CHANGE OF ACCOUNTING PERIOD

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

OMB No 1545-0047

(Rev. January 2020) ▶ Do not enter social security numbers on this form as it may be made public. Open to Public Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection A For the 2019 calendar year, or tax year beginning NOV 1, 2019 2019 and ending DEC 31, C Name of organization D Employer identification number Check if Address change THE OMAHA HOME FOR BOYS Name change 47-0376529 Doing business as Initial E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite 402-457-7000 4343 NORTH 52ND STREET 4,698,396. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended OMAHA, NE 68104 H(a) Is this a group return Applica-F Name and address of principal officer JEFF DEWISPELARE ີ Yes ເX No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status X 501(c)(3) \_\_ 501(c) ( 4947(a)(1) or L ) ◀ (insert no.) [ If "No," attach a list. (see instructions) J Website: ► WWW.OHB.ORG **H(c)** Group exemption number ▶ Form of organization: X Corporation Trust Other > L Year of formation: 1920 M State of legal domicile; NE Association Part I Summary Briefly describe the organization's mission or most significant activities. SUPPORT AND STRENGTHEN YOUTH AND 1 Governance FAMILIES. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets 17 Number of voting members of the governing body (Part VI, line 1a) RECEIVED <u>17</u> Number of independent voting members of the governing body (Part VI, Infe 1b) 4 96 Total number of individuals employed in calendar year 2019 (Part V, line 24), 5 OSC <u>50</u> SEP 24 2021 Total number of volunteers (estimate if necessary) 6 Ō. 7a 7 a Total unrelated business revenue from Part VIII, column (C), line 12 <u>o.</u> b Net unrelated business taxable income from Form 990-T, line 39 7b OGDEN, Prior Year **Current Year** 3,206,755 1,203,290. Contributions and grants (Part VIII, line 1h) 1,415,001. 7,239. Program service revenue (Part VIII, line 2g) 499,909. 3,910,349. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 45,522. 318,468. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 8,850,573. 1,755,960. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 69,653. 5,371. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ō. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 4,929,905. 940,091. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 294,583. b Total fundraising expenses (Part IX, column (D), line 25) 4,012,120. 728,136. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 9,011,678. 673,598. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -161,105.82,362. Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year End of Year** 88,225,321. 86,388,638. 20 Total assets (Part X, line 16) 3,422,098. 2,847,610. 21 Total liabilities (Part X, line 26) 82,966,540. 85,377,711. 22 Net assets or fund balances Subtract line 21 from line 20 | 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. Signature of officer Sign JEFF DEWISPELARE, PRESIDENT Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature P00847894 KURT MEISINGER Paid FRANKEL ZACHARIA, LLC 47-0574775 Preparer Firm's name Firm's address 11404 WEST DODGE RD, SUITE 700 Use Only

932001 01-20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions)

OMAHA, NE 68154-2576

X Yes No Form **990** (2019)

402-496-9100

Attachment to Notice Response - Do Not Process missing 192-12