## Amended Return - Section 5/2(a) (7) Repeal

2939305300708

		Exempt Organization	n Rusines	s Income	Tax Ref	turn		OMB No 1545-0687
Form	990-T	(and proxy ta				2		
10.111	-				T 1	は レ		2018
D	For calendar year 2018 or other tax year beginning , 2018, and ending , 20							
	nent of the Treasury Revenue Service	Do not enter SSN numbers on this form					Open 5016	to Public Inspection for c)(3) Organizations Only
	Check box if							identification number
A L address changed   VOLING MEN'S CHRISTIAN ASSOCIATION OF GREATER CHARLOTTE				(Emp	loyees	s' trust, see instructions)		
_	Visit C (3)				56	6-1045299		
_	08(e) 220(e)	or ype 400 E. MOREHEAD STREET						business activity code
408A 530(a) City or town, state or province, country, and ZIP or foreign postal code			(See	instru	ctions)			
	29(a)	CHARLOTTE, NC 28202-2606						
C Book at en	yalue of all assets of year	Group exemption number (See i						
	195,760,338				01(c) trust	☐ 401(a)		<del></del>
<b>H</b> En	iter the number	the organization's unrelated trades						or first) unrelated
	de or business							one, describe the
		ace at the end of the previous sen	tence, comple	te Parts I and	II, complete	a Schedul	ем	for each additional
		en complete Parts III-V.	(()					No. III
		as the corporation a subsidiary in an a			lolary control	iea group / .	. •	F Yes NO
		me and identifying number of the	parent corpora		elephone nu	mbor >		704 716 6200
		e of ► MICHAEL J. MANNING  rade or Business Income		(A) Inco	<del></del>	(B) Expenses		704-716-6200 (C) Net
Tar.	Gross receipts		<del></del>	(7,) 11100	····	(5) 2	+	
b	Less returns and		Balance ► 1		o			
2		old (Schedule A, line 7)	2		0			i
3		tract line 2 from line 1c	3		0			0
4a		ncome (attach Schedule D)	( ) 4		0		$\neg$	
b		orm 4797, Part II, line 17) (attach Fo	\ /\ \		0			0
c		iction for trusts		<u> </u>	0			0
5		a partnership or an S corporation (attack			0			0
6		nedule C)			0	0		0
7		nanced income (Schedule E)		•	0	0		0
8		alties, and rents from a controlled organizatio		3	0	0		0
9	Investment incom	a section 501(c)(7), (9), or (17) organization	(Schedule G) 9	)	0	0		0
10	Exploited exer	t activity income (Schedule I)			0	0_		0
11	Advertising ind	ne (Schedule J)			0	0_	_	0
12		e instructions, attach schedule)			0			
13		ines 3 through 12			0	0		0
Part		Not Taken Elsewhere (See insti				(Except for	cont	ributions,
		nust be directly connected with t	ne unrelated t	KECEIVE	ne.)		44	
14	Compensation	officers, directors, and trustees (S	cnedule K	OLIVE	:D · 7	<b>—</b>	14 15	0
15 16	Salaries and w	es	5	<del></del>	' أي	<u> </u>	16	0
16 17	Rad debte	es		EB 10.7 202	20: <b> Ş</b>   :	<b> </b>	17	0
18	Interest (attack	chedule) (see instructions)			[3]	<b>⊢</b>	18	0
19	Taxes and lice	es		GDEN I	<u> </u>		19	0
20	Charitable cor	outions (See instructions for limitat	ion rules)		<u>L</u> J	<b>⊢</b>	20	
21		ach Form 4562)		I				
22		n claimed on Schedule A and elsev		<del></del>			22b	_ o
23	•						23	0
24		deferred compensation plans .					24	0
25	Employee ben	t programs					25	0
26	Excess exemp	xpenses (Schedule I)				[_	26	0
27		p costs (Schedule J)					27	0
28		s (attach schedule)					28	0
29		s. Add lines 14 through 28				· · ·	29	0
30		ss taxable income before net opera	-				30	0
31		operating loss arising in tax years beg	-				31	
32	Unrelated bus	ss taxable income. Subtract line 3	1 from line 30			[;	32	0

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Form 99	0-T (2018)		Page <b>2</b>	
Part	Total Unrelated Business Taxable Income			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (se	e	_	
	instructions)	33	0	
34	Amounts paid for disallowed fringes	34	0	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (se	e		
	Instructions)	35	o	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sun	n T		
	of lines 33 and 34	36	o	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	0	
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36	i,		
	enter the smaller of zero or line 36	38	o	
Part I	V Tax Computation			
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	0	
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax or	1 <b>1 1 1</b>		
	the amount on line 38 from. ☐ Tax rate schedule or ☐ Schedule D (Form 1041) ▶	40	o	
41	Proxy tax. See instructions	41	0	
42	Alternative minimum tax (trusts only)	42	0	
43	Tax on Noncompliant Facility Income. See Instructions	43	0	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44		
Part '				
45a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) . 45a 0			
b	Other credits (see instructions)		•	
С	General business credit. Attach Form 3800 (see instructions)			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)			
е	Total credits. Add lines 45a through 45d	45e	0	
46	Subtract line 45e from line 44	46	0	
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) .	47	0	
48	Total tax. Add lines 46 and 47 (see instructions)	48	0	
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	o	
50a	Payments. A 2017 overpayment credited to 2018		7	
b	2018 estimated tax payments			
C	Tax deposited with Form 8868			
d	Foreign organizations: Tax paid or withheld at source (see instructions) . 50d			
е	Backup withholding (see instructions)			
f	Credit for small employer health insurance premiums (attach Form 8941) . 50f	_		
g	Other credits, adjustments, and payments:  Form 2439			
	☐ Form 4136			
51	Total payments. Add lines 50a through 50g	51	11954	
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ □	52		
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed ▶	53		
	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid .	54		
55	Enter the amount of line 54 you want	<b>►</b> 55	11954	
Part \			Two Inc	
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or			
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization in			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the	toreign count	ry   I	
	here >			
	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a f	oreign trust?		
	If "Yes," see instructions for other forms the organization may have to file.			
_58	Enter the amount of tax-exempt interest received or accrued during the tax year  \$	boot of my knowl	adas and ballet it is	
Sign	Under penalties of penjury I dealere that I have examined this return, including accompanying schedules and statements, and to the true, correct, and complete Decigration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	ge	<del></del>	
-	Mh 1 1 1 26 1		discuss this return parer shown below	
Here			ons)? <b>Yes No</b>	
			DTIN	
Paid		Check I if	PTIN	
Preparer self-employed				
Use (	JNIV	Firm's EIN ►	<del></del>	
	Firm's address ►	Phone no	rm <b>990-T</b> (2018)	
		ro	JJJ- I (2018)	

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The enclosed Form 990-T is being amended due to the Section 512(a)(7) repeal. This amended return differs from the original return as follows:

	<u>Original</u>	<u>Amended</u>
Line 34	57922	0
Line 36	57922	0
Line 37	1000	0
Line 38	56922	0
Line 39	11954	0
Line 44	11954	0
Line 46	11954	0
Line 48	11954	0
Line 53	11954	0