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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

A For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
MEALS FOR THE ELDERLY INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
310 E HOUSTON HARTE

City or town, state or province, country, and ZIP or foreign postal code
SAN ANGELO, TX 76903

D Employer identification number

51-0159134

E Telephone number

(325) 655-9200

G Gross receipts \$ 1,264,967

F Name and address of principal officer:
CHARLYN OCKER
310 E HOUSTON HARTE
SAN ANGELO, TX 76903

H(a) Is this a group return for subordinates?
☐ Yes ☒ No
H(b) Are all subordinates included?
☐ Yes ☐ No
If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.MEALSFORTHEELDERLY.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1961

M State of legal domicile: TX

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
TO SERVE THE HOMEBOUND ELDERLY OF SAN ANGELO WITH ONE NUTRITIOUS, HOME-DELIVERED MEAL EACH WEEKDAY.

2 Check this box ☐ 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 16

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 16

5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 19

6 Total number of volunteers (estimate if necessary) 6 2,800

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0

7b Net unrelated business taxable income from Form 990-T, line 39 7b 0

Revenue

8 Contributions and grants (Part VIII, line 1h) 843,410 869,502

9 Program service revenue (Part VIII, line 2g) 0 0

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 26,404 25,415

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 281,128 289,649

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,150,942 1,184,566

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 0 0

14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 496,989 509,671

16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0

16b Total fundraising expenses (Part IX, column (D), line 25) ▶5,097

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 638,470 654,317

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 1,135,459 1,163,988

19 Revenue less expenses. Subtract line 18 from line 12 15,483 20,578

Net Assets or Fund Balances

20 Total assets (Part X, line 16) 1,847,441 1,976,435

21 Total liabilities (Part X, line 26) 68,951 95,204

22 Net assets or fund balances. Subtract line 21 from line 20 1,778,490 1,881,231

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.

Sign Here

Signature of officer
CHARLYN OCKER, PRESIDENT & CEO
Type or print name and title

2020-11-16
Date

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date

Check ☐ if self-employed PTIN P00183890

Firm's name ▶ OLIVER RAINEY & WOJTEK LLP Firm's EIN ▶ 75-2138464

Firm's address ▶ 2909 SHERWOOD WAY SUITE 300
SAN ANGELO, TX 76901 Phone no. (325) 942-6713

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. 11282Y Form 990 (2019)