), line 25) <u>135,677</u>	
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,635,507 4,200,320
18	Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	4,932,672 9,728,615	
19	Revenue less expenses. Subtract line 18 from line 12	(460,272) (857,310)	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year: 12,174,630 End of Year: 12,566,470
	21	Total liabilities (Part X, line 20)	3,893,536 4,766,625
	22	Net assets or fund balances. Subtract line 21 from line 20	8,461,094 7,829,844

Part II Signature Block

Under penalties of perjury, I declare that I have prepared 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: T. Eric Tucker Signature of officer Date: 9/14/20
T. ERIC TUCKER, PRESIDENT AND CEO Title or print name and title

Paid Preparer Use Only

Print Type preparer's name: <u>JAMIE EVERSOLE</u>	Preparer's signature: _____	Date: _____	Check <input type="checkbox"/> if self-employed	PTIN: <u>PO0839244</u>
Firm's name: <u>BDO USA, LLP</u>	Firm's EIN: <u>13-5381580</u>	Phone no.: <u>(817) 738-2430</u>		
Firm's address: <u>301 COMMERCE ST., SUITE 2000, FORT WORTH, TX 76102</u>				

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

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11792Y Form **990** 12/19