

990-EZ

# Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019

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/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

For the 2019 calendar year, or tax year beginning

and ending

<input type="checkbox"/> Initial return <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <b>OMF COMMUNITY OUTREACH</b>		D Employer identification number <b>45-4643068</b>
	Number and street (or P.O. box if mail is not delivered to street address) <b>19807 80TH PL W</b>		E Telephone number <b>877-516-8323</b>
	Room/suite		F Group Exemption Number ▶
	City or town, state or province, country, and ZIP or foreign postal code <b>EDMONDS, WA 98026-6406</b>		H Check <input type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).
Accounting Method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶			
Website: ▶ <b>WWW.OMFCARES.ORG</b>			
Tax-exempt status (check only one) — <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			
Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ <b>143,506.</b>			

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☒

1	Contributions, gifts, grants, and similar amounts received	1	48,446.
2	Program service revenue including government fees and contracts	2	95,060.
3	Membership dues and assessments	3	
4	Investment income	4	
5a	Gross amount from sale of assets other than inventory	5a	
b	Less: cost or other basis and sales expenses	5b	
c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
6	Gaming and fundraising events:		
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c	Less: direct expenses from gaming and fundraising events	6c	
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
7a	Gross sales of inventory, less returns and allowances	7a	
b	Less: cost of goods sold	7b	
c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c	
8	Other revenue (describe in Schedule O)	8	
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	<b>143,506.</b>
10	Grants and similar amounts paid (list in Schedule O)	10	
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	7,043.
13	Professional fees and other payments to independent contractors	13	77,655.
14	Occupancy, rent, utilities, and maintenance	14	3,970.
15	Printing, publications, postage, and shipping	15	
16	Other expenses (describe in Schedule O) <b>SEE SCHEDULE O</b>	16	47,171.
17	<b>Total expenses.</b> Add lines 10 through 16	17	<b>135,839.</b>
18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	7,667.
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	-8,134.
20	Other changes in net assets or fund balances (explain in Schedule O)	20	0.
21	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20	21	<b>-467.</b>

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2019)