

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**  
Open to Public Inspection

**A** For the **2020** calendar year, or tax year beginning and ending

**B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization

**MEALS ON WHEELS AMERICA**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**1550 CRYSTAL DRIVE 1004**

City or town, state or province, country, and ZIP or foreign postal code  
**ARLINGTON, VA 22202**

**F** Name and address of principal officer: **ELLIE HOLLANDER**  
**SAME AS C ABOVE**

**D** Employer identification number

**23-7447812**

**E** Telephone number  
**(703) 548-5558**

**G** Gross receipts \$ **83,818,925.**

**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.MEALSONWHEELSAMERICA.ORG**

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

**L** Year of formation: **1976** **M** State of legal domicile: **DC**

**Part I Summary**

|                             |           |   |
|-----------------------------|-----------|---|
| Activities & Governance     | <b>1</b>  | Briefly describe the organization's mission or most significant activities: <b>TO EMPOWER LOCAL PROGRAMS TO IMPROVE THE HEALTH AND QUALITY OF LIFE OF VULNERABLE SENIORS.</b> |
|                             | <b>2</b>  | Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.                                       |
|                             | <b>3</b>  | Number of voting members of the governing body (Part VI, line 1a) <b>3</b> <b>11</b>  |
|                             | <b>4</b>  | Number of independent voting members of the governing body (Part VI, line 1b) <b>4</b> <b>11</b>  |
|                             | <b>5</b>  | Total number of individuals employed in calendar year 2020 (Part V, line 2a) <b>5</b> <b>40</b>   |
|                             | <b>6</b>  | Total number of volunteers (estimate if necessary) <b>6</b> <b>12</b>   |
|                             |           | <b>7a</b>   |
| <b>7b</b>                   |           | Net unrelated business taxable income from Form 990-T, Part I, line 11 <b>7b</b> <b>0.</b>  |
| Revenue                     | <b>8</b>  | Contributions and grants (Part VIII, line 1h) <b>8</b> <b>9,879,320.</b> <b>69,392,961.</b>   |
|                             | <b>9</b>  | Program service revenue (Part VIII, line 2g) <b>9</b> <b>1,886,317.</b> <b>1,612,404.</b>   |
|                             | <b>10</b> | Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>10</b> <b>240,982.</b> <b>248,833.</b>   |
|                             | <b>11</b> | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>11</b> <b>12,686.</b> <b>410.</b>   |
|                             | <b>12</b> | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) <b>12</b> <b>12,019,305.</b> <b>71,254,608.</b>  |
|                             | Expenses  | <b>13</b>   |
| <b>14</b>                   |           | Benefits paid to or for members (Part IX, column (A), line 4) <b>14</b> <b>0.</b> <b>0.</b>   |
| <b>15</b>                   |           | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <b>15</b> <b>3,725,873.</b> <b>4,398,080.</b>   |
| <b>16a</b>                  |           | Professional fundraising fees (Part IX, column (A), line 11e) <b>16a</b> <b>1,418,692.</b> <b>1,987,933.</b>  |
| <b>b</b>                    |           | Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>2,297,047.</b>   |
| <b>17</b>                   |           | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <b>17</b> <b>3,053,042.</b> <b>5,159,363.</b>  |
| <b>18</b>                   |           | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <b>18</b> <b>11,996,746.</b> <b>47,218,556.</b>   |
| Net Assets or Fund Balances | <b>19</b> | Revenue less expenses. Subtract line 18 from line 12 <b>19</b> <b>22,559.</b> <b>24,036,052.</b>  |
|                             | <b>20</b> | Total assets (Part X, line 16) <b>20</b> <b>12,925,873.</b> <b>39,209,514.</b>  |
|                             | <b>21</b> | Total liabilities (Part X, line 26) <b>21</b> <b>3,326,314.</b> <b>5,204,580.</b>   |
|                             | <b>22</b> | Net assets or fund balances. Subtract line 21 from line 20 <b>22</b> <b>9,599,559.</b> <b>34,004,934.</b>   |

**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  |                          | Date            |  |
|                        | <b>ELLIE HOLLANDER, PRESIDENT AND CEO</b><br>Type or print name and title |                          |                 |  |
| Paid Preparer Use Only | Print/Type preparer's name  | Preparer's signature     | Date            | Check if self-employed <input type="checkbox"/> PTIN |
|                        | <b>FRANK H. SMITH</b>   | <i>Frank H. Smith</i>    | <b>08/17/21</b> | <b>P00639053</b>                                     |
|                        | Firm's name ▶   | Firm's EIN ▶             |                 |  |
|                        | <b>MARCUM LLP</b>   | <b>11-1986343</b>        |                 |  |
|                        | Firm's address ▶  | Phone no. (202) 227-4000 |                 |  |
|                        | <b>1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036</b>                  |                          |                 |  |

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

**MEALS ON WHEELS AMERICA (THE ORGANIZATION) EMPOWERS LOCAL COMMUNITY PROGRAMS TO IMPROVE THE HEALTH AND QUALITY OF LIFE OF THE SENIORS THEY SERVE SO THAT NO ONE IS LEFT HUNGRY OR ISOLATED.**

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code: ) (Expenses \$ 41,584,173. including grants of \$ 35,537,350. ) (Revenue \$ 779,554. )

**STRATEGY AND IMPACT - THE MEALS ON WHEELS AMERICA STRATEGY AND IMPACT TEAM PROVIDES THOUGHT LEADERSHIP, RESEARCH AND DATA, INNOVATIVE PROGRAMMING AND TOOLS, AND GRANT OPPORTUNITIES TO AID LOCAL PROGRAMS IN EXTENDING THEIR REACH AND IMPACT. THE TEAM LEVERAGES BEST PRACTICES AND EVIDENCE-BASED INTERVENTIONS IN THE FOUNDATIONAL SUPPORT SYSTEMS THAT ENABLE SENIORS TO LIVE INDEPENDENTLY: NUTRITION, SOCIALIZATION, SAFETY AND COMMUNITY CONNECTIONS AT BOTH THE NATIONAL AND LOCAL LEVELS. EXAMPLES OF SUCH INITIATIVES INCLUDE THE WORK OF MEALS ON WHEELS HEALTH THAT BRINGS TOGETHER OUR NATIONWIDE NETWORK IN PARTNERSHIP WITH HEALTHCARE PROVIDERS AND PAYERS THAT IMPROVE HEALTH OUTCOMES AND THE QUALITY OF CARE, WHILE LOWERING COSTS OF HEALTHCARE'S HIGH-RISK, SPECIAL NEEDS POPULATION.**

**4b** (Code: ) (Expenses \$ 927,432. including grants of \$ 135,830. ) (Revenue \$ 803,350. )

**MEMBERSHIP SERVICES - THE MEALS ON WHEELS AMERICA MEMBERSHIP TEAM PROVIDES DIRECT MEMBER SUPPORT IN A VARIETY OF WAYS THAT INCLUDES ADVOCACY, EDUCATION AND TRAINING, PROGRAM AND CAPACITY-BUILDING SUPPORT AND NETWORKING OPPORTUNITIES. IN ADDITION, THE TEAM PROVIDES GRANTS AND REVENUE DISTRIBUTION SERVICES, PEER-TO-PEER LEARNING, AND A DISCOUNT PROGRAM THAT DELIVERS SAVINGS ON THE PRODUCTS AND SERVICES THAT LOCAL COMMUNITY-BASED NUTRITION ORGANIZATIONS RELY ON TO RUN THEIR OPERATIONS. THE TEAM PRODUCES AND PROVIDES TRAINING PROGRAMS AND LEARNING OPPORTUNITIES FOR LOCAL MEALS ON WHEELS PROGRAM STAFF THROUGH A NATIONAL CONFERENCE, STATE ASSOCIATION MEETINGS, WEBINARS, INFORMATION SHARING THROUGH ONLINE PLATFORMS, PROFESSIONAL DEVELOPMENT AND CRISIS RESPONSE TOOLS AND RESOURCES.**

**4c** (Code: ) (Expenses \$ 355,287. including grants of \$ ) (Revenue \$ )

**MARKETING AND COMMUNICATIONS - THE MEALS ON WHEELS AMERICA MARKETING AND COMMUNICATIONS TEAM RAISES VISIBILITY OF THE HIDDEN AND GROWING NATIONWIDE EPIDEMICS OF SENIOR HUNGER AND ISOLATION AND THE VALUE/IMPACT OF MEALS ON WHEELS. AS SUCH, THE TEAM WORKS TO STRENGTHEN AND LEVERAGE THE MEALS ON WHEELS BRAND ACROSS AMERICA THROUGH VARIOUS THOUGHT-LEADERSHIP EFFORTS, EARNED MEDIA AND DIGITAL MARKETING INITIATIVES. THIS WORK IS DESIGNED TO GARNER MORE SUPPORT FOR THIS CRITICAL, WOEFULLY UNDER-RESOURCED CAUSE BY ENGAGING KEY INFLUENCERS ACROSS MULTIPLE SECTORS, THROUGH MULTIPLE CHANNELS, TO STEP UP TO VOLUNTEER, ADVOCATE AND/OR DONATE SO THAT NO SENIOR IS FORGOTTEN.**

**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses **42,866,892.**

Form 990 (2020)

**Part IV Checklist of Required Schedules**

|   | Yes          | No |
|---|--------------|----|
| <b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?<br><i>If "Yes," complete Schedule A</i>  | <b>1</b> X   |    |
| <b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?   | <b>2</b> X   |    |
| <b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>  | <b>3</b>     | X  |
| <b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>   | <b>4</b> X   |    |
| <b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>   | <b>5</b>     | X  |
| <b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>  | <b>6</b>     | X  |
| <b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>  | <b>7</b>     | X  |
| <b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>   | <b>8</b>     | X  |
| <b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?<br><i>If "Yes," complete Schedule D, Part IV</i>         | <b>9</b>     | X  |
| <b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>   | <b>10</b>    | X  |
| <b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.   |              |    |
| <b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>   | <b>11a</b> X |    |
| <b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>  | <b>11b</b>   | X  |
| <b>c</b> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>  | <b>11c</b>   | X  |
| <b>d</b> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>   | <b>11d</b>   | X  |
| <b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>   | <b>11e</b> X |    |
| <b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>  | <b>11f</b> X |    |
| <b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>  | <b>12a</b> X |    |
| <b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year?<br><i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>  | <b>12b</b>   | X  |
| <b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>  | <b>13</b>    | X  |
| <b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?  | <b>14a</b>   | X  |
| <b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> | <b>14b</b>   | X  |
| <b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>   | <b>15</b> X  |    |
| <b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>   | <b>16</b>    | X  |
| <b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>   | <b>17</b> X  |    |
| <b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>   | <b>18</b>    | X  |
| <b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>   | <b>19</b>    | X  |
| <b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>   | <b>20a</b>   | X  |
| <b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?   | <b>20b</b>   |    |
| <b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>  | <b>21</b> X  |    |

**Part IV Checklist of Required Schedules** (continued)

|   | Yes        | No |
|---|------------|----|
| <b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....  | <b>22</b>  | X  |
| <b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....   | <b>23</b>  | X  |
| <b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....  | <b>24a</b> | X  |
| <b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....  | <b>24b</b> |    |
| <b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....   | <b>24c</b> |    |
| <b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....  | <b>24d</b> |    |
| <b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....   | <b>25a</b> | X  |
| <b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....   | <b>25b</b> | X  |
| <b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....   | <b>26</b>  | X  |
| <b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> ..... | <b>27</b>  | X  |
| <b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):  |            |    |
| <b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....  | <b>28a</b> | X  |
| <b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....   | <b>28b</b> | X  |
| <b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....   | <b>28c</b> | X  |
| <b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....   | <b>29</b>  | X  |
| <b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....   | <b>30</b>  | X  |
| <b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....   | <b>31</b>  | X  |
| <b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....   | <b>32</b>  | X  |
| <b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....   | <b>33</b>  | X  |
| <b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....   | <b>34</b>  | X  |
| <b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....  | <b>35a</b> | X  |
| <b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....   | <b>35b</b> |    |
| <b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....  | <b>36</b>  | X  |
| <b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....  | <b>37</b>  | X  |
| <b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....  | <b>38</b>  | X  |

Note: All Form 990 filers are required to complete Schedule O

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

|   | Yes       | No |
|---|-----------|----|
| <b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....  | <b>1a</b> | 26 |
| <b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....  | <b>1b</b> | 0  |
| <b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? ..... | <b>1c</b> | X  |

**Part V** Statements Regarding Other IRS Filings and Tax Compliance (continued)

|  | Yes         | No |
|--|-------------|----|
| <b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  |             |    |
| <b>2a</b> 40   |             |    |
| <b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  | <b>2b</b> X |    |
| <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)   |             |    |
| <b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?  | <b>3a</b> X |    |
| <b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O   | <b>3b</b> X |    |
| <b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | <b>4a</b>   | X  |
| <b>b</b> If "Yes," enter the name of the foreign country   |             |    |
| See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  |             |    |
| <b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  | <b>5a</b>   | X  |
| <b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  | <b>5b</b>   | X  |
| <b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?   | <b>5c</b>   |    |
| <b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?                                    | <b>6a</b>   | X  |
| <b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?   | <b>6b</b>   |    |
| <b>7 Organizations that may receive deductible contributions under section 170(c).</b>   |             |    |
| <b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?   | <b>7a</b>   | X  |
| <b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?   | <b>7b</b>   |    |
| <b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  | <b>7c</b>   | X  |
| <b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year   | <b>7d</b>   |    |
| <b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   | <b>7e</b>   | X  |
| <b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  | <b>7f</b>   | X  |
| <b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  | <b>7g</b>   |    |
| <b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  | <b>7h</b>   |    |
| <b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?   | <b>8</b>    |    |
| <b>9 Sponsoring organizations maintaining donor advised funds.</b>   |             |    |
| <b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?  | <b>9a</b>   |    |
| <b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?   | <b>9b</b>   |    |
| <b>10 Section 501(c)(7) organizations.</b> Enter:  |             |    |
| <b>a</b> Initiation fees and capital contributions included on Part VIII, line 12  | <b>10a</b>  |    |
| <b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities   | <b>10b</b>  |    |
| <b>11 Section 501(c)(12) organizations.</b> Enter:   |             |    |
| <b>a</b> Gross income from members or shareholders   | <b>11a</b>  |    |
| <b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  | <b>11b</b>  |    |
| <b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?  | <b>12a</b>  |    |
| <b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year   | <b>12b</b>  |    |
| <b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>   |             |    |
| <b>a</b> Is the organization licensed to issue qualified health plans in more than one state?  | <b>13a</b>  |    |
| <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.   |             |    |
| <b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans   | <b>13b</b>  |    |
| <b>c</b> Enter the amount of reserves on hand  | <b>13c</b>  |    |
| <b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?  | <b>14a</b>  | X  |
| <b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O   | <b>14b</b>  |    |
| <b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?   | <b>15</b>   | X  |
| If "Yes," see instructions and file Form 4720, Schedule N.   |             |    |
| <b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  | <b>16</b>   | X  |
| If "Yes," complete Form 4720, Schedule O.  |             |    |

Form 990 (2020)

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI ☒**Section A. Governing Body and Management**

|  | 1a | 1b | Yes | No |
|--|----|----|-----|----|
| <b>1a</b> Enter the number of voting members of the governing body at the end of the tax year  | 11 |    |     |    |
| If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.          |    |    |     |    |
| <b>b</b> Enter the number of voting members included on line 1a, above, who are independent  |    | 11 |     |    |
| <b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?   |    |    |     | X  |
| <b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? |    |    |     | X  |
| <b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  |    |    |     | X  |
| <b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?  |    |    |     | X  |
| <b>6</b> Did the organization have members or stockholders?  |    |    | X   |    |
| <b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?   |    |    | X   |    |
| <b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?   |    |    | X   |    |
| <b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:   |    |    |     |    |
| <b>a</b> The governing body?   |    |    | X   |    |
| <b>b</b> Each committee with authority to act on behalf of the governing body?   |    |    | X   |    |
| <b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O      |    |    |     | X  |

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

|   | Yes | No |
|---|-----|----|
| <b>10a</b> Did the organization have local chapters, branches, or affiliates?   |     | X  |
| <b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?   |     |    |
| <b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  | X   |    |
| <b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.  |     |    |
| <b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13  | X   |    |
| <b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | X   |    |
| <b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done   | X   |    |
| <b>13</b> Did the organization have a written whistleblower policy?   | X   |    |
| <b>14</b> Did the organization have a written document retention and destruction policy?  | X   |    |
| <b>15</b> Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  |     |    |
| <b>a</b> The organization's CEO, Executive Director, or top management official   | X   |    |
| <b>b</b> Other officers or key employees of the organization  | X   |    |
| If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).   |     |    |
| <b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  |     | X  |
| <b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? |     |    |

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **AK, AL, AR, AZ, CA, CO, CT, DC, DE, FL, GA, HI**

**18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

**19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records **KENNETH C. EUWEMA - (703) 548-5558**  
**1550 CRYSTAL DRIVE, NO. 1004, ARLINGTON, VA 22202**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A)<br>Name and title  | (B)<br>Average hours per week (list any hours for related organizations below line) | (C)<br>Position<br>(do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|---|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|  |   | Individual trustee or director   | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| (1) ELLIE HOLLANDER<br>PRESIDENT AND CEO                           | 40.00   |  |                       | X       |              |                              |        | 399,970.   | 0.  | 28,209.   |
| (2) LUCY THEILHEIMER<br>CHIEF STRATEGY & IMPACT OFFICER            | 40.00   |  |                       |         | X            |                              |        | 220,081.   | 0.  | 20,010.   |
| (3) ROBERT HERBOLSHEIMER<br>CHIEF LEGAL & COMPLIANCE OFFICER       | 40.00   |  |                       |         | X            |                              |        | 235,530.   | 0.  | 0.  |
| (4) KRISTINE TEMPLIN<br>CHIEF DEVELOPMENT OFFICER                  | 40.00   |  |                       |         | X            |                              |        | 218,302.   | 0.  | 13,244.   |
| (5) SUSAN WALDMAN<br>CHIEF MARKETING & COMM. OFFICER               | 40.00   |  |                       |         | X            |                              |        | 208,367.   | 0.  | 17,567.   |
| (6) ERIKA KELLY<br>CHIEF MEMBERSHIP & ADVOCACY OFFICER             | 40.00   |  |                       |         | X            |                              |        | 174,501.   | 0.  | 10,305.   |
| (7) JENNIFER YOUNG<br>VICE PRESIDENT OF COMMUNICATIONS             | 40.00   |  |                       |         |              | X                            |        | 112,791.   | 0.  | 13,115.   |
| (8) SHARRON CORLE<br>DIRECTOR, LEARNING AND DEVELOPMENT            | 40.00   |  |                       |         |              | X                            |        | 102,886.   | 0.  | 11,409.   |
| (9) QINGXIN CAI<br>SENIOR DIRECTOR, FINANCE                        | 40.00   |  |                       |         |              | X                            |        | 105,141.   | 0.  | 8,624.  |
| (10) LEA FLORENCE<br>SENIOR DIRECTOR, STRATEGY & IMPACT            | 40.00   |  |                       |         |              | X                            |        | 105,014.   | 0.  | 8,202.  |
| (11) UCHEMA AKOBUNDU<br>SENIOR DIRECTOR, NUTRITION STRATEGY        | 40.00   |  |                       |         |              | X                            |        | 102,789.   | 0.  | 8,959.  |
| (12) KENNETH C. EUWEMA<br>CHIEF FINANCIAL & OPERATING OFFICER      | 40.00   |  |                       | X       |              |                              |        | 111,048.   | 0.  | 0.  |
| (13) PAMELA FURNEAUX - CHIEF FIN. & ADMIN. OFFICER - UNTIL 06/2020 | 40.00   |  |                       | X       |              |                              |        | 97,663.  | 0.  | 8,060.  |
| (14) PATTI LYONS<br>CHAIR  | 2.00  | X  |                       | X       |              |                              |        | 0.   | 0.  | 0.  |
| (15) CALVIN MOORE<br>VICE CHAIR                                    | 2.00  | X  |                       | X       |              |                              |        | 0.   | 0.  | 0.  |
| (16) JOHN WIDER<br>SECRETARY/TREASURER                             | 2.00  | X  |                       | X       |              |                              |        | 0.   | 0.  | 0.  |
| (17) NATALIE ADLER<br>DIRECTOR                                     | 1.00  | X  |                       |         |              |                              |        | 0.   | 0.  | 0.  |

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| (A)<br>Name and title  | (B)<br>Average hours per week (list any hours for related organizations below line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|---|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|  |   | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| (18) VINSEN FARIS<br>DIRECTOR                                  | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (19) HOLLY HAGLER<br>DIRECTOR                                  | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (20) JOHN MARICK<br>DIRECTOR                                   | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (21) DERRICK MASHORE<br>DIRECTOR                               | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (22) SANDY NOE<br>DIRECTOR                                     | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (23) LUANN OATMAN<br>DIRECTOR                                  | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (24) SASA OLESSI MONTAO<br>DIRECTOR                            | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| (25) DAVID SELDIN<br>DIRECTOR - UNTIL 09/2020                  | 1.00  | X   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
|  |   |   |                       |         |              |                              |        |  |   |   |
| <b>1b Subtotal</b>   |   |   |                       |         |              |                              |        | 2,194,083.   | 0.  | 147,704.  |
| <b>c Total from continuation sheets to Part VII, Section A</b> |   |   |                       |         |              |                              |        | 0.   | 0.  | 0.  |
| <b>d Total (add lines 1b and 1c)</b>                           |   |   |                       |         |              |                              |        | 2,194,083.   | 0.  | 147,704.  |

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

12

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

|   | Yes | No |
|---|-----|----|
| 3 |     | X  |
| 4 | X   |    |
| 5 |     | X  |

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A)<br>Name and business address   | (B)<br>Description of services  | (C)<br>Compensation |
|--|---------------------------------|---------------------|
| TRUESENSE MARKETING<br>502 KEYSTONE DRIVE, WARRENDALE, PA 15086            | FUNDRAISING CAMPAIGN MANAGEMENT | 1,987,933.          |
| SITUATION INTERACTIVE, 469 7TH AVENUE, SUITE 1300, NEW YORK, NY 10018      | PROJECT CONSULTING              | 879,312.            |
| THE BRIDGESPAN GROUP, 2 COPLEY PLACE, SUITE 3700B, BOSTON, MA 02116        | PROJECT CONSULTING              | 260,000.            |
| PUBLIC, INC., 50 WELLINGTON ST. E, #400, TORONTO, ONTARIO, CANADA M5E1C8   | PROJECT CONSULTING              | 258,800.            |
| KAUFFMAN & ASSOCIATES, INC., 165 SOUTH HOWARD ST., #200, SPOKANE, WA 99201 | PROJECT CONSULTING              | 220,000.            |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

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**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

|  |  |  |                           | (A)<br>Total revenue | (B)<br>Related or exempt<br>function revenue | (C)<br>Unrelated<br>business revenue | (D)<br>Revenue excluded<br>from tax under<br>sections 512 - 514 |
|--|--|--|---------------------------|----------------------|--|--------------------------------------|---|
| <b>Contributions, Gifts, Grants<br/>and Other Similar Amounts</b>  | <b>1 a</b> Federated campaigns .....   | <b>1a</b>  | 46,442.                   |                      |  |                                      |   |
|  | <b>b</b> Membership dues .....   | <b>1b</b>  |                           |                      |  |                                      |   |
|  | <b>c</b> Fundraising events .....  | <b>1c</b>  |                           |                      |  |                                      |   |
|  | <b>d</b> Related organizations .....   | <b>1d</b>  |                           |                      |  |                                      |   |
|  | <b>e</b> Government grants (contributions) .....   | <b>1e</b>  | 402,774.                  |                      |  |                                      |   |
|  | <b>f</b> All other contributions, gifts, grants, and<br>similar amounts not included above ... | <b>1f</b>  | 68943745.                 |                      |  |                                      |   |
|  | <b>g</b> Noncash contributions included in lines 1a-1f .....                                   | <b>1g</b>  | \$ 735,758.               |                      |  |                                      |   |
|  | <b>h Total.</b> Add lines 1a-1f .....  |  |                           |                      |  |                                      |   |
| <b>Program Service<br/>Revenue</b>   | <b>2 a</b> <b>FEE FOR SERVICE</b> .....  | <b>Business Code</b> 900099  |                           | 779,554.             | 779,554.                                     |                                      |   |
|  | <b>b</b> <b>MEMBER DISCOUNT PROG.</b> .....  | 900099   |                           | 386,204.             | 386,204.                                     |                                      |   |
|  | <b>c</b> <b>MEMBERSHIP DUES</b> .....  | 900099   |                           | 224,146.             | 224,146.                                     |                                      |   |
|  | <b>d</b> <b>CONFERENCE</b> .....   | 900099   |                           | 222,500.             | 193,000.                                     |                                      | 29,500.   |
|  | <b>e</b> .....   |  |                           |                      |  |                                      |   |
|  | <b>f</b> All other program service revenue .....   |  |                           |                      |  |                                      |   |
|  | <b>g Total.</b> Add lines 2a-2f .....  |  |                           | 1,612,404.           |  |                                      |   |
|  | <b>Other Revenue</b>   | <b>3</b> Investment income (including dividends, interest, and<br>other similar amounts) ..... |                           |                      | 202,901.                                     |                                      |   |
| <b>4</b> Income from investment of tax-exempt bond proceeds .....  |  |  |                           |                      |  |                                      |   |
| <b>5</b> Royalties .....   |  |  |                           |                      |  |                                      |   |
| <b>6 a</b> Gross rents .....   |  | <b>6a</b>  | (i) Real (ii) Personal    |                      |  |                                      |   |
| <b>b</b> Less: rental expenses ...   |  | <b>6b</b>  |                           |                      |  |                                      |   |
| <b>c</b> Rental income or (loss) .....   |  | <b>6c</b>  |                           |                      |  |                                      |   |
| <b>d</b> Net rental income or (loss) .....   |  |  |                           |                      |  |                                      |   |
| <b>7 a</b> Gross amount from sales of<br>assets other than inventory .....   |  | <b>7a</b>  | (i) Securities (ii) Other |                      |  |                                      |   |
| <b>b</b> Less: cost or other basis<br>and sales expenses .....   |  | <b>7b</b>  |                           |                      |  |                                      |   |
| <b>c</b> Gain or (loss) .....  |  | <b>7c</b>  |                           |                      |  |                                      |   |
| <b>d</b> Net gain or (loss) .....  |  |  |                           |                      |  |                                      |   |
| <b>8 a</b> Gross income from fundraising events (not<br>including \$ _____ of<br>contributions reported on line 1c). See<br>Part IV, line 18 ..... |  | <b>8a</b>  |                           |                      |  |                                      |   |
| <b>b</b> Less: direct expenses .....   |  | <b>8b</b>  |                           |                      |  |                                      |   |
| <b>c</b> Net income or (loss) from fundraising events .....  |  |  |                           |                      |  |                                      |   |
| <b>9 a</b> Gross income from gaming activities. See<br>Part IV, line 19 .....  |  | <b>9a</b>  |                           |                      |  |                                      |   |
| <b>b</b> Less: direct expenses .....   | <b>9b</b>  |  |                           |                      |  |                                      |   |
| <b>c</b> Net income or (loss) from gaming activities .....   |  |  |                           |                      |  |                                      |   |
| <b>10 a</b> Gross sales of inventory, less returns<br>and allowances .....   | <b>10a</b>   |  |                           |                      |  |                                      |   |
| <b>b</b> Less: cost of goods sold .....  | <b>10b</b>   |  |                           |                      |  |                                      |   |
| <b>c</b> Net income or (loss) from sales of inventory .....  |  |  |                           |                      |  |                                      |   |
| <b>Miscellaneous<br/>Revenue</b>   | <b>11 a</b> <b>OTHER INCOME</b> .....  | <b>Business Code</b> 900099  |                           | 15.                  |  |                                      | 15.   |
|  | <b>b</b> .....   |  |                           |                      |  |                                      |   |
|  | <b>c</b> .....   |  |                           |                      |  |                                      |   |
|  | <b>d</b> All other revenue .....   |  |                           |                      |  |                                      |   |
|  | <b>e Total.</b> Add lines 11a-11d .....  |  |                           | 15.                  |  |                                      |   |
|  | <b>12 Total revenue.</b> See instructions .....  |  |                           | 71254608.            | 1,582,904.                                   | 395.                                 | 278,348.  |

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.  | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| <b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21   | 35,663,180.           | 35,663,180.                     |  |                             |
| <b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22  |                       |                                 |  |                             |
| <b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16   | 10,000.               | 10,000.                         |  |                             |
| <b>4</b> Benefits paid to or for members  |                       |                                 |  |                             |
| <b>5</b> Compensation of current officers, directors, trustees, and key employees   | 1,762,558.            | 1,143,901.                      | 527,004.                               | 91,653.                     |
| <b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)   |                       |                                 |  |                             |
| <b>7</b> Other salaries and wages   | 1,609,546.            | 1,043,415.                      | 481,844.                               | 84,287.                     |
| <b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)   | 42,350.               | 27,458.                         | 12,677.                                | 2,215.                      |
| <b>9</b> Other employee benefits  | 740,032.              | 479,991.                        | 221,413.                               | 38,628.                     |
| <b>10</b> Payroll taxes   | 243,594.              | 158,005.                        | 72,878.                                | 12,711.                     |
| <b>11</b> Fees for services (nonemployees):   |                       |                                 |  |                             |
| <b>a</b> Management   |                       |                                 |  |                             |
| <b>b</b> Legal  | 24,228.               | 6,044.                          | 18,184.                                |                             |
| <b>c</b> Accounting   | 71,979.               | 17,956.                         | 54,023.                                |                             |
| <b>d</b> Lobbying   |                       |                                 |  |                             |
| <b>e</b> Professional fundraising services. See Part IV, line 17  | 1,987,933.            |                                 |  | 1,987,933.                  |
| <b>f</b> Investment management fees   | 40,319.               |                                 | 40,319.                                |                             |
| <b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)   | 2,922,198.            | 2,856,832.                      | 56,300.                                | 9,066.                      |
| <b>12</b> Advertising and promotion   |                       |                                 |  |                             |
| <b>13</b> Office expenses   | 468,904.              | 149,050.                        | 293,060.                               | 26,794.                     |
| <b>14</b> Information technology  | 396,203.              | 289,235.                        | 106,968.                               |                             |
| <b>15</b> Royalties   |                       |                                 |  |                             |
| <b>16</b> Occupancy   | 288,231.              | 196,901.                        | 72,963.                                | 18,367.                     |
| <b>17</b> Travel  | 52,548.               | 39,767.                         | 1,338.                                 | 11,443.                     |
| <b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials  |                       |                                 |  |                             |
| <b>19</b> Conferences, conventions, and meetings  | 69,976.               | 69,976.                         |  |                             |
| <b>20</b> Interest  |                       |                                 |  |                             |
| <b>21</b> Payments to affiliates  |                       |                                 |  |                             |
| <b>22</b> Depreciation, depletion, and amortization   | 82,466.               | 56,336.                         | 20,875.                                | 5,255.                      |
| <b>23</b> Insurance   | 26,511.               | 18,111.                         | 6,711.                                 | 1,689.                      |
| <b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) |                       |                                 |  |                             |
| <b>a MEMBER SERVICES</b>  | 582,774.              | 582,774.                        |  |                             |
| <b>b DUES AND SUBSCRIPTIONS</b>   | 74,577.               | 57,960.                         | 9,611.                                 | 7,006.                      |
| <b>c MISCELLANEOUS</b>  | 41,791.               |                                 | 41,791.                                |                             |
| <b>d STATE REGISTRATION FEES</b>  | 16,658.               | 0.                              | 16,658.                                |                             |
| <b>e All other expenses</b>   |                       |                                 |  |                             |
| <b>25 Total functional expenses.</b> Add lines 1 through 24e  | 47,218,556.           | 42,866,892.                     | 2,054,617.                             | 2,297,047.                  |
| <b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.                                    |                       |                                 |  |                             |

Check here ☐ if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X ☐

|  |  | (A)<br>Beginning of year |             | (B)<br>End of year |
|--|--|--------------------------|-------------|--------------------|
| <b>Assets</b>  | <b>1</b> Cash - non-interest-bearing .....   | 1,202,092.               | <b>1</b>    | 4,239,119.         |
|  | <b>2</b> Savings and temporary cash investments .....  | 181,124.                 | <b>2</b>    | 181,598.           |
|  | <b>3</b> Pledges and grants receivable, net .....  | 3,161,574.               | <b>3</b>    | 3,134,446.         |
|  | <b>4</b> Accounts receivable, net .....  | 3,100.                   | <b>4</b>    | 5,631.             |
|  | <b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons ..... |                          | <b>5</b>    |                    |
|  | <b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....   |                          | <b>6</b>    |                    |
|  | <b>7</b> Notes and loans receivable, net .....   |                          | <b>7</b>    |                    |
|  | <b>8</b> Inventories for sale or use .....   | 20,125.                  | <b>8</b>    | 23,259.            |
|  | <b>9</b> Prepaid expenses and deferred charges .....   | 73,560.                  | <b>9</b>    | 144,124.           |
|  | <b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....   | <b>10a</b> 972,544.      |             |                    |
|  | <b>b</b> Less: accumulated depreciation .....  | <b>10b</b> 469,227.      |             |                    |
|  |  | 555,311.                 | <b>10c</b>  | 503,317.           |
|  | <b>11</b> Investments - publicly traded securities .....   | 7,582,892.               | <b>11</b>   | 30,767,597.        |
|  | <b>12</b> Investments - other securities. See Part IV, line 11 .....   |                          | <b>12</b>   |                    |
|  | <b>13</b> Investments - program-related. See Part IV, line 11 .....  |                          | <b>13</b>   |                    |
|  | <b>14</b> Intangible assets .....  |                          | <b>14</b>   |                    |
| <b>15</b> Other assets. See Part IV, line 11 .....                               | 146,095.   | <b>15</b>                | 210,423.    |                    |
| <b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) ..... | 12,925,873.  | <b>16</b>                | 39,209,514. |                    |
| <b>Liabilities</b>   | <b>17</b> Accounts payable and accrued expenses .....  | 1,961,167.               | <b>17</b>   | 3,390,495.         |
|  | <b>18</b> Grants payable .....   |                          | <b>18</b>   |                    |
|  | <b>19</b> Deferred revenue .....   | 336,787.                 | <b>19</b>   | 376,014.           |
|  | <b>20</b> Tax-exempt bond liabilities .....  |                          | <b>20</b>   |                    |
|  | <b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....  |                          | <b>21</b>   |                    |
|  | <b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....     |                          | <b>22</b>   |                    |
|  | <b>23</b> Secured mortgages and notes payable to unrelated third parties .....   |                          | <b>23</b>   | 507,200.           |
|  | <b>24</b> Unsecured notes and loans payable to unrelated third parties .....   |                          | <b>24</b>   |                    |
|  | <b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....  | 1,028,360.               | <b>25</b>   | 930,871.           |
|  | <b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....  | 3,326,314.               | <b>26</b>   | 5,204,580.         |
| <b>Net Assets or Fund Balances</b>   | <b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>  |                          |             |                    |
|  | <b>27</b> Net assets without donor restrictions .....  | 5,980,010.               | <b>27</b>   | 21,809,514.        |
|  | <b>28</b> Net assets with donor restrictions .....   | 3,619,549.               | <b>28</b>   | 12,195,420.        |
|  | <b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>   |                          |             |                    |
|  | <b>29</b> Capital stock or trust principal, or current funds .....   |                          | <b>29</b>   |                    |
|  | <b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....   |                          | <b>30</b>   |                    |
|  | <b>31</b> Retained earnings, endowment, accumulated income, or other funds .....   |                          | <b>31</b>   |                    |
|  | <b>32</b> Total net assets or fund balances .....  | 9,599,559.               | <b>32</b>   | 34,004,934.        |
|  | <b>33</b> Total liabilities and net assets/fund balances .....   | 12,925,873.              | <b>33</b>   | 39,209,514.        |

Form 990 (2020)

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☐

|           |  |           |             |
|-----------|--|-----------|-------------|
| <b>1</b>  | Total revenue (must equal Part VIII, column (A), line 12)  | <b>1</b>  | 71,254,608. |
| <b>2</b>  | Total expenses (must equal Part IX, column (A), line 25)   | <b>2</b>  | 47,218,556. |
| <b>3</b>  | Revenue less expenses. Subtract line 2 from line 1   | <b>3</b>  | 24,036,052. |
| <b>4</b>  | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                      | <b>4</b>  | 9,599,559.  |
| <b>5</b>  | Net unrealized gains (losses) on investments   | <b>5</b>  | 369,323.    |
| <b>6</b>  | Donated services and use of facilities   | <b>6</b>  |             |
| <b>7</b>  | Investment expenses  | <b>7</b>  |             |
| <b>8</b>  | Prior period adjustments   | <b>8</b>  |             |
| <b>9</b>  | Other changes in net assets or fund balances (explain on Schedule O)   | <b>9</b>  | 0.          |
| <b>10</b> | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | <b>10</b> | 34,004,934. |

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

|   | Yes       | No       |
|---|-----------|----------|
| <b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____<br>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  |           |          |
| <b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? _____<br>If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:<br><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | <b>2a</b> | <b>X</b> |
| <b>b</b> Were the organization's financial statements audited by an independent accountant? _____<br>If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:<br><input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis                 | <b>2b</b> | <b>X</b> |
| <b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____<br>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.  | <b>2c</b> | <b>X</b> |
| <b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____  | <b>3a</b> | <b>X</b> |
| <b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____   | <b>3b</b> |          |

Form 990 (2020)

Department of the Treasury  
Internal Revenue Service

**Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.**  
**▶ Attach to Form 990 or Form 990-EZ.**

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2020

**Open to Public Inspection**

Name of the organization

MEALS ON WHEELS AMERICA

Employer identification number

23-7447812

|               |   |
|---------------|---|
| <b>Part I</b> | <b>Reason for Public Charity Status.</b> (All organizations must complete this part.) See instructions. |
|---------------|---|

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

**f** Enter the number of supported organizations

**g** Provide the following information about the supported organization(s).

| g Provide the following information about the supported organization(s). |          |   |   |    |   |   |
|--|----------|---|---|----|---|---|
| (i) Name of supported organization                                       | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the organization listed in your governing document? |    | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|  |          |   | Yes   | No |   |   |
|  |          |   |   |    |   |   |
|  |          |   |   |    |   |   |
|  |          |   |   |    |   |   |
|  |          |   |   |    |   |   |
|  |          |   |   |    |   |   |
| <b>Total</b>   |          |   |   |    |   |   |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020

13

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**COPY**

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ►  | (a) 2016 | (b) 2017 | (c) 2018  | (d) 2019 | (e) 2020  | (f) Total |
|--|----------|----------|-----------|----------|-----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....  | 7026739. | 9625423. | 10934346. | 9879320. | 69392961. | 106858789 |
| <b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....   |          |          |           |          |           |           |
| <b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....   |          |          |           |          |           |           |
| <b>4 Total.</b> Add lines 1 through 3 .....  | 7026739. | 9625423. | 10934346. | 9879320. | 69392961. | 106858789 |
| <b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) ..... |          |          |           |          |           | 10860541. |
| <b>6 Public support.</b> Subtract line 5 from line 4.  |          |          |           |          |           | 95998248. |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►   | (a) 2016 | (b) 2017 | (c) 2018  | (d) 2019 | (e) 2020  | (f) Total  |
|---|----------|----------|-----------|----------|-----------|------------|
| <b>7</b> Amounts from line 4 .....  | 7026739. | 9625423. | 10934346. | 9879320. | 69392961. | 106858789  |
| <b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....  | 324,406. | 217,474. | 172,603.  | 193,471. | 202,901.  | 1110855.   |
| <b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....   |          |          |           |          |           |            |
| <b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....   |          |          |           |          | 15.       | 15.        |
| <b>11 Total support.</b> Add lines 7 through 10   |          |          |           |          |           | 107969659  |
| <b>12</b> Gross receipts from related activities, etc. (see instructions) .....   |          |          |           |          | 12        | 7,146,320. |
| <b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ..... |          |          |           |          |           |            |

**Section C. Computation of Public Support Percentage**

|   |           |                                     |
|---|-----------|-------------------------------------|
| <b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) .....   | <b>14</b> | 88.91 %                             |
| <b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 .....  | <b>15</b> | 72.34 %                             |
| <b>16a 33 1/3% support test - 2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....  |           |                                     |
|   |           | <input checked="" type="checkbox"/> |
| <b>b 33 1/3% support test - 2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....   |           |                                     |
|   |           | <input type="checkbox"/>            |
| <b>17a 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....    |           |                                     |
|   |           | <input type="checkbox"/>            |
| <b>b 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ..... |           |                                     |
|   |           | <input type="checkbox"/>            |
| <b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....  |           |                                     |
|   |           | <input type="checkbox"/>            |

Schedule A (Form 990 or 990-EZ) 2020

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ►   | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....   |          |          |          |          |          |           |
| <b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose ..... |          |          |          |          |          |           |
| <b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....   |          |          |          |          |          |           |
| <b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....  |          |          |          |          |          |           |
| <b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....  |          |          |          |          |          |           |
| <b>6 Total.</b> Add lines 1 through 5 .....   |          |          |          |          |          |           |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....  |          |          |          |          |          |           |
| <b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....           |          |          |          |          |          |           |
| <b>c</b> Add lines 7a and 7b .....  |          |          |          |          |          |           |
| <b>8 Public support.</b> (Subtract line 7c from line 6.)  |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►  | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| <b>9</b> Amounts from line 6 .....   |          |          |          |          |          |           |
| <b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ..... |          |          |          |          |          |           |
| <b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....                           |          |          |          |          |          |           |
| <b>c</b> Add lines 10a and 10b .....   |          |          |          |          |          |           |
| <b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....      |          |          |          |          |          |           |
| <b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....                                  |          |          |          |          |          |           |
| <b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)   |          |          |          |          |          |           |

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ..... ☐

**Section C. Computation of Public Support Percentage**

|   |           |   |
|---|-----------|---|
| <b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) ..... | <b>15</b> | % |
| <b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 .....                       | <b>16</b> | % |

**Section D. Computation of Investment Income Percentage**

|  |           |   |
|--|-----------|---|
| <b>17</b> Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) ..... | <b>17</b> | % |
| <b>18</b> Investment income percentage from 2019 Schedule A, Part III, line 17 .....                         | <b>18</b> | % |

**19a 33 1/3% support tests - 2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ☐

**b 33 1/3% support tests - 2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ☐

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ..... ☐

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

|  | Yes | No |
|--|-----|----|
| <b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>  |     |    |
| <b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>   |     |    |
| <b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>   |     |    |
| <b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>   |     |    |
| <b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>  |     |    |
| <b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>  |     |    |
| <b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>  |     |    |
| <b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>   |     |    |
| <b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i> |     |    |
| <b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?  |     |    |
| <b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?   |     |    |
| <b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>  |     |    |
| <b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>  |     |    |
| <b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>  |     |    |
| <b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>   |     |    |
| <b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>  |     |    |
| <b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>   |     |    |
| <b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>  |     |    |
| <b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>   |     |    |



**Part IV Supporting Organizations** (continued)

|  | Yes | No |
|--|-----|----|
| <b>11</b> Has the organization accepted a gift or contribution from any of the following persons?  |     |    |
| <b>a</b> A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization? |     |    |
| <b>11a</b>   |     |    |
| <b>b</b> A family member of a person described in line 11a above?  |     |    |
| <b>11b</b>   |     |    |
| <b>c</b> A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .                             |     |    |
| <b>11c</b>   |     |    |

**Section B. Type I Supporting Organizations**

|   | Yes | No |
|---|-----|----|
| <b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. |     |    |
| <b>1</b>  |     |    |
| <b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.   |     |    |
| <b>2</b>  |     |    |

**Section C. Type II Supporting Organizations**

|  | Yes | No |
|--|-----|----|
| <b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). |     |    |
| <b>1</b>   |     |    |

**Section D. All Type III Supporting Organizations**

|   | Yes | No |
|---|-----|----|
| <b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? |     |    |
| <b>1</b>  |     |    |
| <b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).   |     |    |
| <b>2</b>  |     |    |
| <b>3</b> By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.  |     |    |
| <b>3</b>  |     |    |

**Section E. Type III Functionally Integrated Supporting Organizations**

|   | Yes | No |
|---|-----|----|
| <b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).  |     |    |
| <b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.  |     |    |
| <b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.   |     |    |
| <b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).  |     |    |
| <b>2</b> Activities Test. Answer lines 2a and 2b below.   |     |    |
| <b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. |     |    |
| <b>2a</b>   |     |    |
| <b>b</b> Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  |     |    |
| <b>2b</b>   |     |    |
| <b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.   |     |    |
| <b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI</b> .  |     |    |
| <b>3a</b>   |     |    |
| <b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.   |     |    |
| <b>3b</b>   |     |    |

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). See instructions.  
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| Section A - Adjusted Net Income |  | (A) Prior Year | (B) Current Year (optional) |
|---------------------------------|--|----------------|-----------------------------|
| 1                               | Net short-term capital gain  | 1              |                             |
| 2                               | Recoveries of prior-year distributions   | 2              |                             |
| 3                               | Other gross income (see instructions)  | 3              |                             |
| 4                               | Add lines 1 through 3.   | 4              |                             |
| 5                               | Depreciation and depletion   | 5              |                             |
| 6                               | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6              |                             |
| 7                               | Other expenses (see instructions)  | 7              |                             |
| 8                               | <b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)  | 8              |                             |

| Section B - Minimum Asset Amount |   | (A) Prior Year | (B) Current Year (optional) |
|----------------------------------|---|----------------|-----------------------------|
| 1                                | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): |                |                             |
| a                                | Average monthly value of securities   | 1a             |                             |
| b                                | Average monthly cash balances   | 1b             |                             |
| c                                | Fair market value of other non-exempt-use assets  | 1c             |                             |
| d                                | <b>Total</b> (add lines 1a, 1b, and 1c)   | 1d             |                             |
| e                                | <b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):                                  |                |                             |
| 2                                | Acquisition indebtedness applicable to non-exempt-use assets  | 2              |                             |
| 3                                | Subtract line 2 from line 1d.   | 3              |                             |
| 4                                | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).                                  | 4              |                             |
| 5                                | Net value of non-exempt-use assets (subtract line 4 from line 3)  | 5              |                             |
| 6                                | Multiply line 5 by 0.035.   | 6              |                             |
| 7                                | Recoveries of prior-year distributions  | 7              |                             |
| 8                                | <b>Minimum Asset Amount</b> (add line 7 to line 6)  | 8              |                             |

| Section C - Distributable Amount |   |   | Current Year |
|----------------------------------|---|---|--------------|
| 1                                | Adjusted net income for prior year (from Section A, line 8, column A)   | 1 |              |
| 2                                | Enter 0.85 of line 1.   | 2 |              |
| 3                                | Minimum asset amount for prior year (from Section B, line 8, column A)  | 3 |              |
| 4                                | Enter greater of line 2 or line 3.  | 4 |              |
| 5                                | Income tax imposed in prior year  | 5 |              |
| 6                                | <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).   | 6 |              |
| 7                                | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). |   |              |

Schedule A (Form 990 or 990-EZ) 2020

**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

| Section D - Distributions  |           | Current Year |
|--|-----------|--------------|
| <b>1</b> Amounts paid to supported organizations to accomplish exempt purposes   | <b>1</b>  |              |
| <b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity               | <b>2</b>  |              |
| <b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations   | <b>3</b>  |              |
| <b>4</b> Amounts paid to acquire exempt-use assets   | <b>4</b>  |              |
| <b>5</b> Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )  | <b>5</b>  |              |
| <b>6</b> Other distributions ( <i>describe in Part VI</i> ). See instructions.   | <b>6</b>  |              |
| <b>7</b> <b>Total annual distributions.</b> Add lines 1 through 6.   | <b>7</b>  |              |
| <b>8</b> Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions. | <b>8</b>  |              |
| <b>9</b> Distributable amount for 2020 from Section C, line 6  | <b>9</b>  |              |
| <b>10</b> Line 8 amount divided by line 9 amount   | <b>10</b> |              |

| Section E - Distribution Allocations (see instructions)  | (i)<br>Excess Distributions | (ii)<br>Underdistributions<br>Pre-2020 | (iii)<br>Distributable<br>Amount for 2020 |
|--|-----------------------------|--|---|
| <b>1</b> Distributable amount for 2020 from Section C, line 6  |                             |  |   |
| <b>2</b> Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.   |                             |  |   |
| <b>3</b> Excess distributions carryover, if any, to 2020   |                             |  |   |
| <b>a</b> From 2015   |                             |  |   |
| <b>b</b> From 2016   |                             |  |   |
| <b>c</b> From 2017   |                             |  |   |
| <b>d</b> From 2018   |                             |  |   |
| <b>e</b> From 2019   |                             |  |   |
| <b>f</b> <b>Total</b> of lines 3a through 3e   |                             |  |   |
| <b>g</b> Applied to underdistributions of prior years  |                             |  |   |
| <b>h</b> Applied to 2020 distributable amount  |                             |  |   |
| <b>i</b> Carryover from 2015 not applied (see instructions)  |                             |  |   |
| <b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.  |                             |  |   |
| <b>4</b> Distributions for 2020 from Section D, line 7: \$   |                             |  |   |
| <b>a</b> Applied to underdistributions of prior years  |                             |  |   |
| <b>b</b> Applied to 2020 distributable amount  |                             |  |   |
| <b>c</b> Remainder. Subtract lines 4a and 4b from line 4.  |                             |  |   |
| <b>5</b> Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions. |                             |  |   |
| <b>6</b> Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.                        |                             |  |   |
| <b>7</b> <b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.   |                             |  |   |
| <b>8</b> Breakdown of line 7:  |                             |  |   |
| <b>a</b> Excess from 2016  |                             |  |   |
| <b>b</b> Excess from 2017  |                             |  |   |
| <b>c</b> Excess from 2018  |                             |  |   |
| <b>d</b> Excess from 2019  |                             |  |   |
| <b>e</b> Excess from 2020  |                             |  |   |

Schedule A (Form 990 or 990-EZ) 2020

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.  
(See instructions.)

**SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:****OTHER INCOME**

2016 AMOUNT: \$ 0.

2017 AMOUNT: \$ 0.

2018 AMOUNT: \$ 0.

2019 AMOUNT: \$ 0.

2020 AMOUNT: \$ 15.

## Schedule B

(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

## Schedule of Contributors

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

# 2020

Name of the organization

**MEALS ON WHEELS AMERICA**

Employer identification number

**23-7447812**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)( 3 ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

### General Rule

- ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

### Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

**MEALS ON WHEELS AMERICA****23-7447812****Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4 | (c)<br>Total contributions | (d)<br>Type of contribution  |
|------------|-----------------------------------|----------------------------|--|
| <u>1</u>   |                                   | \$ <u>12,722,391.</u>      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
| <u>2</u>   |                                   | \$ <u>5,000,000.</u>       | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
| <u>3</u>   |                                   | \$ <u>4,078,721.</u>       | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
| <u>4</u>   |                                   | \$ <u>2,300,000.</u>       | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input checked="" type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| <u>5</u>   |                                   | \$ <u>2,061,423.</u>       | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
| <u>6</u>   |                                   | \$ <u>2,053,820.</u>       | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |

Name of organization

Employer identification number

**MEALS ON WHEELS AMERICA****23-7447812****Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4 | (c)<br>Total contributions | (d)<br>Type of contribution   |
|------------|-----------------------------------|----------------------------|---|
| <u>7</u>   |                                   | \$ <u>2,004,124.</u>       | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| <u>8</u>   |                                   | \$ <u>1,915,554.</u>       | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| <u>9</u>   |                                   | \$ <u>1,796,681.</u>       | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| <u>10</u>  |                                   | \$ <u>1,500,000.</u>       | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
|            |                                   | \$ _____                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
|            |                                   | \$ _____                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |





Name of organization

Employer identification number

**MEALS ON WHEELS AMERICA****23-7447812****Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift                     | (c) Use of gift | (d) Description of how gift is held      |
|---------------------|---|-----------------|--|
|                     |   |                 |  |
|                     |   |                 |  |
|                     |   |                 |  |
|                     | (e) Transfer of gift                    |                 |  |
|                     | Transferee's name, address, and ZIP + 4 |                 | Relationship of transferor to transferee |
|                     |   |                 |  |
|                     |   |                 |  |
|                     |   |                 |  |
|                     | (e) Transfer of gift                    |                 |  |
|                     | Transferee's name, address, and ZIP + 4 |                 | Relationship of transferor to transferee |
|                     |   |                 |  |
|                     |   |                 |  |
|                     |   |                 |  |
|                     | (e) Transfer of gift                    |                 |  |
|                     | Transferee's name, address, and ZIP + 4 |                 | Relationship of transferor to transferee |
|                     |   |                 |  |
|                     |   |                 |  |
|                     |   |                 |  |
|                     | (e) Transfer of gift                    |                 |  |
|                     | Transferee's name, address, and ZIP + 4 |                 | Relationship of transferor to transferee |
|                     |   |                 |  |
|                     |   |                 |  |
|                     |   |                 |  |
|                     | (e) Transfer of gift                    |                 |  |
|                     | Transferee's name, address, and ZIP + 4 |                 | Relationship of transferor to transferee |
|                     |   |                 |  |
|                     |   |                 |  |
|                     |   |                 |  |

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527  
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

**If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

**MEALS ON WHEELS AMERICA**

Employer identification number

**23-7447812**

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures ..... ▶ \$

3 Volunteer hours for political campaign activities .....

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes ☐ No

4a Was a correction made? ..... ☐ Yes ☐ No

b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527  
exempt function activities ..... ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,  
line 17b ..... ▶ \$

4 Did the filing organization file **Form 1120-POL** for this year? ..... ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0-. | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-. |
|----------|-------------|---------|---|--|
|          |             |         |   |  |
|          |             |         |   |  |
|          |             |         |   |  |
|          |             |         |   |  |
|          |             |         |   |  |
|          |             |         |   |  |
|          |             |         |   |  |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

**A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

| Limits on Lobbying Expenditures<br>(The term "expenditures" means amounts paid or incurred.)  |  | (a) Filing organization's totals   | (b) Affiliated group totals |                               |   |  |   |  |  |   |                   |              |  |  |  |
|---|--|------------------------------------|-----------------------------|-------------------------------|---|--|---|--|--|---|-------------------|--------------|--|--|--|
| <b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)   |  |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| <b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)  |  |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| <b>c</b> Total lobbying expenditures (add lines 1a and 1b)  |  |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| <b>d</b> Other exempt purpose expenditures  |  |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| <b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)  |  |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| <b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.   |  |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| <table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table> | If the amount on line 1e, column (a) or (b) is:    | The lobbying nontaxable amount is: | Not over \$500,000          | 20% of the amount on line 1e. | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | Over \$17,000,000 | \$1,000,000. |  |  |  |
| If the amount on line 1e, column (a) or (b) is:   | The lobbying nontaxable amount is:                 |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| Not over \$500,000  | 20% of the amount on line 1e.                      |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| Over \$500,000 but not over \$1,000,000   | \$100,000 plus 15% of the excess over \$500,000.   |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| Over \$1,000,000 but not over \$1,500,000   | \$175,000 plus 10% of the excess over \$1,000,000. |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| Over \$1,500,000 but not over \$17,000,000  | \$225,000 plus 5% of the excess over \$1,500,000.  |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| Over \$17,000,000   | \$1,000,000.                                       |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| <b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)  |  |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| <b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0-  |  |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| <b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0-  |  |                                    |                             |                               |   |  |   |  |  |   |                   |              |  |  |  |
| <b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  |  | <input type="checkbox"/> Yes       | <input type="checkbox"/> No |                               |   |  |   |  |  |   |                   |              |  |  |  |

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

| Lobbying Expenditures During 4-Year Averaging Period                |          |          |          |          |           |
|---|----------|----------|----------|----------|-----------|
| Calendar year<br>(or fiscal year beginning in)                      | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) Total |
| <b>2a</b> Lobbying nontaxable amount                                |          |          |          |          |           |
| <b>b</b> Lobbying ceiling amount<br>(150% of line 2a, column(e))    |          |          |          |          |           |
| <b>c</b> Total lobbying expenditures                                |          |          |          |          |           |
| <b>d</b> Grassroots nontaxable amount                               |          |          |          |          |           |
| <b>e</b> Grassroots ceiling amount<br>(150% of line 2d, column (e)) |          |          |          |          |           |
| <b>f</b> Grassroots lobbying expenditures                           |          |          |          |          |           |

Schedule C (Form 990 or 990-EZ) 2020

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

|   | (a) |    | (b)     |
|---|-----|----|---------|
|   | Yes | No | Amount  |
| <b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: |     |    |         |
| <b>a</b> Volunteers?  |     | X  |         |
| <b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?   | X   |    |         |
| <b>c</b> Media advertisements?  |     | X  |         |
| <b>d</b> Mailings to members, legislators, or the public?   | X   |    | 5,968.  |
| <b>e</b> Publications, or published or broadcast statements?  |     | X  |         |
| <b>f</b> Grants to other organizations for lobbying purposes?   |     | X  |         |
| <b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?  | X   |    | 74,266. |
| <b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  |     | X  |         |
| <b>i</b> Other activities?  |     | X  |         |
| <b>j</b> Total. Add lines 1c through 1i   |     |    | 80,234. |
| <b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?   |     | X  |         |
| <b>b</b> If "Yes," enter the amount of any tax incurred under section 4912  |     |    |         |
| <b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912   |     |    |         |
| <b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?   |     |    |         |

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

|  | Yes | No |
|--|-----|----|
| <b>1</b> Were substantially all (90% or more) dues received nondeductible by members?  | 1   |    |
| <b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?                                   | 2   |    |
| <b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? | 3   |    |

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

|   |    |  |
|---|----|--|
| <b>1</b> Dues, assessments and similar amounts from members   | 1  |  |
| <b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).   |    |  |
| <b>a</b> Current year   | 2a |  |
| <b>b</b> Carryover from last year   | 2b |  |
| <b>c</b> Total  | 2c |  |
| <b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  | 3  |  |
| <b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4  |  |
| <b>5</b> Taxable amount of lobbying and political expenditures (See instructions)   | 5  |  |

**Part IV** Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:****THE ORGANIZATION'S LOBBYING ACTIVITIES INCLUDE:**

- MAILINGS VIA EMAIL AND SOCIAL MEDIA TO MEMBERSHIP AND SUPPORTERS

REQUESTING THEM TO CONTACT THEIR MEMBERS OF CONGRESS ON MATTERS

RELATING TO THE COVID-19 EMERGENCY RESPONSE, ANNUAL FEDERAL

**Part IV** Supplemental Information (continued)

APPROPRIATIONS PROCESS, FEDERAL NUTRITION PROGRAMS, CHARITABLE TAX  
ISSUES, AND LEGISLATION IMPACTING SENIOR NUTRITION PROGRAMS NATIONWIDE.

- DIRECT CONTACT WITH MEMBERS OF CONGRESS, THEIR STAFF, AND  
ADMINISTRATION OFFICIALS THROUGH MEETINGS, LETTERS, EMAILS, BRIEFINGS  
AND PUBLIC POLICY EVENTS RELATED TO THE COVID-19 EMERGENCY RESPONSE,  
OLDER AMERICANS ACT, ANNUAL FEDERAL APPROPRIATIONS PROCESS, FEDERAL  
NUTRITION AND HEALTHCARE PROGRAMS, AND CHARITABLE TAX ISSUES.

**SCHEDULE D**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**  
▶ **Attach to Form 990.**▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2020****Open to Public Inspection****Name of the organization****MEALS ON WHEELS AMERICA****Employer identification number****23-7447812****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

|   | (a) Donor advised funds      | (b) Funds and other accounts |
|---|------------------------------|------------------------------|
| 1 Total number at end of year .....   |                              |                              |
| 2 Aggregate value of contributions to (during year) .....   |                              |                              |
| 3 Aggregate value of grants from (during year) .....  |                              |                              |
| 4 Aggregate value at end of year .....  |                              |                              |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....  | <input type="checkbox"/> Yes | <input type="checkbox"/> No  |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ..... | <input type="checkbox"/> Yes | <input type="checkbox"/> No  |

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

|  | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements .....   | 2a                              |
| b Total acreage restricted by conservation easements .....   | 2b                              |
| c Number of conservation easements on a certified historic structure included in (a) .....   | 2c                              |
| d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register ..... | 2d                              |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ .....

4 Number of states where property subject to conservation easement is located ▶ .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ .....

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ .....

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....

▶ \$ .....

(ii) Assets included in Form 990, Part X .....

▶ \$ .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

▶ \$ .....

b Assets included in Form 990, Part X .....

▶ \$ .....

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2020

032051 12-01-20

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other \_\_\_\_\_

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

|    | Amount |
|----|--------|
| 1c |        |
| 1d |        |
| 1e |        |
| 1f |        |

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

|  | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance                     |                  |                |                    |                      |                     |
| b Contributions                                  |                  |                |                    |                      |                     |
| c Net investment earnings, gains, and losses     |                  |                |                    |                      |                     |
| d Grants or scholarships                         |                  |                |                    |                      |                     |
| e Other expenditures for facilities and programs |                  |                |                    |                      |                     |
| f Administrative expenses                        |                  |                |                    |                      |                     |
| g End of year balance                            |                  |                |                    |                      |                     |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ☐ %

b Permanent endowment ☐ %

c Term endowment ☐ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations

(ii) Related organizations

|        | Yes | No |
|--------|-----|----|
| 3a(i)  |     |    |
| 3a(ii) |     |    |
| 3b     |     |    |

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property  | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land  |                                      |                                 |                              |                |
| b Buildings  |                                      |                                 |                              |                |
| c Leasehold improvements   |                                      | 811,553.                        | 338,413.                     | 473,140.       |
| d Equipment  |                                      | 160,991.                        | 130,814.                     | 30,177.        |
| e Other  |                                      |                                 |                              |                |
| <b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) |                                      |                                 |                              | 503,317.       |

Schedule D (Form 990) 2020

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security)      | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) Financial derivatives .....   |                |   |
| (2) Closely held equity interests .....                                   |                |   |
| (3) Other .....   |                |   |
| (A) .....   |                |   |
| (B) .....   |                |   |
| (C) .....   |                |   |
| (D) .....   |                |   |
| (E) .....   |                |   |
| (F) .....   |                |   |
| (G) .....   |                |   |
| (H) .....   |                |   |
| <b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ |                |   |

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment   | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) .....   |                |   |
| (2) .....   |                |   |
| (3) .....   |                |   |
| (4) .....   |                |   |
| (5) .....   |                |   |
| (6) .....   |                |   |
| (7) .....   |                |   |
| (8) .....   |                |   |
| (9) .....   |                |   |
| <b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ |                |   |

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description   | (b) Book value |
|---|----------------|
| (1) .....   |                |
| (2) .....   |                |
| (3) .....   |                |
| (4) .....   |                |
| (5) .....   |                |
| (6) .....   |                |
| (7) .....   |                |
| (8) .....   |                |
| (9) .....   |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ |                |

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability   | (b) Book value |
|---|----------------|
| (1) Federal income taxes  |                |
| (2) DEFERRED RENT AND LEASE INCENTIVES                                      | 930,871.       |
| (3) .....   |                |
| (4) .....   |                |
| (5) .....   |                |
| (6) .....   |                |
| (7) .....   |                |
| (8) .....   |                |
| (9) .....   |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ | 930,871.       |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... ☒

Schedule D (Form 990) 2020



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

|          |  |           |             |
|----------|--|-----------|-------------|
| <b>1</b> | Total revenue, gains, and other support per audited financial statements                       | <b>1</b>  | 74,292,623. |
| <b>2</b> | Amounts included on line 1 but not on Form 990, Part VIII, line 12:                            |           |             |
| <b>a</b> | Net unrealized gains (losses) on investments   | <b>2a</b> | 369,323.    |
| <b>b</b> | Donated services and use of facilities   | <b>2b</b> | 2,707,690.  |
| <b>c</b> | Recoveries of prior year grants  | <b>2c</b> |             |
| <b>d</b> | Other (Describe in Part XIII.)   | <b>2d</b> | 1,321.      |
| <b>e</b> | Add lines <b>2a</b> through <b>2d</b>  | <b>2e</b> | 3,078,334.  |
| <b>3</b> | Subtract line <b>2e</b> from line <b>1</b>   | <b>3</b>  | 71,214,289. |
| <b>4</b> | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                           |           |             |
| <b>a</b> | Investment expenses not included on Form 990, Part VIII, line 7b                               | <b>4a</b> | 40,319.     |
| <b>b</b> | Other (Describe in Part XIII.)   | <b>4b</b> |             |
| <b>c</b> | Add lines <b>4a</b> and <b>4b</b>  | <b>4c</b> | 40,319.     |
| <b>5</b> | Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) | <b>5</b>  | 71,254,608. |

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

|          |   |           |             |
|----------|---|-----------|-------------|
| <b>1</b> | Total expenses and losses per audited financial statements                                      | <b>1</b>  | 49,887,248. |
| <b>2</b> | Amounts included on line 1 but not on Form 990, Part IX, line 25:                               |           |             |
| <b>a</b> | Donated services and use of facilities  | <b>2a</b> | 2,707,690.  |
| <b>b</b> | Prior year adjustments  | <b>2b</b> |             |
| <b>c</b> | Other losses  | <b>2c</b> |             |
| <b>d</b> | Other (Describe in Part XIII.)  | <b>2d</b> | 1,321.      |
| <b>e</b> | Add lines <b>2a</b> through <b>2d</b>   | <b>2e</b> | 2,709,011.  |
| <b>3</b> | Subtract line <b>2e</b> from line <b>1</b>  | <b>3</b>  | 47,178,237. |
| <b>4</b> | Amounts included on Form 990, Part IX, line 25, but not on line 1:                              |           |             |
| <b>a</b> | Investment expenses not included on Form 990, Part VIII, line 7b                                | <b>4a</b> | 40,319.     |
| <b>b</b> | Other (Describe in Part XIII.)  | <b>4b</b> |             |
| <b>c</b> | Add lines <b>4a</b> and <b>4b</b>   | <b>4c</b> | 40,319.     |
| <b>5</b> | Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) | <b>5</b>  | 47,218,556. |

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART X, LINE 2:**

THE ORGANIZATION PERFORMED AN EVALUATION OF UNCERTAINTY IN INCOME TAXES FOR THE YEAR ENDED DECEMBER 31, 2020, AND DETERMINED THAT THERE ARE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

**PART XI, LINE 2D - OTHER ADJUSTMENTS:**

COST OF GOODS SOLD 1,321.

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

COST OF GOODS SOLD 1,321.

**Part XIII** Supplemental Information *(continued)*

Area for supplemental information with horizontal lines.

**COPY**

Department of the Treasury  
Internal Revenue Service

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

# 2020

**Open to Public Inspection**

Employer identification number

23-7447812

**3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

| (a) Region  | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in the region | (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in the region | (f) Total expenditures for and investments in the region |
|---|-------------------------------------|--|--|--|--|
|   |                                     |  |  |  |  |
|   |                                     |  |  |  |  |
|   |                                     |  |  |  |  |
|   |                                     |  |  |  |  |
|   |                                     |  |  |  |  |
|   |                                     |  |  |  |  |
|   |                                     |  |  |  |  |
|   |                                     |  |  |  |  |
|   |                                     |  |  |  |  |
| <b>3 a</b> Subtotal .....                               | 0                                   | 0  |  |  | 0.   |
| <b>b</b> Total from continuation sheets to Part I ..... | 0                                   | 0  |  |  | 0.   |
| <b>c Totals</b> (add lines 3a and 3b)                   | 0                                   | 0  |  |  | 0.   |

Schedule F (Form 990) 2020

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1<br>(a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region    | (d) Purpose of grant        | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|-------------------------------|--|---------------|-----------------------------|--------------------------|---------------------------------|----------------------------------|---------------------------------------|---|
|                               |  | NORTH AMERICA | COVID-19 EMERGENCY RESPONSE | 10,000.                  | WIRE TRANSFER                   | 0.                               |                                       |   |
|                               |  |               |                             |                          |                                 |                                  |                                       |   |
|                               |  |               |                             |                          |                                 |                                  |                                       |   |
|                               |  |               |                             |                          |                                 |                                  |                                       |   |
|                               |  |               |                             |                          |                                 |                                  |                                       |   |
|                               |  |               |                             |                          |                                 |                                  |                                       |   |
|                               |  |               |                             |                          |                                 |                                  |                                       |   |
|                               |  |               |                             |                          |                                 |                                  |                                       |   |
|                               |  |               |                             |                          |                                 |                                  |                                       |   |

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ..... **1**

3 Enter total number of other organizations or entities ..... **0**

Schedule F (Form 990) 2020



**Part IV Foreign Forms**

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ..... ☐ Yes ☒ No
- 2** Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ..... ☐ Yes ☒ No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ..... ☐ Yes ☒ No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ..... ☐ Yes ☒ No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ..... ☐ Yes ☒ No
- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* ..... ☐ Yes ☒ No

Schedule F (Form 990) 2020

**Part V** Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Blank lines for supplemental information.





**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

|                 |   | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events<br>(add col. (a) through<br>col. (c)) |
|-----------------|---|--------------|--------------|------------------|--|
|                 |   | (event type) | (event type) | (total number)   |  |
| Revenue         | 1 Gross receipts .....  |              |              |                  |  |
|                 | 2 Less: Contributions .....   |              |              |                  |  |
|                 | 3 Gross income (line 1 minus line 2) .....                            |              |              |                  |  |
| Direct Expenses | 4 Cash prizes .....   |              |              |                  |  |
|                 | 5 Noncash prizes .....  |              |              |                  |  |
|                 | 6 Rent/facility costs .....   |              |              |                  |  |
|                 | 7 Food and beverages .....  |              |              |                  |  |
|                 | 8 Entertainment .....   |              |              |                  |  |
|                 | 9 Other direct expenses .....   |              |              |                  |  |
|                 | 10 Direct expense summary. Add lines 4 through 9 in column (d) .....  |              |              |                  |  |
|                 | 11 Net income summary. Subtract line 10 from line 3, column (d) ..... |              |              |                  |  |

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

|                 |  | (a) Bingo   | (b) Pull tabs/instant<br>bingo/progressive bingo                    | (c) Other gaming  | (d) Total gaming (add<br>col. (a) through col. (c)) |
|-----------------|--|---|---|---|---|
| Revenue         | 1 Gross revenue .....  |   |   |   |   |
| Direct Expenses | 2 Cash prizes .....  |   |   |   |   |
|                 | 3 Noncash prizes .....   |   |   |   |   |
|                 | 4 Rent/facility costs .....  |   |   |   |   |
|                 | 5 Other direct expenses .....  |   |   |   |   |
|                 | 6 Volunteer labor .....  | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No |   |
|                 | 7 Direct expense summary. Add lines 2 through 5 in column (d) .....        |   |   |   |   |
|                 | 8 Net gaming income summary. Subtract line 7 from line 1, column (d) ..... |   |   |   |   |

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: \_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity conducted in:
- |                               |     |   |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility         | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
- ☐
- Yes
- ☐
- No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

- 16 Gaming manager information:

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

☐ Director/officer☐ Employee☐ Independent contractor

- 17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:**

(I) NAME OF FUNDRAISER: TRUESENSE MARKETING

(I) ADDRESS OF FUNDRAISER: 502 KEYSTONE DRIVE, WARRENDALE, PA 15086

PART I, LINE 2B, COLUMN (V):

ON AVERAGE, IT TAKES ABOUT THREE YEARS FOR A DIRECT MAIL PROGRAM TO COVER

ALL DONOR ACQUISITION COSTS AND BEGIN NETTING REVENUE. THE ORGANIZATION HAS A "PAY-AS-YOU-GROW" AGREEMENT WITH THE FUNDRAISER, WHEREBY THE COST

**Part IV** Supplemental Information *(continued)*

INCURRED BY THE FUNDRAISER ARE ONLY REIMBURSABLE TO THE EXTEND OF THE  
REVENUE RAISED THROUGH THE APPEAL. THE FUNDRAISER COLLECTS, PROCESSES,  
AND DEPOSITS THE FUNDS FROM THE DIRECT MAIL APPEALS INTO A BANK ACCOUNT  
CONTROLLED BY THE ORGANIZATION.

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization

**MEALS ON WHEELS AMERICA**

**Employer identification number**

**23-7447812**

**Part I General Information on Grants and Assistance**

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....

☒ **Yes** ☐ **No**

**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| <b>1 (a)</b> Name and address of organization or government                  | <b>(b)</b> EIN | <b>(c)</b> IRC section (if applicable) | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of noncash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--|---------------------------------|--|--|--|---|
| MEALS ON WHEELS CENTRAL TEXAS<br>3227 EAST 5TH STREET<br>AUSTIN, TX 78702    | 23-7202594     | 501(C)(3)                              | 692,064.                        | 370,000.                                 | FMV  | GIFT CARDS                                   | PROJECT SUPPORT AND OTHER SERVICES        |
| OSCEOLA COUNCIL ON AGING<br>700 GENERATION POINT<br>KISSIMMEE, FL 34744      | 59-1595398     | 501(C)(3)                              | 301,000.                        | 106,000.                                 | FMV  | GIFT CARDS                                   | PROJECT SUPPORT AND OTHER SERVICES        |
| MEALS ON WHEELS OF CENTRAL MARYLAND - 515 S. HAVEN ST. - BALTIMORE, MD 21224 | 52-6074723     | 501(C)(3)                              | 263,157.                        | 32,000.                                  | FMV  | GIFT CARDS                                   | PROJECT SUPPORT AND OTHER SERVICES        |
| LIFECARE ALLIANCE<br>1699 W. MOUND ST.<br>COLUMBUS, OH 43223                 | 31-4379494     | 501(C)(3)                              | 254,952.                        | 30,000.                                  | FMV  | GIFT CARDS                                   | PROJECT SUPPORT AND OTHER SERVICES        |
| CITYMEALS ON WHEELS<br>P.O. BOX 5560<br>NEW YORK, NY 10087                   | 13-3634381     | 501(C)(3)                              | 254,635.                        | 0.                                       |  |  | PROJECT SUPPORT AND OTHER SERVICES        |
| MEALS ON WHEELS ATLANTA<br>1705 COMMERCE DR. NW<br>ATLANTA, GA 30318         | 58-0960309     | 501(C)(3)                              | 198,727.                        | 0.                                       |  |  | PROJECT SUPPORT AND OTHER SERVICES        |

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... ▶ **629.**

**3** Enter total number of other organizations listed in the line 1 table ..... ▶ **0.**

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.**

**Schedule I (Form 990) 2020**

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government                              | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| MEALS ON WHEELS SAN ANTONIO<br>4306 NORTHWEST LOOP 410<br>SAN ANTONIO, TX 78229 | 74-1948646 | 501(C)(3)                     | 197,064.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ATHENS COMMUNITY COUNCIL ON AGING<br>135 HOYT ST.<br>ATHENS, GA 30601           | 58-0977680 | 501(C)(3)                     | 196,099.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS CHICAGO<br>314 WEST SUPERIOR STREET<br>CHICAGO, IL 60654        | 36-3667584 | 501(C)(3)                     | 191,019.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FOOD FOR THOUGHT<br>6550 RAILROAD AVENUE<br>FORESTVILLE, CA 95436               | 68-0181095 | 501(C)(3)                     | 175,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| JEWISH FAMILY SERVICE OF SAN DIEGO<br>8804 BALBOA AVENUE<br>SAN DIEGO, CA 92123 | 95-1644024 | 501(C)(3)                     | 165,500.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR NEIGHBORS, INC.<br>678 FRONT AVE NW, STE. 205<br>GRAND RAPIDS, MI 49504  | 23-7195491 | 501(C)(3)                     | 161,575.                 | 56,000.                           | FMV   | GIFT CARDS                             | PROJECT SUPPORT AND OTHER SERVICES |
| UNITED WAY OF CENTRAL ALABAMA<br>PO BOX 320189<br>BIRMINGHAM, AL 35232          | 63-0288846 | 501(C)(3)                     | 160,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CHATHAM COUNTY COUNCIL ON AGING<br>PO BOX 715<br>PITTSBORO, NC 27312            | 56-1084260 | 501(C)(3)                     | 159,256.                 | 10,000.                           | FMV   | GIFT CARDS                             | PROJECT SUPPORT AND OTHER SERVICES |
| NORTH STAR COUNCIL ON AGING<br>1424 MOORE STREET<br>FAIRBANKS, AK 99701         | 92-0037749 | 501(C)(3)                     | 159,000.                 | 10,000.                           | FMV   | GIFT CARDS                             | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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| BAY RIDGE CENTER<br>6935 4TH AVENUE<br>BROOKLYN, NY 11209   | 80-0559714 | 501(C)(3)                     | 158,067.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY BRIDGES, MEALS ON WHEELS<br>FOR SANTA CRUZ COUNTY - 1777-A<br>CAPITOLA ROAD - SANTA CRUZ, CA<br>95062 | 94-2460211 | 501(C)(3)                     | 156,804.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HUMAN SERVICES ASSOCIATION<br>6800 FLORENCE AVE.<br>BELL GARDENS, CA 90201                                      | 95-1816054 | 501(C)(3)                     | 156,804.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CITY OF LAS CRUCES<br>P.O. BOX 20000<br>LAS CRUCES, NM 88004  | 85-6000147 | 501(C)(3)                     | 153,500.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS GUERNSEY COUNTY<br>1022 CARLISLE AVE.<br>CAMBRIDGE, OH 43725                                    | 31-0814891 | 501(C)(3)                     | 153,037.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| UR MEDICINE HOME CARE-MEALS ON<br>WHEELS - 2180 EMPIRE BLVD. -<br>WEBSTER, NY 14580                             | 82-5091873 | 501(C)(3)                     | 152,972.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF ALBUQUERQUE<br>P.O. BOX 92614<br>ALBUQUERQUE, NM 87199                                       | 85-0307043 | 501(C)(3)                     | 152,737.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| EAST BATON ROUGE COUNCIL ON AGING<br>5790 FLORIDA BLVD<br>BATON ROUGE, LA 70806                                 | 72-0637496 | 501(C)(3)                     | 150,015.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AGE WELL SENIOR SERVICES, INC.<br>23101 LAKE CENTER DRIVE<br>LAKE FOREST, CA 92630                              | 93-1163563 | 501(C)(3)                     | 150,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| MEALS ON WHEELS OF METRO TULSA<br>12620 E. 31ST ST.<br>TULSA, OK 74146            | 73-1125389 | 501(C)(3)                     | 148,896.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF SARASOTA, INC.<br>421 N. LIME AVE.<br>SARASOTA, FL 34237       | 59-1391249 | 501(C)(3)                     | 147,495.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR CITIZENS, INC.<br>3025 BULL STREET<br>SAVANNAH, GA 31405                   | 58-0864009 | 501(C)(3)                     | 143,599.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY SENIORSERV, INC.<br>1200 NORTH KNOLLWOOD CIRCLE<br>ANAHEIM, CA 92801    | 95-2771715 | 501(C)(3)                     | 142,550.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| VNA MEALS ON WHEELS<br>1440 W. MOCKINGBIRD LANE<br>DALLAS, TX 75247               | 75-0800692 | 501(C)(3)                     | 142,427.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ELDER CARE SERVICES, INC.<br>2518 WEST TENNESSEE STREET<br>TALLAHASSEE, FL 32304  | 59-1426079 | 501(C)(3)                     | 142,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PROJECT ANGEL FOOD<br>922 VINE STREET<br>LOS ANGELES, CA 90038                    | 95-4115863 | 501(C)(3)                     | 140,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR CONCERNS<br>401 HODENCAMP ROAD<br>THOUSAND OAKS, CA 91360                  | 95-2992927 | 501(C)(3)                     | 139,536.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| METROPOLITAN INTER-FAITH<br>ASSOCIATION - 910 VANCE AVENUE -<br>MEMPHIS, TN 38126 | 62-0803601 | 501(C)(3)                     | 138,547.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| YWCA OF HOUSTON<br>6309 MARTIN LUTHER KING BOULEVARD<br>HOUSTON, TX 77021           | 74-1109658 | 501(C)(3)                     | 135,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AGING MATTERS IN BREVARD<br>3600 KING STREET<br>COCOA, FL 32926                     | 59-1110325 | 501(C)(3)                     | 132,500.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MAYERSON JCC<br>8485 RIDGE RD<br>CINCINNATI, OH 45236                               | 31-0536986 | 501(C)(3)                     | 131,952.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CATTARAUGUS COUNTY DEPARTMENT OF THE AGING - 1 LEO MOSS DRIVE - OLEAN, NY 14760     | 11-1111111 | N/A                           | 130,567.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FAMILY & COMMUNITY SERVICES, INC.<br>705 OAKWOOD ST<br>RAVENNA, OH 44266            | 34-1109890 | 501(C)(3)                     | 130,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS MONTGOMERY COUNTY<br>111 SOUTH 2ND STREET<br>CONROE, TX 77301       | 23-7310650 | 501(C)(3)                     | 130,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR RESOURCE ASSOCIATION<br>694 14TH STREET<br>VERO BEACH, FL 32960              | 59-1539957 | 501(C)(3)                     | 130,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS PEOPLE<br>7710 SW 31ST AVENUE<br>PORTLAND, OR 97219                 | 93-0584318 | 501(C)(3)                     | 129,870.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS SAN DIEGO COUNTY<br>2254 SAN DIEGO AVE. #200<br>SAN DIEGO, CA 92110 | 95-2660509 | 501(C)(3)                     | 129,536.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| SPRINGWELL, INC.<br>307 WAVERLEY OAKS ROAD, SUITE 205<br>WALTHAM, MA 02452             | 04-2616064 | 501(C)(3)                     | 128,166.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY ACTION CORPORATION OF SOUTH TEXAS - 204 E. 1ST STREET - ALICE, TX 78332      | 74-1679824 | 501(C)(3)                     | 127,715.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SILVER SAGE COMMUNITY CENTER<br>P.O. BOX 1416<br>BANDERA, TX 78003                     | 74-2309449 | 501(C)(3)                     | 126,500.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CITY OF GLENDALE - SENIOR SERVICES<br>613 E. BROADWAY, SUITE 120<br>GLENDALE, CA 91206 | 11-1111111 | N/A                           | 125,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS NORTH CENTRAL TEXAS - 106 EAST KILPATRICK STREET - CLEBURNE, TX 76031  | 75-1555153 | 501(C)(3)                     | 122,564.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CATHOLIC CHARITIES OF DALLAS<br>1421 WEST MOCKINGBIRD LANE<br>DALLAS, TX 75247         | 75-2745221 | 501(C)(3)                     | 117,700.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ST. MARTIN COUNCIL ON AGING, INC.<br>P.O. BOX 39<br>BREAUX BRIDGE, LA 70517            | 72-0758720 | 501(C)(3)                     | 117,500.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS, ETC.<br>2801 S. FINANCIAL CT.<br>SANFORD, FL 32773                    | 59-2977907 | 501(C)(3)                     | 117,495.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PENINSULA VOLUNTEERS, INC.<br>800 MIDDLE AVE.<br>MENLO PARK, CA 94025                  | 94-1294939 | 501(C)(3)                     | 117,073.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| MEALS ON WHEELS WEST<br>1823 MICHIGAN AVE., STE A<br>SANTA MONICA, CA 90404                | 95-4613280 | 501(C)(3)                     | 116,536.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NEIGHBORLY CARE NETWORK<br>13945 EVERGREEN AVE.<br>CLEARWATER, FL 33762                    | 59-1218100 | 501(C)(3)                     | 115,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ST. VINCENT MEALS ON WHEELS<br>2303 MIRAMAR STREET<br>LOS ANGELES, CA 90057                | 95-3696693 | 501(C)(3)                     | 114,073.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FAMILY SERVICE ROCHESTER<br>4600 18TH STREET NW<br>ROCHESTER, MN 55901                     | 41-0883453 | 501(C)(3)                     | 113,000.                 | 10,000.                           | FMV   | GIFT CARDS                             | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS DIABLO REGION<br>1300 CIVIC DRIVE<br>WALNUT CREEK, CA 94596                | 68-0044205 | 501(C)(3)                     | 111,573.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF NEPA<br>541 WYOMING AVENUE<br>SCRANTON, PA 18509                        | 23-1856098 | 501(C)(3)                     | 111,549.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| OPEN HAND<br>181 ARMOUR DRIVE NE<br>ATLANTA, GA 30324                                      | 58-1816778 | 501(C)(3)                     | 110,013.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF THE GREATER<br>LEHIGH VALLEY - 4240 FRITCH DR. -<br>BETHLEHEM, PA 18020 | 23-1861779 | 501(C)(3)                     | 109,912.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MARION POLK FOOD SHARE<br>1660 SALEM INDUSTRIAL DRIVE NE<br>SALEM, OR 97301                | 94-3034161 | 501(C)(3)                     | 109,536.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| HESSCO ELDER SERVICES<br>ONE MERCHANT ST.<br>SHARON, MA 02067                        | 04-2936321 | 501(C)(3)                     | 109,345.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY SERVINGS, INC.<br>179 AMORY STREET<br>JAMAICA PLAIN, MA 02130              | 22-3154028 | 501(C)(3)                     | 109,345.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ETHOS<br>555 AMORY STREET<br>JAMAICA PLAIN, MA 02130                                 | 23-7304163 | 501(C)(3)                     | 109,345.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS SAN FRANCISCO<br>1375 FAIRFAX AVENUE<br>SAN FRANCISCO, CA 94124      | 94-1741155 | 501(C)(3)                     | 109,080.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF SOLANO COUNTY<br>95 MARINA CENTER<br>SUISUN CITY, CA 94585        | 94-2453452 | 501(C)(3)                     | 109,073.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| METRO MEALS ON WHEELS-MINNEAPOLIS<br>1200 WASHINGTON AVE S.<br>MINNEAPOLIS, MN 55415 | 31-1501057 | 501(C)(3)                     | 108,939.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LUTHERAN SOCIAL SERVICES OF MINNESOTA - 2485 COMO AVE - SAINT PAUL, MN 55108         | 41-0872993 | 501(C)(3)                     | 108,939.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ASTER AGING, INC.<br>45 W. UNIVERSITY DRIVE<br>MESA, AZ 85201                        | 94-2596075 | 501(C)(3)                     | 107,783.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FEEDMORE WNY<br>100 JAMES E. CASEY DR.,<br>BUFFALO, NY 14206                         | 22-2470820 | 501(C)(3)                     | 106,972.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| CATHOLIC CHARITIES SENIOR DINING/MOWS - 157 ROOSEVELT ROAD - ST. CLOUD, MN 56301     | 41-0737799 | 501(C)(3)                     | 106,704.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PREBLE COUNTY COUNCIL ON AGING 800 E. SAINT CLAIR ST. EATON, OH 45320                | 31-0830453 | 501(C)(3)                     | 106,500.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS BY ACC 7375 PARK CITY DRIVE SACRAMENTO, CA 95831                     | 30-0610870 | 501(C)(3)                     | 106,073.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| DUPAGE SENIOR CITIZENS COUNCIL 1990 SPRINGER DRIVE LOMBARD, IL 60148                 | 36-2988023 | 501(C)(3)                     | 105,915.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF NORTHWEST INDIANA - 8446 VIRGINIA STREET - MERRILLVILLE, IN 46410 | 31-1168281 | 501(C)(3)                     | 105,834.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS PLUS, INC. PO BOX 903 ABILENE, TX 79604                              | 51-0148188 | 501(C)(3)                     | 105,777.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MIZELL SENIOR CENTER 480 S. SUNRISE WAY PALM SPRINGS, CA 92262                       | 95-3464835 | 501(C)(3)                     | 105,500.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GREAT LAKES COMMUNITY ACTION PARTNERSHIP - PO BOX 590 - FREMONT, OH 43420            | 34-0975934 | 501(C)(3)                     | 105,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| REDWOOD EMPIRE FOOD BANK 3990 BRICKWAY BOULEVARD SANTA ROSA, CA 95403                | 68-0121855 | 501(C)(3)                     | 105,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| ELDER SERVICES OF THE MERRIMACK VALLEY - 280 MERRIMACK STREET - LAWRENCE, MA 01843 | 04-2545136 | 501(C)(3)                     | 105,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| YPSILANTI MEALS ON WHEELS<br>1110 W. CROSS ST.<br>YPSILANTI, MI 48197              | 38-2038528 | 501(C)(3)                     | 105,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SMOKY MOUNTAIN MEALS ON WHEELS<br>3509 TUCKALEECHIE PIKE<br>MARYVILLE, TN 37803    | 62-1561673 | 501(C)(3)                     | 104,645.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KLEINLIFE<br>KLEINLIFE<br>PHILADELPHIA, PA 19116                                   | 27-0840848 | 501(C)(3)                     | 104,049.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AMIGOS DEL VALLE, INC.<br>4138 W. CROSSPOINT BLVD<br>EDINBURG, TX 78539            | 74-1815988 | 501(C)(3)                     | 104,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR SERVICES SOUTHWEST MICHIGAN<br>918 JASPER STREET<br>KALAMAZOO, MI 49001     | 38-1747660 | 501(C)(3)                     | 104,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CARELINK<br>PO BOX 5988<br>NORTH LITTLE ROCK, AR 72119                             | 71-0521402 | 501(C)(3)                     | 104,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MOBILE MEALS OF SPARTANBURG<br>P.O. BOX 461<br>SPARTANBURG, SC 29304               | 57-0653452 | 501(C)(3)                     | 104,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIORAGE AREA AGENCY ON AGING<br>1735 S. FORT AVE<br>SPRINGFIELD, MO 65807        | 43-1018538 | 501(C)(3)                     | 103,841.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| WHATCOM COUNTY COUNCIL ON AGING -<br>MEALS ON WHEELS AND MORE - 315<br>HALLECK ST. - BELLINGHAM, WA 98225 | 91-0784024 | 501(C)(3)                     | 103,341.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BERKS ENCORE<br>40 N. 9 ST.<br>READING, PA 19601  | 23-1656050 | 501(C)(3)                     | 103,274.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| TRI-VALLEY, INC.<br>10 MILL ST.<br>DUDLEY, MA 01571   | 04-2594201 | 501(C)(3)                     | 103,166.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NORTHWEST MICHIGAN COMMUNITY<br>ACTION AGENCY - 3963 THREE MILE<br>ROAD - TRAVERSE CITY, MI 49686         | 38-2027389 | 501(C)(3)                     | 103,057.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ROSE CENTERS FOR AGING WELL<br>11890 FAIRHILL ROAD<br>CLEVELAND, OH 44120                                 | 34-0714482 | 501(C)(3)                     | 103,037.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LAKE COUNTY COUNCIL ON AGING<br>8520 E. AVE.<br>MENTOR, OH 44060  | 23-7266637 | 501(C)(3)                     | 103,037.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF NORTHEAST OHIO<br>2279 ROMIG ROAD<br>AKRON, OH 44320                                   | 51-0148544 | 501(C)(3)                     | 103,037.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| DIETERT CENTER<br>451 GUADALUPE STREET<br>KERRVILLE, TX 78028   | 74-2697204 | 501(C)(3)                     | 102,649.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS JEFFERSON AND<br>HARDIN COUNTIES - 4590 CONCORD RD.<br>- BEAUMONT, TX 77703               | 76-0074137 | 501(C)(3)                     | 102,574.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| THE HERITAGE AREA AGENCY ON AGING<br>6301 KIRKWOOD BLVD SW<br>CEDAR RAPIDS, IA 52404           | 83-0545648 | 501(C)(3)                     | 102,500.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR RESOURCES, INC.<br>2817 MILLWOOD AVE.<br>COLUMBIA, SC 29205                             | 57-0484965 | 501(C)(3)                     | 102,500.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MONTGOMERY AREA COUNCIL ON AGING<br>115 E. JEFFERSON STREET<br>MONTGOMERY, AL 36104            | 63-0634950 | 501(C)(3)                     | 102,026.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS WESTERN SOUTH DAKOTA - 1621 SHERIDAN LAKE ROAD, SUITE C - RAPID CITY, SD 57702 | 46-0362991 | 501(C)(3)                     | 101,761.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CLEARFIELD COUNTY AREA AGENCY ON AGING - 103 NORTH FRONT ST. - CLEARFIELD, PA 16830            | 25-1336855 | 501(C)(3)                     | 101,400.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SILVER KEY SENIOR SERVICES<br>1625 S. MURRAY BLVD.<br>COLORADO SPRINGS, CO 80916               | 23-7109922 | 501(C)(3)                     | 101,121.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SOUTHERN MAINE AGENCY ON AGING<br>136 US ROUTE ONE<br>SCARBOROUGH, ME 04074                    | 01-0360259 | 501(C)(3)                     | 100,178.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FRIENDSHIP TRAYS, INC.<br>2401 DISTRIBUTION STREET<br>CHARLOTTE, NC 28203                      | 56-1201496 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF GREENVILLE COUNTY - 15 OREGON STREET - GREENVILLE, SC 29605                 | 57-0531378 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| CICOA AGING & IN-HOME SOLUTIONS<br>8440 WOODFIELD CROSSING BLVD.<br>INDIANAPOLIS, IN 46240    | 35-1310387 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ACTIVE GENERATIONS<br>2300 W. 46TH ST.<br>SIOUX FALLS, SD 57105                               | 46-0305500 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF WESTERN MICHIGAN - 2900 WILSON AVE. SW, SUITE 500 - GRANDVILLE, MI 49418   | 38-2535537 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NORTHWEST ASSISTANCE MINISTRIES<br>MEALS ON WHEELS - 15555 KUYKENDAHL RD. - HOUSTON, TX 77090 | 76-0088702 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS CALIFORNIA<br>HSALA<br>BELLS GARDENS, CA 90201                                | 47-4698325 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF BOULDER<br>3701 CANFIELD ST.<br>BOULDER, CO 80301                          | 84-0594180 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS TEXAS<br>MEALS ON WHEELS, INC. OF TARRANT CO<br>FORT WORTH, TX 76117          | 47-2777882 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| VENTURA COUNTY AREA AGENCY ON AGING - 646 COUNTY SQUARE DRIVE - VENTURA, CA 93003             | 77-0168920 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LIFESCAPE COMMUNITY SERVICES, INC.<br>705 KILBURN AVE.<br>ROCKFORD, IL 61101                  | 36-3303361 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| WASHTENAW COUNTY OFFICE OF<br>COMMUNITY AND ECONOMIC DEVELOPMENT<br>- 415 WEST MICHIGAN AVENUE -<br>YPSILANTI, MI 48197 | 11-1111111 | N/A                           | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CENTRAL VERMONT COUNCIL ON AGING<br>59 N. MAIN ST, SUITE 200<br>BARRE, VT 05641   | 03-0276104 | 501(C)(3)                     | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ALBEMARLE COMMISSION SENIOR<br>NUTRITION PROGRAM - 512 SOUTH<br>CHURCH STREET - HERTFORD, NC 27944                      | 11-1111111 | N/A                           | 100,000.                 | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF SHEBOYGAN<br>COUNTY - 1004 S. TAYLOR DRIVE -<br>SHEBOYGAN, WI 53081                                  | 39-1238290 | 501(C)(3)                     | 99,748.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FOOD FOR LANE COUNTY<br>770 BAILEY HILL ROAD<br>EUGENE, OR 97402  | 93-0888347 | 501(C)(3)                     | 99,036.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS SENIOR SERVICES<br>950 WILLIAMS ST., BLDG C STE 200<br>ROCKWALL, TX 75087                               | 31-1621625 | 501(C)(3)                     | 99,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS MONMOUTH COUNTY<br>810 FOURTH AVE.<br>ASBURY PARK, NJ 07712   | 22-2896129 | 501(C)(3)                     | 99,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CJE SENIORLIFE<br>3003 W. TOUHY AVE.<br>CHICAGO, IL 60645   | 36-2727597 | 501(C)(3)                     | 98,878.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KNOXVILLE-KNOX COUNTY COMMUNITY<br>ACTION COMMITTEE - P.O. BOX 51650<br>- KNOXVILLE, TN 37950                           | 23-7432847 | 501(C)(3)                     | 98,547.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| CHARLESTON AREA SENIOR CITIZENS -<br>MEALS ON WHEELS OF CHARLESTON -<br>259 MEETING STREET - CHARLESTON,<br>SC 29401 | 57-6030048 | 501(C)(3)                     | 98,046.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ARIZONA YWCA METROPOLITAN PHOENIX<br>8561 NORTH 61ST AVENUE<br>GLENDALE, AZ 85302                                    | 86-0098936 | 501(C)(3)                     | 97,210.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR MEALS PROGRAM: CAF 60<br>1015 WILLAMETTE STREET<br>EUGENE, OR 97401   | 11-1111111 | N/A                           | 97,100.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS MINISTRY, INC.<br>3001 ROBERTSON RD.<br>TYLER, TX 75701  | 23-7313019 | 501(C)(3)                     | 96,915.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AREA AGENCY ON AGING OF NORTHWEST<br>ARKANSAS - P.O. BOX 1795 -<br>HARRISON, AR 72602                                | 71-0521887 | 501(C)(3)                     | 96,900.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SAGINAW COUNTY COMMISSION ON AGING<br>2355 SCHUST ROAD<br>SAGINAW, MI 48603  | 38-6004887 | 501(C)(3)                     | 96,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SEWA-AIFW<br>3702 EAST LAKE STREET<br>MINNEAPOLIS, MN 55406  | 05-0608392 | 501(C)(3)                     | 96,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WESLEYLIFE<br>5508 NW 88TH ST.<br>JOHNSTON, IA 50131   | 30-0577845 | 501(C)(3)                     | 96,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SCV SENIOR CENTER<br>27180 GOLDEN VALLEY ROAD<br>SANTA CLARITA, CA 91350   | 95-3081997 | 501(C)(3)                     | 95,700.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| GREATER SPOKANE COUNTY MEALS ON WHEELS - 12101 EAST SPRAGUE AVENUE - SPOKANE VALLEY, WA 99206        | 91-1042546 | 501(C)(3)                     | 95,512.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ESTUARY COUNCIL OF SENIORS, INC.<br>220 MAIN ST.<br>OLD SAYBROOK, CT 06475                           | 06-0919178 | 501(C)(3)                     | 95,436.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| VALLEY SENIOR SERVICES<br>PO BOX 2217<br>FARGO, ND 58108   | 23-7215906 | 501(C)(3)                     | 95,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SOUTHERN MISSISSIPPI PLANNING AND DEVELOPMENT DISTRICT - 10441 CORPORTATE DRIVE - GULFPORT, MS 39503 | 64-0441554 | 501(C)(3)                     | 95,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS PROGRAMS & SERVICES OF ROCKLAND, INC. - 121 WEST NYACK ROAD - NANUET, NY 10954       | 13-2831197 | 501(C)(3)                     | 94,675.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SOURCEPOINT<br>800 CHESHIRE RD.<br>DELAWARE, OH 43015  | 31-1354284 | 501(C)(3)                     | 94,193.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| EPISCOPAL RETIREMENT HOMES<br>3870 VIRGINIA AVENUE<br>CINCINNATI, OH 45227                           | 31-0554071 | 501(C)(3)                     | 93,518.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR SERVICES PLUS<br>2603 N. RODGERS AVE.<br>ALTON, IL 62002                                      | 37-0975762 | 501(C)(3)                     | 93,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIORS FIRST, INC.<br>5395 L.B. MCLEOD RD.<br>ORLANDO, FL 32811                                     | 59-2759603 | 501(C)(3)                     | 93,122.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| LIFESPAN, INC.<br>314 E. 8TH AVE.<br>HOMESTEAD, PA 15120  | 23-7319621 | 501(C)(3)                     | 92,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PIEDMONT AGENCY ON AGING<br>P.O. BOX 997<br>GREENWOOD, SC 29648                                       | 57-0524221 | 501(C)(3)                     | 92,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CINCINNATI AREA SENIOR SERVICES<br>644 LINN ST, STE 304<br>CINCINNATI, OH 45203                       | 31-0825754 | 501(C)(3)                     | 91,915.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GOLDEN HUB COMMUNITY CENTER<br>1009 NORTH LINCOLN ST.<br>FREDERICKSBURG, TX 78624                     | 74-1930212 | 501(C)(3)                     | 91,862.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| RAINBOW SENIOR CENTER<br>17 OLD SAN ANTONIO RD.<br>BOERNE, TX 78006                                   | 74-2323883 | 501(C)(3)                     | 91,574.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS COLLIN COUNTY<br>600 NORTH TENNESSEE STREET<br>MCKINNEY, TX 75069                     | 75-1544507 | 501(C)(3)                     | 91,574.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CITY OF BROWNWOOD SENIOR CITIZENS CENTER - P.O. BOX 1389 -<br>BROWNWOOD, TX 76804                     | 11-1111111 | N/A                           | 91,362.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ALEUTIAN PRIBILOF ISLANDS ASSOCIATION - 1131 EAST INTERNATIONAL AIRPORT ROAD -<br>ANCHORAGE, AK 99518 | 92-0073013 | 501(C)(3)                     | 90,200.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS MESA COUNTY - ST. MARY'S HOSPITAL - 551 CHIPETA AVENUE - GRAND JUNCTION, CO 81501     | 84-0425720 | 501(C)(3)                     | 90,161.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| MEALS ON WHEELS OF ROWAN<br>P.O. BOX 1914<br>SALISBURY, NC 28145                         | 56-1152417 | 501(C)(3)                     | 90,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LOCAL OFFICE ON AGING<br>PO BOX 14205<br>ROANOKE, VA 24038                               | 54-0916248 | 501(C)(3)                     | 90,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NEIGHBORHOOD ALLIANCE<br>1536 EAST 30TH STREET<br>LORAIN, OH 44055                       | 34-0714471 | 501(C)(3)                     | 90,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| EAST TENNESSEE HUMAN RESOURCE<br>AGENCY - 9111 CROSS PARK DRIVE -<br>KNOXVILLE, TN 37923 | 62-1493851 | 501(C)(3)                     | 90,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WASHINGTON-MORGAN COMMUNITY ACTION<br>218 PUTNAM STREET<br>MARIETTA, OH 45750            | 31-0738285 | 501(C)(3)                     | 90,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SANTA YNEZ SENIOR CITIZEN<br>FOUNDATION - PO BOX 1946 -<br>BUELLTON, CA 93427            | 95-3169593 | 501(C)(3)                     | 90,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GREATER LYNN SENIOR SERVICES<br>8 SILSBEE STREET<br>LYNN, MA 01901                       | 04-2581129 | 501(C)(3)                     | 89,166.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BRUNSWICK SENIOR RESOURCES, INC.<br>3620 EXPRESS DRIVE<br>SHALLOTTE, NC 28470            | 01-0656674 | 501(C)(3)                     | 89,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF EASTERN KANSAS<br>2134 SOUTHWEST WESTPORT DRIVE<br>TOPEKA, KS 66614   | 48-0792685 | 501(C)(3)                     | 88,473.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| RAMONA SENIOR CENTER<br>434 AQUA LANE<br>RAMONA, CA 92065                                    | 23-7333513 | 501(C)(3)                     | 87,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FAMILY SERVICE - UPPER OHIO VALLEY<br>2200 MAIN STREET<br>WHEELING, WV 26003                 | 55-0357074 | 501(C)(3)                     | 87,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| JACKSONVILLE SENIOR WELLNESS & ACTIVITY CENTER - 100 VICTORY CIRCLE - JACKSONVILLE, AR 72076 | 71-0424713 | 501(C)(3)                     | 87,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ORANGE COUNTY OFFICE FOR THE AGING<br>40 MATTHEWS ST<br>GOSHEN, NY 10924                     | 14-6002567 | 501(C)(3)                     | 87,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WARREN COUNTY HOME DELIVERY MEALS, INC. - 106 EAST END DRIVE - MCMINNVILLE, TN 37110         | 59-1766201 | 501(C)(3)                     | 87,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PICKENS COUNTY MEALS ON WHEELS<br>349 EDMONT AVENUE<br>LIBERTY, SC 29657                     | 57-0708817 | 501(C)(3)                     | 87,046.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ANN ARBOR MEALS ON WHEELS<br>2025 TRAVERWOOD DRIVE<br>ANN ARBOR, MI 48105                    | 11-1111111 | N/A                           | 86,075.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PARTNERS IN PRIME<br>230 LUDLOW STREET<br>HAMILTON, OH 45011                                 | 31-0569735 | 501(C)(3)                     | 85,952.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CENTRAL OREGON COUNCIL ON AGING<br>373 NORTHEAST GREENWOOD AVENUE<br>BEND, OR 97701          | 93-0661229 | 501(C)(3)                     | 85,900.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| MONROE COUNTY MEALS ON WHEELS<br>901 POLK VALLEY ROAD<br>STROUDSBURG, PA 18360           | 23-7201104 | 501(C)(3)                     | 85,049.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HOOD RIVER VALLEY ADULT CENTER<br>2010 STERLING PLACE<br>HOOD RIVER, OR 97031            | 51-0154995 | 501(C)(3)                     | 85,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CATHOLIC CHARITIES SENIOR<br>NUTRITION PROGRAM - 30 MYANO LANE<br>- STAMFORD, CT 06902   | 06-0653053 | 501(C)(3)                     | 85,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| TERRE HAUTE AREA MEALS ON WHEELS<br>300 SOUTH 5TH STREET<br>TERRE HAUTE, IN 47807        | 35-1185194 | 501(C)(3)                     | 84,752.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS DAVIDSON COUNTY<br>555-B WEST CENTER STREET<br>LEXINGTON, NC 27295       | 11-1111111 | N/A                           | 84,356.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEIGS COUNTY COUNCIL ON AGING,<br>INC. - P.O. BOX 722 - POMEROY, OH<br>45769             | 31-0812413 | 501(C)(3)                     | 84,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| THE SUNSHINE HOUSE, INC.<br>402 E. HOLLAND AVE.<br>ALPINE, TX 79830                      | 74-1989614 | 501(C)(3)                     | 83,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BAY AGING<br>P.O. BOX 610<br>URBANNA, VA 23175   | 54-1085032 | 501(C)(3)                     | 83,200.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF WEST LOS<br>ANGELES, INC. - P.O BOX 241576 -<br>LOS ANGELES, CA 90024 | 95-4847907 | 501(C)(3)                     | 83,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| ERIE COUNTY SENIOR CENTER<br>620 E. WATER ST.<br>SANDUSKY, OH 44870                     | 34-1016590 | 501(C)(3)                     | 82,537.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS SOUTH FLORIDA<br>451 N. STATE ROAD 7<br>PLANTATION, FL 33317            | 59-2450043 | 501(C)(3)                     | 82,495.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| DON BOSCO SENIOR CENTER<br>580 CAMPBELL ST.<br>KANSAS CITY, MO 64106                    | 44-0558260 | 501(C)(3)                     | 81,963.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF RHODE ISLAND<br>70 BATH ST.<br>PROVIDENCE, RI 02908                  | 05-0340723 | 501(C)(3)                     | 80,979.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS FOR GREATER HOUSTON - 3303 MAIN STREET - HOUSTON, TX 77002              | 74-1488102 | 501(C)(3)                     | 80,867.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ENCORE COMMUNITY SERVICES<br>239 WEST 49TH STREET<br>NEW YORK, NY 10019                 | 13-3104293 | 501(C)(3)                     | 80,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HORIZONS, A FAMILY SERVICE ALLIANCE - 819 5TH STREET SOUTHEAST - CEDAR RAPIDS, IA 52401 | 42-1135083 | 501(C)(3)                     | 80,212.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR FRIENDSHIP CENTERS, INC.<br>1888 BROTHER GEENEN WAY<br>SARASOTA, FL 34236        | 59-1522614 | 501(C)(3)                     | 80,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COBB COUNTY SENIOR SERVICES<br>1150 POWDER SPRINGS STREET<br>MARIETTA, GA 30064         | 58-6000804 | 501(C)(3)                     | 80,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| LIFELONG/CHICKEN SOUP BRIGADE<br>210 S. LUCILE ST.<br>SEATTLE, WA 98108  | 91-1215715 | 501(C)(3)                     | 80,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HUMAN DEVELOPMENT COMMISSION<br>429 MONTAGUE AVENUE<br>CARO, MI 48723  | 38-1792679 | 501(C)(3)                     | 80,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF OKLAHOMA CITY<br>222 NORTHWEST 15TH STREET<br>OKLAHOMA CITY, OK 73103                       | 73-0580268 | 501(C)(3)                     | 79,915.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SHEPHERD'S CENTER KC CENTRAL<br>1111 WEST 39TH STREET<br>KANSAS CITY, MO 64111                                 | 43-0994417 | 501(C)(3)                     | 79,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| DOC SERVICES, INC.<br>PO BOX 848<br>MIAMI, OK 74355  | 73-1615506 | 501(C)(3)                     | 79,481.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LONGMONT MEALS ON WHEELS<br>910 LONGS PEAK AVE<br>LONGMONT, CO 80501   | 84-0590979 | 501(C)(3)                     | 79,261.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FIRST TENNESSEE AREA AGENCY ON<br>AGING AND DISABILITY - 3211 NORTH<br>ROAN STREET - JOHNSON CITY, TN<br>37601 | 62-0759446 | 501(C)(3)                     | 78,800.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY RENEWAL TEAM, INC.<br>555 WINDSOR STREET<br>HARTFORD, CT 06120                                       | 06-0795640 | 501(C)(3)                     | 78,436.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF<br>CHARLOTTESVILLE-ALBEMARLE - 704<br>ROSE HILL DRIVE - CHARLOTTESVILLE,<br>VA 22903        | 54-1061454 | 501(C)(3)                     | 78,310.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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| NEWBERRY COUNTY COUNCIL ON AGING<br>1300 HUNT ST.<br>NEWBERRY, SC 29108                        | 23-7079450 | 501(C)(3)                     | 78,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CASS COUNTY COA<br>60525 DECATUR ROAD<br>CASSOPOLIS, MI 49031                                  | 38-1964011 | 501(C)(3)                     | 77,700.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FORT BEND SENIORS MEALS ON WHEELS<br>P.O. BOX 1488<br>ROSENBERG, TX 77471                      | 74-1918313 | 501(C)(3)                     | 77,064.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF TAKOMA PARK<br>7410 NEW HAMPSHIRE AVE.<br>TAKOMA PARK, MD 20912             | 52-0943628 | 501(C)(3)                     | 76,375.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS WESTERN<br>CONNECTICUT - 232 NORTH ELM STREET<br>- WATERBURY, CT 06702         | 06-1182488 | 501(C)(3)                     | 76,218.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| OLD COLONY ELDER SERVICES<br>144 MAIN STREET<br>BROCKTON, MA 02301                             | 04-2545236 | 501(C)(3)                     | 75,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY SERVICES AND EMPLOYMENT<br>TRAINING, INC. - 312 NW 3RD AVENUE<br>- VISALIA, CA 93291 | 94-1701352 | 501(C)(3)                     | 75,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF TEXOMA<br>4114 AIRPORT DR.<br>DENISON, TX 75020                             | 75-1691230 | 501(C)(3)                     | 75,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BURLEIGH COUNTY SENIOR ADULTS<br>PROGRAM - 315 NORTH 20TH STREET -<br>BISMARCK, ND 58501       | 45-0320918 | 501(C)(3)                     | 75,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| MEALS ON WHEELS OF WAKE COUNTY<br>1001 BLAIR DRIVE, SUITE 100<br>RALEIGH, NC 27603                              | 56-1061085 | 501(C)(3)                     | 74,718.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ST. VINCENT DE PAUL SOCIETY,<br>NAPLES DISTRICT COUNCIL, INC. -<br>4451 MERCANTILE AVENUE - NAPLES,<br>FL 34104 | 59-1711287 | 501(C)(3)                     | 74,700.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MIDDLETOWN SENIOR CENTER<br>21256 WASHINGTON STREET<br>MIDDLETOWN, CA 95461                                     | 94-2832316 | 501(C)(3)                     | 74,073.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HIGHLAND VALLEY ELDER SERVICES<br>320 RIVERSIDE DRIVE, SUITE B<br>FLORENCE, MA 01062                            | 04-2563340 | 501(C)(3)                     | 73,203.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HENRY COUNTY SENIOR CENTER<br>203 ROHRS STREET<br>NAPOLÉON, OH 43545  | 34-1458573 | 501(C)(3)                     | 73,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MID-CUMBERLAND HUMAN RESOURCE<br>AGENCY - 1101 KERMIT DRIVE, SUITE<br>300 - NASHVILLE, TN 37217                 | 62-0923487 | 501(C)(3)                     | 72,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FAIRFIELD COUNTY COUNCIL ON AGING<br>210 E. WASHINGTON ST.<br>WINNSBORO, SC 29180                               | 57-0778839 | 501(C)(3)                     | 72,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PEOPLE FOR PEOPLE MEALS ON WHEELS<br>1008 W. AHTANUM ROAD, STE. 3<br>UNION GAP, WA 98903                        | 91-0783225 | 501(C)(3)                     | 71,682.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS ORANGE COUNTY, NC<br>P.O. BOX 2102<br>CHAPEL HILL, NC 27515                                     | 59-1721954 | 501(C)(3)                     | 70,800.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| HOMAGE - SENIOR SERVICES<br>5026 196TH STREET, SW<br>LYNNWOOD, WA 98036                         | 91-0910680 | 501(C)(3)                     | 70,682.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS, INC. OF TARRANT COUNTY - 5740 AIRPORT FREEWAY -<br>FORT WORTH, TX 76117        | 75-1568798 | 501(C)(3)                     | 70,397.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS NORTH CAROLINA<br>404 CROSSWICK ROAD<br>CLEMMONS, NC 27012                      | 83-3370195 | 501(C)(3)                     | 70,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CATHOLIC CHARITIES LAKE COUNTY<br>721 NORTH LASALLE STREET<br>CHICAGO, IL 60654                 | 36-2170821 | 501(C)(3)                     | 70,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COUNCIL ON AGING - GLADWIN COUNTY<br>215 S. ANTLER ST<br>GLADWIN, MI 48624                      | 11-1111111 | N/A                           | 70,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KITCHEN ANGELS<br>1222 SILER RD.<br>SANTA FE, NM 87507  | 85-0423492 | 501(C)(3)                     | 69,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR CITIZEN RESOURCES<br>3100 DEVONSHIRE ROAD<br>CLEVELAND, OH 44109                         | 34-1098212 | 501(C)(3)                     | 69,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ST. ANTHONY'S COMMUNITY CENTER/<br>CITY FARE - 1703 W 10TH ST. -<br>WILMINGTON, DE 19805        | 51-0116737 | 501(C)(3)                     | 69,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ALAMANCE COUNTY MEALS ON WHEELS,<br>INC. - 411 W. 5TH STREET, SUITE A<br>- BURLINGTON, NC 27215 | 56-1061980 | 501(C)(3)                     | 68,756.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| MURRAY CALLOWAY COUNTY SENIOR CITIZENS CENTER - 607 POPLAR STREET SUITE D - MURRAY, KY 42071 | 61-0730009 | 501(C)(3)                     | 68,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SOUND GENERATIONS MEALS ON WHEELS KING COUNTY - 2208 2ND AVENUE - SEATTLE, WA 98121          | 91-0823767 | 501(C)(3)                     | 67,753.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MOBILE MEALS OF SOUTHERN ARIZONA 4803 E 5TH ST., STE #209 TUCSON, AZ 85711                   | 23-7157579 | 501(C)(3)                     | 67,283.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ABCAP 406 W. PLUM ST. GEORGETOWN, OH 45121   | 26-3202165 | 501(C)(3)                     | 67,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS GRAND FORKS 620 4TH AVE. SOUTH GRAND FORKS, ND 58201                         | 45-0311269 | 501(C)(3)                     | 66,950.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FOODNET MEALS ON WHEELS 2422 NORTH TRIPHAMMER RD. ITHACA, NY 14850                           | 16-1285569 | 501(C)(3)                     | 66,867.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KALKASKA COUNTY COMMISSION ON AGING - 303 SOUTH CORAL STREET - KALKASKA, MI 49646            | 38-6004861 | 501(C)(3)                     | 66,600.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS FAIRFIELD COUNTY 1515 CEDAR HILL ROAD LANCASTER, OH 43130                    | 23-7331496 | 501(C)(3)                     | 66,278.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| TAMPA BAY NETWORK TO END HUNGER 4532 WEST KENNEDY BOULEVARD TAMPA, FL 33609                  | 36-4758155 | 501(C)(3)                     | 65,245.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| GOLD COUNTRY COMMUNITY SERVICES<br>P.O. BOX 968<br>GRASS VALLEY, CA 95945                                   | 94-2436273 | 501(C)(3)                     | 65,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WASHINGTON COUNTY COMMISSION ON AGING, INC. - 535 EAST FRANKLIN STREET - HAGERSTOWN, MD 21740               | 52-0899001 | 501(C)(3)                     | 65,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ACTIONS, INC OF BRAZORIA COUNTY<br>1524 E. MULBERRY<br>ANGLETON, TX 77515                                   | 74-1957799 | 501(C)(3)                     | 65,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NEIGHBORHOOD HOUSE<br>1020 S. MATTHEW STREET<br>PEORIA, IL 61605  | 37-0661229 | 501(C)(3)                     | 65,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HEALY SENIOR CENTER<br>PO BOX 1849<br>REDWAY, CA 95560  | 94-2762224 | 501(C)(3)                     | 65,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GREATER BOSTON CHINESE GOLDEN AGE CENTER - 75 KNEELAND STREET - BOSTON, MA 02111                            | 23-7181452 | 501(C)(3)                     | 65,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF SOUTHWEST OH & NORTHERN KY - 2091 RADCLIFF DRIVE - CINCINNATI, OH 45204                  | 31-0537097 | 501(C)(3)                     | 64,952.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS FOUNDATION OF NORTHERN ILLINOIS - 7222 W. CERMAK RD., SUITE 302 - NORTH RIVERSIDE, IL 60546 | 36-4461669 | 501(C)(3)                     | 64,463.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MODERN MATURITY CENTER, INC.<br>1121 FORREST AVENUE<br>DOVER, DE 19904                                      | 51-0108568 | 501(C)(3)                     | 64,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| THAMES VALLEY COUNCIL FOR<br>COMMUNITY ACTION, INC - 1<br>SYLVANDALE ROAD - JEWETT CITY, CT<br>06351 | 06-0806128 | 501(C)(3)                     | 63,718.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER<br>SERVICES |
| EAST PASCO MEALS ON WHEELS<br>38145 15TH AVENUE<br>ZEPHYRHILLS, FL 33542                             | 59-1565648 | 501(C)(3)                     | 63,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER<br>SERVICES |
| BAKERSFIELD SENIOR CENTER, INC.<br>530 4TH STREET<br>BAKERSFIELD, CA 93304                           | 77-0013149 | 501(C)(3)                     | 63,323.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER<br>SERVICES |
| MEALS ON WHEELS OF TAMPA<br>550 WEST HILLSBOROUGH AVE.<br>TAMPA, FL 33603                            | 59-1679915 | 501(C)(3)                     | 62,498.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER<br>SERVICES |
| CARROLL COUNTY COUNCIL ON AGING<br>100 KENSINGTON RD NE<br>CARROLLTON, OH 44615                      | 34-1245760 | 501(C)(3)                     | 60,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER<br>SERVICES |
| WASILLA AREA SENIORS, INC.<br>1301 SOUTH CENTURY CIRCLE<br>WASILLA, AK 99654                         | 92-0082770 | 501(C)(3)                     | 60,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER<br>SERVICES |
| MEALS ON WHEELS OF HAMILTON COUNTY<br>395 WESTFIELD RD.<br>NOBLESVILLE, IN 46060                     | 35-1344488 | 501(C)(3)                     | 60,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER<br>SERVICES |
| AROOSTOOK AGENCY ON AGING<br>260 MAIN ST.<br>PRESQUE ISLE, ME 04769                                  | 01-0322531 | 501(C)(3)                     | 60,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER<br>SERVICES |
| KINGS COUNTY COMMISSION ON AGING<br>10953 14TH AVENUE<br>ARMONA, CA 93202                            | 94-1723493 | 501(C)(3)                     | 60,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER<br>SERVICES |

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| AGE WELL<br>875 ROOSEVELT HWY<br>COLCHESTER, VT 05446   | 22-2474636 | 501(C)(3)                     | 60,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CEAP MEALS ON WHEELS<br>7051 BROOKLYN BOULEVARD<br>BROOKLYN CENTER, MN 55429                            | 41-0990340 | 501(C)(3)                     | 59,469.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| TEAM, INC.<br>30 ELIZABETH STREET<br>DERBY, CT 06418  | 06-0835182 | 501(C)(3)                     | 59,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| IONA SENIOR SERVICES<br>4125 ALBEMARLE STREET NW<br>WASHINGTON, DC 20016                                | 52-1039553 | 501(C)(3)                     | 59,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FAMILY SERVICES OF MONTGOMERY COUNTY - MEALS ON WHEELS - 1976<br>EAST HIGH STREET - POTTSTOWN, PA 19464 | 23-1352361 | 501(C)(3)                     | 58,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMON GROUND SENIOR SERVICES<br>80 RIDGE ROAD<br>SUTTER CREEK, CA 95685                                | 68-0463039 | 501(C)(3)                     | 58,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| TORRANCE-LOMITA MEALS ON WHEELS<br>C/O CHURCH OF CHRIST<br>TORRANCE, CA 90503                           | 95-2886609 | 501(C)(3)                     | 58,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| EVELYN RUBENSTEIN JCC OF HOUSTON<br>5601 S. BRAESWOOD BLVD.<br>HOUSTON, TX 77096                        | 74-1198298 | 501(C)(3)                     | 57,075.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF THE MONTEREY PENINSULA INC. - 700 JEWELL AVENUE<br>- PACIFIC GROVE, CA 93950         | 94-2157521 | 501(C)(3)                     | 56,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| CATHOLIC CHARITIES DIOCESE OF SAN DIEGO - PO BOX 121831 - SAN DIEGO, CA 92112             | 51-0464013 | 501(C)(3)                     | 54,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS SPOKANE<br>1222 W. 2ND AVE.<br>SPOKANE, WA 99201                          | 91-0833015 | 501(C)(3)                     | 54,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS VICTORIA<br>P.O. BOX 1433<br>VICTORIA, TX 77902                           | 74-2116391 | 501(C)(3)                     | 53,862.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KENAI SENIOR SERVICES/CITY OF KENAI - 361 SENIOR CT. - KENAI, AK 99611                    | 92-0131229 | 501(C)(3)                     | 52,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR COASTSIDERS<br>925 MAIN STREET<br>HALF MOON BAY, CA 94019                          | 94-3119310 | 501(C)(3)                     | 52,400.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| RALEIGH COUNTY COMMISSION ON AGING<br>1614 S. KANAWHA ST.<br>BECKLEY, WV 25801            | 55-0612785 | 501(C)(3)                     | 50,796.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS TRI-COUNTY<br>P.O. BOX 1365<br>PALESTINE, TX 75802                        | 75-1525201 | 501(C)(3)                     | 50,574.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF STATEN ISLAND, INC. - 304 PORT RICHMOND AVE. - STATEN ISLAND, NY 10302 | 13-2894978 | 501(C)(3)                     | 50,567.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| STODDARD COUNTY SENIOR CITIZENS AGENCY - 23 WEST STODDARD STREET - DEXTER, MO 63841       | 43-1447330 | 501(C)(3)                     | 50,444.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| MAMA'S KITCHEN<br>3960 HOME AVENUE<br>SAN DIEGO, CA 92105                            | 33-0434246 | 501(C)(3)                     | 50,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HAWAII MEALS ON WHEELS, INC.<br>PO BOX 61194<br>HONOLULU, HI 96839                   | 99-0198132 | 501(C)(3)                     | 50,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FAMILY SERVICE ASSOCIATION<br>21250 BOX SPRINGS ROAD<br>MORENO VALLEY, CA 92557      | 95-1803694 | 501(C)(3)                     | 50,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GRAND RIVER MULTIPURPOSE CENTER<br>607 W. BUSINESS ROUTE 36<br>CHILLICOTHE, MO 64601 | 81-2854745 | 501(C)(3)                     | 50,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS PENNSYLVANIA<br>C/O BERKS ENCORE<br>READING, PA 19601                | 27-3882726 | 501(C)(3)                     | 50,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS WACO<br>501 W. WACO DRIVE<br>WACO, TX 76707                          | 74-1776447 | 501(C)(3)                     | 49,989.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF GREATER<br>LYNCHBURG - P.O. BOX 1388 -<br>LYNCHBURG, VA 24505     | 23-7399875 | 501(C)(3)                     | 49,773.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HOOD COUNTY COMMITTEE ON AGING<br>PO BOX 849<br>GRANBURY, TX 76048                   | 75-1630812 | 501(C)(3)                     | 49,574.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF LONG BEACH,<br>INC. - P.O. BOX 15688 - LONG<br>BEACH, CA 90815    | 95-2829715 | 501(C)(3)                     | 49,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government   | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| COAL CREEK MEALS ON WHEELS<br>455 N. BURLINGTON AVENUE<br>LAFAYETTE, CO 80026                | 84-0634856 | 501(C)(3)                     | 49,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MINUTEMAN SENIOR SERVICES<br>26 CROSBY DR.<br>BEDFORD, MA 01730                              | 04-2587212 | 501(C)(3)                     | 48,760.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY EMERGENCY SERVICE<br>1900 11TH AVE S<br>MINNEAPOLIS, MN 55404                      | 41-1728341 | 501(C)(3)                     | 48,600.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS, INC.<br>1025 PENNSYLVANIA AVENUE<br>LINDEN, NJ 07036                        | 22-1946479 | 501(C)(3)                     | 47,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR RESOURCE CENTER<br>15856 E. FIFTH ST.<br>HAYWARD, WI 54843                            | 39-1519694 | 501(C)(3)                     | 47,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WISE COUNTY COMMITTEE ON AGING,<br>INC. - PO BOX 903 - DECATUR, TX<br>76234                  | 75-1651529 | 501(C)(3)                     | 46,600.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WHITE RIVER AREA AGENCY ON AGING<br>PO BOX 2637<br>BATESVILLE, AR 72503                      | 71-0521442 | 501(C)(3)                     | 46,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF GREELEY AND<br>WELD COUNTY - 2131 9TH ST. -<br>GREELEY, CO 80631          | 84-0673693 | 501(C)(3)                     | 46,200.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CUMBERLAND COUNTY COUNCIL ON OLDER<br>ADULTS - 339 DEVERS STREET -<br>FAYETTEVILLE, NC 28303 | 56-0902659 | 501(C)(3)                     | 46,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| CABARRUS MEALS ON WHEELS<br>1701 SOUTH MAIN STREET<br>KANNAPOLIS, NC 28081             | 56-1172942 | 501(C)(3)                     | 45,128.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KEN-TON MEALS ON WHEELS<br>169 SHERIDAN PARKSIDE DR.<br>TONAWANDA, NY 14150            | 16-1093437 | 501(C)(3)                     | 45,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PUTNAM COUNTY SENIOR CITIZENS ORGANIZATION - 116 S. 17TH STREET - UNIONVILLE, MO 63565 | 43-1063546 | 501(C)(3)                     | 44,426.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIORCARE, INC.<br>49 BLACKBURN CENTER<br>GLOUCESTER, MA 01930                        | 04-2512171 | 501(C)(3)                     | 44,266.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF MERCER COUNTY<br>320 HOLLOWBROOK DRIVE<br>EWING, NJ 08638           | 22-1990231 | 501(C)(3)                     | 44,226.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CARSON CITY SENIOR CITIZEN CENTER<br>911 BEVERLY DRIVE<br>CARSON CITY, NV 89706        | 88-0123061 | 501(C)(3)                     | 43,357.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF DURHAM, INC.<br>2522 ROSS RD.<br>DURHAM, NC 27703                   | 56-1729111 | 501(C)(3)                     | 43,256.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SUMMIT COUNTY COMMUNITY AND SENIOR CENTER - P.O. BOX 1845 - FRISCO, CO 80443           | 84-0989154 | 501(C)(3)                     | 43,161.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR CONNECTIONS<br>1805 NORTH 16TH STREET<br>SUPERIOR, WI 54880                     | 39-1602800 | 501(C)(3)                     | 43,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| CHRISTIAN SERVICES, INC.<br>P.O. BOX 1994<br>HATTIESBURG, MS 39403                            | 64-0730835 | 501(C)(3)                     | 43,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MAC, INC.<br>909 PROGRESS CIRCLE, SUITE 100<br>SALISBURY, MD 21804                            | 52-0992005 | 501(C)(3)                     | 42,499.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COUNCIL ON AGING FOR HENDERSON COUNTY - 105 KING CREEK BLVD. -<br>HENDERSONVILLE, NC 28792    | 56-0936674 | 501(C)(3)                     | 42,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS IN GREATER NEW BRUNSWICK - 211 LIVINGSTON AVENUE -<br>NEW BRUNSWICK, NJ 08901 | 22-2402945 | 501(C)(3)                     | 42,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BLOOMINGTON MEALS ON WHEELS<br>601 W 2ND STREET<br>BLOOMINGTON, IN 47402                      | 31-0941563 | 501(C)(3)                     | 41,419.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS - ANDERSON<br>P.O. BOX 285<br>ANDERSON, SC 29622                              | 57-0634729 | 501(C)(3)                     | 41,031.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CHEROKEE COUNTY MEALS ON WHEELS<br>P.O. BOX 1886<br>GAFFNEY, SC 29342                         | 57-0773044 | 501(C)(3)                     | 41,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ROCKDALE COUNTY SENIOR SERVICES<br>1240 DOGWOOD DRIVE SW<br>CONYERS, GA 30012                 | 11-1111111 | N/A                           | 41,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF WHEATON<br>10101 CONNECTICUT AVENUE<br>KENSINGTON, MD 20895                | 52-0948124 | 501(C)(3)                     | 41,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| COUNCIL ON AGING SERVICES FOR SENIORS - SANTA ROSA - 30 KAWANA SPRINGS RD. - SANTA ROSA, CA 95404 | 94-6138714 | 501(C)(3)                     | 40,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LUBBOCK MEALS ON WHEELS<br>2304 34TH STREET<br>LUBBOCK, TX 79411                                  | 75-1333736 | 501(C)(3)                     | 39,900.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| EDMOND MOBILE MEALS, INC.<br>25 W. 3RD ST.<br>EDMOND, OK 73003                                    | 73-1250443 | 501(C)(3)                     | 39,556.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KEYSTONE HOSPICE<br>8765 STENTON AVENUE<br>WYNDMOOR, PA 19038                                     | 23-2757697 | 501(C)(3)                     | 39,549.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| THE HEALTH TRUST<br>1400 PARKMOOR AVE<br>SAN JOSE, CA 95126                                       | 94-6050231 | 501(C)(3)                     | 39,223.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CARE CONNECTION FOR AGING SERVICES<br>106 WEST YOUNG<br>WARRENSBURG, MO 64093                     | 43-1015585 | 501(C)(3)                     | 39,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ST. PAUL'S MEALS ON WHEELS, INC.<br>416 CENTER AVENUE<br>PITCAIRN, PA 15140                       | 46-3362083 | 501(C)(3)                     | 37,949.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WHITE COUNTY AGING PROGRAM, INC.<br>2200 EAST MOORE AVENUE<br>SEARCY, AR 72143                    | 71-0697311 | 501(C)(3)                     | 37,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SERVICES FOR OLDER CITIZENS<br>158 RIDGE RD.<br>GROSSE POINTE, MI 48236                           | 38-2254509 | 501(C)(3)                     | 37,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| CALLAHAN COUNTY NUTRITION PROJECT<br>100 WEST 4TH STREET<br>BAIRD, TX 79504                                  | 75-2905021 | 501(C)(3)                     | 37,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WESTMASS ELDERCARE<br>4 VALLEY MILL RD.<br>HOLYOKE, MA 01040   | 04-2545848 | 501(C)(3)                     | 36,719.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS NEW HAMPSHIRE<br>395 DANIEL WEBSTER HWY.<br>MERRIMACK, NH 03054                              | 81-4736530 | 501(C)(3)                     | 36,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ST. JOSEPH COMMUNITY SERVICES<br>P.O. BOX 910<br>MERRIMACK, NH 03054   | 02-0335003 | 501(C)(3)                     | 35,740.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SAGE ELDERCARE<br>290 BROAD STREET<br>SUMMIT, NJ 07901   | 22-1657929 | 501(C)(3)                     | 35,532.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CULVER PALMS MEALS ON WHEELS<br>4427 OVERLAND AVE<br>CULVER CITY, CA 90230                                   | 95-2891033 | 501(C)(3)                     | 35,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WASHINGTON COUNTY SENIOR SERVICES,<br>INC. - 305 N. NASHVILLE ST. -<br>OKAWVILLE, IL 62271                   | 37-1092072 | 501(C)(3)                     | 35,347.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR SERVICES CONSORTIUM OF<br>RAMSEY COUNTY - 160 E. KELLOGG<br>BLVD., SUITE 9100 - ST. PAUL, MN<br>55101 | 31-1689516 | 501(C)(3)                     | 35,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CROWN CENTER FOR SENIOR LIVING<br>8350 DELCREST DRIVE<br>ST. LOUIS, MO 63124                                 | 43-1695861 | 501(C)(3)                     | 35,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| MEALS ON WHEELS NORTHEASTERN ILLINOIS - 1723 SIMPSON ST - EVANSTON, IL 60201            | 36-2662113 | 501(C)(3)                     | 34,463.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SIERRA SENIOR PROVIDERS, INC.<br>540 GREENLEY RD.<br>SONORA, CA 95370                   | 77-0432625 | 501(C)(3)                     | 34,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF WILKES COUNTY<br>710 VETERANS DRIVE<br>NORTH WILKESBORO, NC 28659    | 56-0857800 | 501(C)(3)                     | 34,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AEOA SENIOR SERVICES<br>702 THIRD AVENUE SOUTH<br>VIRGINIA, MN 55792                    | 41-6052144 | 501(C)(3)                     | 33,939.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR LIFE RESOURCES, MEALS ON WHEELS - 1824 FOWLER STREET - RICHLAND, WA 99352        | 91-0909913 | 501(C)(3)                     | 33,341.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GRAFTON COUNTY SENIOR CITIZENS COUNCIL, INC. - 10 CAMPBELL ST - LEBANON, NH 03766       | 23-7248316 | 501(C)(3)                     | 32,787.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SOUTHERN ARIZONA AIDS FOUNDATION<br>375 S. EUCLID AVE.<br>TUCSON, AZ 85719              | 86-0864100 | 501(C)(3)                     | 32,783.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR SERVICES OF ALEXANDRIA<br>206 N. WASHINGTON STREET, #301<br>ALEXANDRIA, VA 22314 | 54-0842806 | 501(C)(3)                     | 32,558.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR CITIZENS CLUB OF PETROLIA<br>PO BOX 234<br>PETROLIA, TX 76377                    | 75-1744367 | 501(C)(3)                     | 32,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| MEALS ON WHEELS YOLO COUNTY<br>40 N. EAST ST. SUITE C<br>WOODLAND, CA 95776        | 94-1599229 | 501(C)(3)                     | 31,804.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SPECTRUM COMMUNITY SERVICES<br>2621 BARRINGTON CT<br>HAYWARD, CA 94545             | 94-1748275 | 501(C)(3)                     | 31,804.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS NORTH JERSEY<br>100 MADISON AVENUE, SUITE 3<br>WESTWOOD, NJ 07675  | 22-2340025 | 501(C)(3)                     | 31,747.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AGING AHEAD<br>14535 MANCHESTER RD.<br>MANCHESTER, MO 63011                        | 43-1833987 | 501(C)(3)                     | 31,426.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS GUILFORD COUNTY<br>1401 BENJAMIN PARKWAY<br>GREENSBORO, NC 27408   | 56-1181577 | 501(C)(3)                     | 31,256.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CLAY COUNTY SENIOR CITIZENS<br>PO BOX 533<br>HENRIETTA, TX 76365                   | 75-1667838 | 501(C)(3)                     | 31,074.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KC KOSHER MEALS ON WHEELS<br>10147 MACKEY STREET<br>OVERLAND PARK, KS 66212        | 43-1772532 | 501(C)(3)                     | 31,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF THE PALM BEACHES, INC. - P.O. BOX 247 - W. PALM BEACH, FL 33402 | 27-2891297 | 501(C)(3)                     | 30,622.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| OSWEGO COUNTY OPPORTUNITIES, INC.<br>239 ONEIDA STREET<br>FULTON, NY 13069         | 16-0979876 | 501(C)(3)                     | 30,567.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| KANAWHA VALLEY SENIOR SERVICES,<br>INC. - 2428 KANAWHA BOULEVARD, E -<br>CHARLESTON, WV 25311       | 55-0626556 | 501(C)(3)                     | 30,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| EASTERN AREA AGENCY ON AGING<br>240 STATE STREET<br>BREWER, ME 04412                                | 01-0328376 | 501(C)(3)                     | 30,178.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CHEER, INC.<br>546 S. BEDFORD ST.<br>GEORGETOWN, DE 19947   | 51-0112599 | 501(C)(3)                     | 30,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| INDEPENDENCE COUNTY - SENIOR<br>CITIZENS PROGRAM - 1590 E. COLLEGE<br>STREET - BATESVILLE, AR 72501 | 71-6016119 | 501(C)(3)                     | 30,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR RESOURCE CONNECTION<br>105 S. WILKINSON STREET<br>DAYTON, OH 45402                           | 31-0592759 | 501(C)(3)                     | 30,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HUMBOLDT SENIOR RESOURCE CENTER<br>1910 CALIFORNIA ST.<br>EUREKA, CA 95501                          | 94-2261434 | 501(C)(3)                     | 29,536.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF NEW CASTLE<br>P.O. BOX 5122<br>NEW CASTLE, PA 16105                              | 27-0608967 | 501(C)(3)                     | 29,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MACEDONIA FACE<br>5001 BAUM BOULEVARD<br>PITTSBURGH, PA 15213                                       | 25-1778222 | 501(C)(3)                     | 29,400.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| THE FRIENDLY KITCHEN<br>1771 W. HARVARD AVE.<br>ROSEBURG, OR 97471                                  | 93-0779289 | 501(C)(3)                     | 29,036.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| LIVE OAK SENIORS, INC.<br>P.O. BOX 1389<br>CLEARLAKE OAKS, CA 95423                          | 94-2768581 | 501(C)(3)                     | 29,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CHICO MEALS ON WHEELS<br>P.O. BOX 1662<br>CHICO, CA 95927                                    | 94-1732875 | 501(C)(3)                     | 29,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FRANKLIN COUNTY COUNCIL ON AGING,<br>INC - 202 MEDICAL HEIGHTS DR. -<br>FRANKFORT, KY 40601  | 61-6041002 | 501(C)(3)                     | 28,882.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| DAVISS COUNTY MULTI-PURPOSE<br>SENIOR CENTER, INC. - 109 S. MAIN<br>ST. - GALLATIN, MO 64640 | 43-1037501 | 501(C)(3)                     | 28,626.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LIFEPATH, INC.<br>101 MUNSON STREET, SUITE 201<br>GREENFIELD, MA 01301                       | 04-2542539 | 501(C)(3)                     | 28,166.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR HUB MEALS ON WHEELS<br>10190 BANNOCK STREET<br>NORTH GLENN, CO 80260                  | 74-2412032 | 501(C)(3)                     | 28,161.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| DIGNITY HEALTH CONNECTED LIVING<br>200 MERCY OAKS DRIVE<br>REDDING, CA 96003                 | 23-7115371 | 501(C)(3)                     | 28,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS NORTHEAST<br>TENNESSEE - 704 ROLLING HILLS<br>DRIVE - JOHNSON CITY, TN 37604 | 62-0928394 | 501(C)(3)                     | 27,645.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BARRE HOUSING SERVICES/CITY HOTEL<br>CAF - 30 WASHINGTON ST. - BARRE,<br>VT 05641            | 46-5180875 | 501(C)(3)                     | 27,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| MEALS ON WHEELS BURLINGTON COUNTY<br>795 WOODLANE ROAD<br>WESTAMPTON, NJ 08060                       | 21-6000107 | 501(C)(3)                     | 27,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AMHERST MEALS ON WHEELS, INC.<br>370 AUDUBON PARKWAY<br>AMHERST, NY 14228                            | 16-1240804 | 501(C)(3)                     | 27,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF WILLIAMSON & BURNET COUNTIES - 604 HIGH TECH DRIVE - GEORGETOWN, TX 78626         | 74-6075213 | 501(C)(3)                     | 26,915.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LIFEBRIDGE COMMUNITY SERVICES<br>475 CLINTON AVENUE<br>BRIDGEPORT, CT 06605                          | 06-0646974 | 501(C)(3)                     | 26,827.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS ERIE<br>4408 PEACH ST.<br>ERIE, PA 16509   | 51-0200640 | 501(C)(3)                     | 26,549.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF CHARLOTTE COUNTY, INC. - 3082 TAMIAMI TRAIL - PORT CHARLOTTE, FL 33952            | 59-1358912 | 501(C)(3)                     | 26,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF DENTON COUNTY<br>1800 MALONE ST.<br>DENTON, TX 76201                              | 75-1497010 | 501(C)(3)                     | 26,064.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MYSTIC VALLEY ELDER SERVICES<br>300 COMMERCIAL STREET - #19<br>MALDEN, MA 02148                      | 04-2562646 | 501(C)(3)                     | 26,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| OTTAWA COUNTY SENIOR RESOURCES - HOME DELIVERED MEALS - 8180 W. STATE RT. 163 - OAK HARBOR, OH 43449 | 11-1111111 | N/A                           | 26,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government                                     | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| FEEDMORE - MEALS ON WHEELS<br>1415 RHOADMILLER STREET<br>RICHMOND, VA 23220            | 54-1150923 | 501(C)(3)                     | 26,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AZCEND<br>P.O. BOX 591<br>CHANDLER, AZ 85244   | 86-0428780 | 501(C)(3)                     | 25,710.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY MEALS, INC.<br>C/O COMMUNITY CHURCH OF GLEN ROCK<br>GLEN ROCK, NJ 07452      | 22-1607272 | 501(C)(3)                     | 25,208.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AGING PROJECTS, INC./FRIENDSHIP MEALS - 112 W SHERMAN STREET - HUTCHINSON, KS 67501    | 48-0813686 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SERVICE OPPORTUNITY FOR SENIORS<br>2235 POLVOROSA DR. STE 260<br>SAN LEANDRO, CA 94577 | 94-1725204 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WASHOE COUNTY HUMAN SERVICES AGENCY - 350 SOUTH CENTER STREET - RENO, NV 89501         | 11-1111111 | N/A                           | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| 60'S PLUS DINING - ICAP<br>PO BOX 268<br>MADISON, SD 57042                             | 46-0282131 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS NORTHWEST ARKANSAS<br>506 E. SPRUCE ST.<br>ROGERS, AR 72757            | 71-0406286 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ADRC OF BROWN COUNTY<br>300 S. ADAMS STREET<br>GREEN BAY, WI 54301                     | 39-1286261 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| SENIOR CITIZENS ASSOCIATION HOME<br>DELIVERED MEALS - 600 SENIOR WAY -<br>FLORENCE, SC 29505 | 57-0515239 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| METROPORT MEALS ON WHEELS<br>P.O. BOX 204<br>ROANOKE, TX 76262                               | 75-2298847 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS KITSAP<br>2817 WHEATON WAY, SUITE 208<br>BREMERTON, WA 98310                 | 91-1197374 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SHIAWASSEE COUNCIL ON AGING<br>300 N WASHINGTON ST<br>OWOSSO, MI 48867                       | 38-2052027 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WALTON COUNTY SENIOR CITIZENS<br>PO BOX 764<br>MONROE, GA 30655                              | 58-1076363 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PROJECT ANGEL HEART<br>4950 WASHINGTON STREET<br>DENVER, CO 80216                            | 84-1199481 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BAKER COUNTY COUNCIL ON AGING<br>9264 BUCK STARLING ROAD<br>MACCLENNY, FL 32063              | 59-1596339 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MOORESBURG COMMUNITY ASSOCIATION<br>318 MCNEIL CIRCLE<br>MOORESBURG, TN 37811                | 94-3416521 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LTSC COMMUNITY DEVELOPMENT<br>CORPORATION - 231 EAST 3RD STREET<br>- LOS ANGELES, CA 90013   | 95-4444102 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| SAN PEDRO MEALS ON WHEELS<br>731 SOUTH AVERILL AVENUE<br>SAN PEDRO, CA 90732              | 95-2803612 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HOCKING ATHENS PERRY COMMUNITY ACTION (HAPCAP) - 3 CARDARAS DRIVE<br>- GLOUSTER, OH 45732 | 31-0718322 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MINOT COMMISSION ON AGING<br>21 1ST AVE. SE<br>MINOT, ND 58701                            | 45-0318382 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MAT-SU SENIOR SERVICES<br>1132 S. CHUGACH ST.<br>PALMER, AK 99645                         | 92-0078503 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MUSKINGUM COUNTY CENTER FOR SENIORS - 160 N. 4TH STREET -<br>ZANESVILLE, OH 43701         | 91-1884444 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NORTHEAST KANSAS AREA AGENCY ON AGING - 1803 OREGON AVENUE -<br>HIAWATHA, KS 66434        | 48-0802891 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIORS FIRST<br>12183 LOCKSLEY LANE #205<br>AUBURN, CA 95602                             | 68-0430154 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| JEWISH FAMILY SERVICE OF GREATER DALLAS - 5402 ARAPAHO ROAD -<br>DALLAS, TX 75248         | 32-0307257 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BLADEN COUNTY DIVISION ON AGING<br>608 MCLEOD STREET<br>ELIZABETHTOWN, NC 28337           | 11-1111111 | N/A                           | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| THE SENIOR ALLIANCE, INC.<br>5454 VENOEY ROAD<br>WAYNE, MI 48184                              | 38-2322126 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KANKAKEE COUNTY COMMUNITY SERVICES<br>657 E COURT ST SUITE 207<br>KANKAKEE, IL 60901          | 36-3478633 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LAMAR COUNTY HUMAN RESOURCES COUNCIL, INC - P.O. BOX 714 -<br>PARIS, TX 75461                 | 75-1494942 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CAPITAL AREA AGENCY ON AGING<br>PO BOX 66038<br>BATON ROUGE, LA 70896                         | 72-0738045 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PROSPECT HILL SENIOR CENTER<br>283 PROSPECT AVENUE<br>BROOKLYN, NY 11215                      | 11-1111111 | N/A                           | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NEW HANOVER COUNTY SENIOR RESOURCE CENTER - 2222 SOUTH COLLEGE ROAD -<br>WILMINGTON, NC 28403 | 56-6000324 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AGEWELL SERVICES<br>275 WEST CLAY AVENUE<br>MUSKEGON, MI 49440                                | 38-2033822 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT - 22 SPIRAL DRIVE -<br>FLORENCE, KY 41042         | 61-0719369 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SOUTH LOUISVILLE COMMUNITY MINISTRIES - 415 1/2 W. ASHLAND AVENUE - LOUISVILLE, KY 40214      | 31-0891259 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)



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| FLUVANNA MEALS ON WHEELS, INC.<br>105 CROFTON PLAZA, SUITE 8<br>PALMYRA, VA 22963      | 26-0185272 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HIGHLANDS SENIOR SERVICE CENTER<br>PO BOX 180<br>CLEARLAKE, CA 95422                   | 68-0010987 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIORSPLUS<br>8 FALCON ROAD<br>LEWISTON, ME 04240                                     | 01-0317103 | 501(C)(3)                     | 25,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COSHOCTON SENIOR CENTER<br>201 BROWN'S LANE<br>COSHOCTON, OH 43812                     | 31-0720520 | 501(C)(3)                     | 24,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| TRAINING, EMPLOYMENT & COMMUNITY<br>HELP, INC. - 112 E. 2ND ST. -<br>ALTURAS, CA 96101 | 94-2578204 | 501(C)(3)                     | 24,404.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PASADENA MEALS ON WHEELS<br>500 EAST COLORADO BOULEVARD<br>PASADENA, CA 91101          | 95-6111667 | 501(C)(3)                     | 24,354.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| JAMIESON COMMUNITY CENTER<br>PO BOX 495<br>MONMOUTH, IL 61462                          | 37-0912489 | 501(C)(3)                     | 24,200.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIORS ASSISTANCE CENTER<br>7774 W. IRVING PARK RD.<br>NORRIDGE, IL 60706             | 36-2918912 | 501(C)(3)                     | 24,100.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SE CLERGY MEALS ON WHEELS<br>415 NORTHFIELD RD.<br>BEDFORD, OH 44146                   | 34-1475654 | 501(C)(3)                     | 24,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| THE SENIOR CONNECTION<br>PO BOX 28<br>HAILEY, ID 83333                                  | 82-0315917 | 501(C)(3)                     | 23,762.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF SYRACUSE<br>300 BURT ST.<br>SYRACUSE, NY 13202                       | 16-0970999 | 501(C)(3)                     | 23,067.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NORTH AREA MEALS ON WHEELS<br>413 CHURCH STREET<br>NORTH SYRACUSE, NY 13212             | 22-2296486 | 501(C)(3)                     | 23,067.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| DETROIT AREA AGENCY ON AGING<br>1333 BREWERY PARK BOULEVARD, SUITE<br>DETROIT, MI 48207 | 38-2320421 | 501(C)(3)                     | 23,057.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NATRONA COUNTY MEALS ON WHEELS<br>1760 EAST 12TH STREET<br>CASPER, WY 82601             | 83-0214230 | 501(C)(3)                     | 23,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NEW ORLEANS COUNCIL ON AGING<br>2475 CANAL ST, STE. 400<br>NEW ORLEANS, LA 70119        | 72-0634096 | 501(C)(3)                     | 23,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF SALEM COUNTY<br>90 MARKET STREET<br>SALEM, NJ 08079                  | 22-2158433 | 501(C)(3)                     | 22,976.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF CHEMUNG COUNTY<br>409 WILLIAM STREET<br>ELMIRA, NY 14901             | 16-1353247 | 501(C)(3)                     | 22,972.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CITY OF PACIFICA<br>540 CRESPI DRIVE<br>PACIFICA, CA 94044                              | 11-1111111 | N/A                           | 22,800.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| EAST COOPER MEALS ON WHEELS<br>PO BOX 583<br>MOUNT PLEASANT, SC 29465                                  | 57-0804618 | 501(C)(3)                     | 22,700.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF BOSTON<br>246 SEAVER ST.<br>DORCHESTER, MA 02121                                    | 26-3491532 | 501(C)(3)                     | 22,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF<br>ASHEVILLE-BUNCOMBE COUNTY - 146<br>VICTORIA ROAD - ASHEVILLE, NC<br>28801        | 56-1115597 | 501(C)(3)                     | 22,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MCDOWELL COUNTY COMMISSION ON<br>AGING - 725 STEWART ST. - WELCH,<br>WV 24801                          | 55-0567694 | 501(C)(3)                     | 21,996.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS WICHITA FALLS<br>1000 BURNETT STREET<br>WICHITA FALLS, TX 76301                        | 75-1242736 | 501(C)(3)                     | 21,915.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AREA AGENCY ON AGING REGION X<br>531E. 15TH STREET<br>JOPLIN, MO 64803                                 | 43-1159115 | 501(C)(3)                     | 21,915.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| RADIANT HEALTH CENTERS<br>17982 SKY PARK CIR, SUITE J<br>IRVINE, CA 92614                              | 33-0126481 | 501(C)(3)                     | 21,804.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BIG VALLEY 50 PLUS<br>P.O. BOX 586<br>BIEBER, CA 96009   | 94-2654948 | 501(C)(3)                     | 21,304.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| VIC-VALLEY<br>INTERFAITH/INTERCOMMUNITY COUNCIL,<br>INC. - 13300 VICTORY BLVD. - VAN<br>NUYS, CA 91401 | 95-2653387 | 501(C)(3)                     | 21,276.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| PIEDMONT SENIOR RESOURCES AREA<br>AGENCY IN AGING - 1413 SOUTH MAIN<br>STREET - FARMVILLE, VA 23901    | 54-1025127 | 501(C)(3)                     | 21,058.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR CITIZENS ACTIVITY CENTER OF<br>BURKBURNETT, INC. - 220 E. 5TH<br>STREET - BURKBURNETT, TX 76354 | 75-1607070 | 501(C)(3)                     | 21,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CONCERNED CITIZENS OF JACK COUNTY,<br>INC. - 400 EAST PINE STREET -<br>JACKSBORO, TX 76458             | 75-1597134 | 501(C)(3)                     | 20,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS FOR THE ELDERLY<br>310 E. HOUSTON HARTE<br>SAN ANGELO, TX 76903                                  | 51-0159134 | 501(C)(3)                     | 20,074.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF SUMMERVILLE,<br>INC. - PO BOX 592 - SUMMERVILLE,<br>SC 29484                        | 57-0730993 | 501(C)(3)                     | 20,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| DARLINGTON COUNTY COUNCIL ON AGING<br>402 PEARL STREET<br>DARLINGTON, SC 29532                         | 57-0680050 | 501(C)(3)                     | 20,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MULTI-PURPOSE COMMUNITY ACTION<br>AGENCY - 207 WASHINGTON STREET -<br>SHELBYVILLE, KY 40066            | 61-0867061 | 501(C)(3)                     | 20,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ROCS DINING SERVICES<br>106 WEST AVENUE SOUTHWEST<br>WAGNER, SD 57380                                  | 46-0365648 | 501(C)(3)                     | 20,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LANCASTER COUNTY COUNCIL ON AGING<br>PO BOX 1296<br>LANCASTER, SC 29721                                | 57-0161585 | 501(C)(3)                     | 20,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| COMMUNITY ACTION AGENCY<br>507 FIRST AVENUE NORTH<br>ESCANABA, MI 49829                                    | 38-1795659 | 501(C)(3)                     | 20,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BI-COUNTY NUTRITION<br>416 1/2 OHIO AVE.<br>NUTTER FORT, WV 26301  | 55-0626656 | 501(C)(3)                     | 20,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| REAL SERVICES, INC.<br>121 W. GARST ST.<br>SOUTH BEND, IN 46601  | 35-1157606 | 501(C)(3)                     | 20,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LA JOLLA MEALS ON WHEELS<br>9888 GENESEE AVE.<br>LA JOLLA, CA 92037  | 95-2880653 | 501(C)(3)                     | 20,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| JERSEY CITY DEPT HHS SENIOR<br>NUTRITION MEALS ON WHEELS - 199<br>SUMMIT AVENUE - JERSEY CITY, NJ<br>07304 | 11-1111111 | N/A                           | 20,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| STOREY COUNTY SENIOR CENTER<br>PO BOX 786<br>VIRGINIA CITY, NV 89512                                       | 94-2811382 | 501(C)(3)                     | 20,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WHISTLESTOP MEALS ON WHEELS<br>930 TAMALPAIS AVENUE<br>SAN RAFAEL, CA 94901                                | 94-1422463 | 501(C)(3)                     | 19,536.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GREENUP MEALS ON WHEELS, INC.<br>PO BOX 382<br>GREENUP, KY 41144   | 20-4201044 | 501(C)(3)                     | 19,400.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MAIN LINE MEALS ON WHEELS, INC.<br>P.O. BOX 801<br>DEVON, PA 19333   | 23-1907603 | 501(C)(3)                     | 19,149.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| BOWIE SENIOR CITIZENS PROJECT<br>501 PELHAM ST<br>BOWIE, TX 76230                                     | 75-1626387 | 501(C)(3)                     | 19,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GRAND RIVER MEALS ON WHEELS<br>501 AIRPORT ROAD<br>RIFLE, CO 81650                                    | 84-0736594 | 501(C)(3)                     | 18,161.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR ROUND TABLE<br>720 SPRAGUE AVE.<br>WALLA WALLA, WA 99362                                       | 91-0874461 | 501(C)(3)                     | 18,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| VOLUNTARY ACTION CENTER OF THE<br>IOWA GREAT LAKES, INC. - 800 21ST<br>STREET - SPIRIT LAKE, IA 51360 | 42-1021005 | 501(C)(3)                     | 17,818.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| STRAFFORD NUTRITION MEALS ON<br>WHEELS - 25 BARTLETT AVE -<br>SOMERSWORTH, NH 03878                   | 26-4545462 | 501(C)(3)                     | 17,787.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| TEMPE COMMUNITY ACTION AGENCY<br>2146 E. APACHE BLVD.<br>TEMPE, AZ 85281                              | 86-0254820 | 501(C)(3)                     | 17,783.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PARKER COMMUNITY SENIOR CENTER<br>1115 W 12TH ST<br>PARKER, AZ 85344                                  | 74-3097368 | 501(C)(3)                     | 17,783.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FIFTYFORWARD<br>174 RAINS AVENUE<br>NASHVILLE, TN 37203   | 62-0566419 | 501(C)(3)                     | 17,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS PLUS OF MANATEE<br>811 23RD AVENUE EAST<br>BRADENTON, FL 34208                        | 59-1420986 | 501(C)(3)                     | 17,495.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government   | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| NORTHERN AREA MULTI-SERVICE CENTER<br>209 THIRTEENTH STREET<br>PITTSBURGH, PA 15215            | 23-7139992 | 501(C)(3)                     | 17,412.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS LEWES & REHOBOTH, INC. - 32409 LEWES GEORGETOWN HWY - LEWES, DE 19958          | 51-0188109 | 501(C)(3)                     | 17,100.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GENERATIONS UNLIMITED<br>10915 ELLENTON STREET<br>BARNWELL, SC 29812                           | 57-0825211 | 501(C)(3)                     | 17,031.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GREAT NORTHERN SERVICES<br>310 BOLES STREET<br>WEED, CA 96094                                  | 94-2562423 | 501(C)(3)                     | 17,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR LIFE MIDLAND<br>PO BOX 80519<br>MIDLAND, TX 79708                                       | 75-1899190 | 501(C)(3)                     | 16,915.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BELOIT MEALS ON WHEELS<br>424 COLLEGE STREET<br>BELOIT, WI 53511                               | 39-1375390 | 501(C)(3)                     | 16,748.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR ADULT ACTIVITIES CENTER OF MONTGOMERY COUNTY - 536 GEORGE STREET - NORRISTOWN, PA 19401 | 23-1659451 | 501(C)(3)                     | 16,549.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BENDER JCC OF GREATER WASHINGTON<br>6125 MONTROSE ROAD<br>ROCKVILLE, MD 20852                  | 53-0205921 | 501(C)(3)                     | 16,499.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NORTHWEST DANE SENIOR SERVICES<br>1837 BOURBON RD.<br>CROSS PLAINS, WI 53528                   | 39-1691930 | 501(C)(3)                     | 16,348.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| CITY OF MARFA NUTRITION CENTER<br>PO BOX 787<br>MARFA, TX 79843                               | 74-6001684 | 501(C)(3)                     | 16,200.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF EASTERN<br>ONONDAGA COUNTY, INC. - PO BOX 72<br>- MANLIUS, NY 13104        | 23-7411928 | 501(C)(3)                     | 16,050.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY ACTION MEALS ON WHEELS<br>PROGRAM - 3225 LAKE AVENUE -<br>ASHTABULA, OH 44004       | 34-1059824 | 501(C)(3)                     | 16,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS IN HUNTERDON, INC.<br>5 WALTER FORAN BLVD., STE. 2006<br>FLEMINGTON, NJ 08822 | 22-3084358 | 501(C)(3)                     | 15,876.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF NEW ROCHELLE<br>50 PINTARD AVENUE<br>NEW ROCHELLE, NY 10801                | 13-3186919 | 501(C)(3)                     | 15,567.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PLUM SENIOR COMMUNITY CENTER<br>499 CENTER NEW TEXAS RD.<br>PITTSBURGH, PA 15239              | 25-1413004 | 501(C)(3)                     | 15,549.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AIDS SERVICES OF AUSTIN<br>7215 CAMERON RD.<br>AUSTIN, TX 78752                               | 74-2440845 | 501(C)(3)                     | 15,149.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS - SANTA MARIA<br>VALLEY - P.O. BOX 6526 - SANTA<br>MARIA, CA 93456            | 95-2757731 | 501(C)(3)                     | 15,100.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AREA AGENCY ON AGING, REGION ONE<br>1366 E. THOMAS RD<br>PHOENIX, AZ 85014                    | 74-2371957 | 501(C)(3)                     | 15,008.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| BROOMFIELD MEALS ON WHEELS<br>280 SPADER WAY<br>BROOMFIELD, CO 80020                        | 84-0862957 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR CENTER OF BOULDER CITY<br>813 ARIZONA ST<br>BOULDER CITY, NV 89005                   | 94-2928685 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| EASTSIDE MEALS ON WHEELS INC.<br>1510 33RD AVE. NE<br>MINNEAPOLIS, MN 55418                 | 41-1228367 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WEBB COMMUNITY ACTION AGENCY<br>520 REYNOLDS STREET<br>LAREDO, TX 78040                     | 74-1679668 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| INTERSERV<br>5400 KING HILL AVENUE<br>SAINT JOSEPH, MO 64504                                | 75-3197631 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF ERATH COUNTY<br>310 W. LINGLEVILLE ROAD<br>STEPHENVILLE, TX 76401        | 75-2588510 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BLOOMINGTON-EDEN PRAIRIE MEALS ON WHEELS - 8400 FRANCE AVENUE SOUTH - MINNEAPOLIS, MN 55431 | 41-0965825 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| TLC MEALS ON WHEELS<br>PO BOX 3108<br>CENTENNIAL, CO 80161                                  | 84-0617651 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY ACTION AGENCY OF NORTHWEST ALABAMA INC - 745 THOMPSON STREET - FLORENCE, AL 35630 | 63-0505905 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| COMMUNITY ACTION TEAM<br>125 N. 17TH STREET<br>SAINT HELENS, OR 97051                                 | 93-0554156 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CHARLOTTE COUNTY MEALS ON WHEELS<br>P.O. BOX 486<br>KEYSVILLE, VA 23947                               | 34-2025018 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| STATE COLLEGE AREA MEALS ON WHEELS, INC. - 205 S. GARNER ST. -<br>STATE COLLEGE, PA 16801             | 25-1215933 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AARONS PLACE INC.<br>24311 ROBINS CREEK ROAD<br>PRESTON, MD 21655                                     | 84-2099035 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WYANDOTTE/LEAVENWORTH AREA AGENCY<br>ON AGING - 849 N. 47TH STREET,<br>STE. C - KANSAS CITY, KS 66102 | 11-1111111 | N/A                           | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS FOR FORT COLLINS<br>1217 E. ELIZABETH ST.<br>FORT COLLINS, CO 80524                   | 23-7116630 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NEW OPPORTUNITIES INC.<br>232 NORTH ELM STREET<br>WATERBURY, CT 06702                                 | 06-6071847 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WOOD COUNTY SENIOR CITIZENS<br>ASSOCIATION - 914 MARKET STREET,<br>SUITE 106 - PARKERSBURG, WV 26101  | 55-0577681 | 501(C)(3)                     | 15,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BRADFORD REGIONAL MEDICAL CENTER<br>116 INTERSTATE PARKWAY<br>BRADFORD, PA 16701                      | 23-2875157 | 501(C)(3)                     | 14,912.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| JEWISH COMMUNITY CENTER OF LOUISVILLE - 3600 DUTCHMANS LANE - LOUISVILLE, KY 40205                             | 61-0444704 | 501(C)(3)                     | 14,882.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KEARNEY HOUSING DEVELOPMENT CORPORATION - 2715 AVENUE I, OFC - KEARNEY, NE 68848                               | 47-0782317 | 501(C)(3)                     | 14,824.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| YADKIN VALLEY ECONOMIC DEVELOPMENT DISTRICT, INC. (YVEDDI) - P.O. BOX 309 - BOONVILLE, NC 27011                | 56-0851147 | 501(C)(3)                     | 14,692.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY COOPERATIVE, INC. / MEALS ON WHEELS - 3429 DR. MARTIN LUTHER KING BLVD - FORT MYERS, FL 33916        | 59-2602772 | 501(C)(3)                     | 14,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MID FLORIDA COMMUNITY SERVICES, INC. - PO BOX 896 - BROOKSVILLE, FL 34605                                      | 59-1235202 | 501(C)(3)                     | 14,415.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NORTH MIAMI FOUNDATION FOR SENIOR CITIZENS SERVICES, INC. - 620 NORTHEAST 127TH STREET - NORTH MIAMI, FL 33161 | 59-1582766 | 501(C)(3)                     | 14,333.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS MECOSTA COUNTY 12954 80TH AVE. MECOSTA, MI 49332   | 38-2902050 | 501(C)(3)                     | 14,075.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LEXINGTON COUNTY RECREATION AND AGING COMMISSION - 125 PARKER STREET - LEXINGTON, SC 29072                     | 11-1111111 | N/A                           | 14,061.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| HIGHLAND COUNTY COMMUNITY ACTION 1487 N HIGH ST HILLSBORO, OH 45133  | 31-0720523 | 501(C)(3)                     | 14,018.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| OLDER PERSONS' COMMISSION<br>650 LETICA DRIVE<br>ROCHESTER, MI 48307                    | 38-3215151 | 501(C)(3)                     | 14,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KENNETH YOUNG CENTER MEALS ON WHEELS - 1001 ROHLWING RD. - ELK GROVE VILLAGE, IL 60007  | 23-7181444 | 501(C)(3)                     | 13,878.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COUNCIL OF SENIOR TYLER COUNTIANS, INC. - P.O. BOX 68 - MIDDLEBOURNE, WV 26149          | 55-0584199 | 501(C)(3)                     | 13,700.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WILSON COUNTY OFFICE OF SR. CITIZENS - 2101 TARBORO STREET SOUTHWEST - WILSON, NC 27893 | 56-1407529 | 501(C)(3)                     | 13,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| STEP, INC.<br>200 DENT STREET<br>ROCKY MOUNT, VA 24151                                  | 54-0801556 | 501(C)(3)                     | 13,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WEST SHORE MEALS ON WHEELS<br>101 NORTH 23RD STREET<br>CAMP HILL, PA 17011              | 23-7346126 | 501(C)(3)                     | 13,250.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BRIGHAM CITY SENIOR CENTER MEALS ON WHEELS - PO BOX 1005 - BRIGHAM CITY, UT 84302       | 11-1111111 | N/A                           | 13,154.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PITT COUNTY COUNCIL ON AGING<br>4551 COUNTY HOME ROAD<br>GREENVILLE, NC 27858           | 52-1042008 | 501(C)(3)                     | 13,128.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF COWETA<br>P.O. BOX 73437<br>NEWNAN, GA 30271                         | 58-1274374 | 501(C)(3)                     | 13,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| BUTLER COUNTY COUNCIL OF AGING,<br>INC. - 506 HAZEL E. - POPLAR<br>BLUFF, MO 63901                 | 43-1145820 | 501(C)(3)                     | 12,926.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WHITE RIVER HEALTH SYSTEM, INC.<br>1710 HARRISON STREET<br>BATESVILLE, AR 72501                    | 71-0411459 | 501(C)(3)                     | 12,600.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BRAZOS VALLEY COMMUNITY ACTION<br>PROGRAMS - 1733 BRIARCREST DR. -<br>BRYAN, TX 77802              | 81-3036685 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| EAC, INC.- MEALS ON WHEELS<br>50 CLINTON STREET, STE 107<br>HEMPSTEAD, NY 11550                    | 23-7175609 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CATHOLIC CHARITIES OF SOUTHERN<br>NEVADA - 1501 LAS VEGAS BOULEVARD<br>NORTH - LAS VEGAS, NV 89101 | 88-0059425 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| JEWISH FAMILY SERVICES OF<br>WASHTENAW COUNTY - 2245 SOUTH<br>STATE STREET - ANN ARBOR, MI 48103   | 41-2147486 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LINCOLN COUNTY OPPORTUNITY<br>COMPANY, INC. - 360 MAIN ST. -<br>HAMLIN, WV 25523                   | 55-0484660 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KEIKI TO KUPUNA FOUNDATION<br>94-252 PUPUOLE STREET<br>WAIPAHU, HI 96797                           | 46-1925372 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GUILFORD INTERFAITH VOLUNTEERS<br>310 STATE STREET<br>GUILFORD, CT 06437                           | 06-1139541 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| ENUMCLAW SENIOR CENTER<br>1350 COLE STREET<br>ENUMCLAW, WA 98022   | 91-1358596 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SOUTHWEST HUMAN RESOURCE AGENCY<br>1527 WHITE AVENUE<br>HENDERSON, TN 38340                                  | 62-6050783 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| RUSSIAN AMERICAN COMMUNITY SERVICES ASSOCIATION OF SAN FRANCISCO - 300 ANZA STREET - SAN FRANCISCO, CA 94118 | 94-2515360 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR CONNECT<br>PO BOX 1225<br>KAUFMAN, TX 75142   | 75-1701390 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MILFORD SENIOR CENTER / MILFORD COUNCIL ON AGING - 9 JEPSON DR. - MILFORD, CT 06460                          | 06-0863519 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| THE SOUP KITCHEN<br>8645 BOYNTON BEACH BLVD<br>BOYNTON BEACH, FL 33472                                       | 59-2628415 | 501(C)(3)                     | 12,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF HANCOCK COUNTY<br>1133 W MAIN ST.<br>GREENFIELD, IN 46140                                 | 35-2117913 | 501(C)(3)                     | 12,128.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ALLEGANY COUNTY OFFICE FOR THE AGING - 6085 ST. RT. 19N - BELMONT, NY 14813                                  | 16-6002554 | 501(C)(3)                     | 12,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NORWALK SENIOR CENTER - MEALS ON WHEELS - 11 ALLEN ROAD - NORWALK, CT 06851                                  | 23-7121169 | 501(C)(3)                     | 12,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| THOMPSON SENIOR CENTER<br>99 SENIOR LANE<br>WOODSTOCK, VT 05091                              | 03-0295419 | 501(C)(3)                     | 12,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF POLK COUNTY<br>620 6TH ST NW<br>WINTER HAVEN, FL 33881                    | 59-1427004 | 501(C)(3)                     | 12,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| THE ARK COMMUNITY RESOURCE CENTER<br>PO BOX 224<br>KINGSTON SPRINGS, TN 37082                | 06-1640635 | 501(C)(3)                     | 12,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF MAHONING COUNTY, INC. - 1840 MARKET STREET<br>- YOUNGSTOWN, OH 44507      | 34-1281564 | 501(C)(3)                     | 11,937.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MAPLE KNOLL OUTREACH SERVICES FOR SENIORS - 11275 SPRINGFIELD PIKE -<br>CINCINNATI, OH 45246 | 31-0544277 | 501(C)(3)                     | 11,915.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ECHO MEALS ON WHEELS WEST<br>4600 WEST GENESEE STREET<br>SYRACUSE, NY 13219                  | 16-1056063 | 501(C)(3)                     | 11,875.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WASHBURN COUNTY UNIT ON AGING<br>850 W. BEAVERBROOK ROAD<br>SPOONER, WI 54801                | 39-6005753 | 501(C)(3)                     | 11,748.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| RIVER WOODS SENIOR LIVING<br>15 RIDGECREST CIRCLE<br>LEWISBURG, PA 17837                     | 52-1862677 | 501(C)(3)                     | 11,600.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WESTERN OAKLAND MEALS ON WHEELS<br>9525 EAST HIGHLAND ROAD<br>HOWELL, MI 48843               | 38-2423943 | 501(C)(3)                     | 11,575.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

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| LIVINGSTON COUNTY SENIOR NUTRITION PROGRAM - 9525 E. HIGHLAND ROAD - HOWELL, MI 48843        | 38-2423943 | 501(C)(3)                     | 11,575.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CLERMONT SENIOR SERVICES, INC.<br>2085 JAMES E SAULS SR. DRIVE<br>BATAVIA, OH 45103          | 31-0832354 | 501(C)(3)                     | 11,518.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WESTLAKE MEALS ON WHEELS<br>2239 DOVER CENTER ROAD<br>WESTLAKE, OH 44145                     | 81-3904491 | 501(C)(3)                     | 11,500.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF LAPORTE COUNTY<br>301 E. 8TH STREET, SUITE 110<br>MICHIGAN CITY, IN 46360 | 35-1314352 | 501(C)(3)                     | 11,419.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AREAWIDE AGING AGENCY<br>4101 PERIMETER CENTER DRIVE<br>OKLAHOMA CITY, OK 73112              | 73-0960311 | 501(C)(3)                     | 11,400.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MID-EAST COMMUNITY ACTION AGENCY<br>P.O. BOX 790<br>KINGSTON, TN 37763                       | 62-0725458 | 501(C)(3)                     | 11,030.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BOND COUNTY SENIOR CENTER<br>1001 E. HARRIS AVE.<br>GREENVILLE, IL 62246                     | 37-1013068 | 501(C)(3)                     | 10,463.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COMMUNITY ACTION PARTNERSHIP OF CENTRAL ILLINOIS - 1800 FIFTH STREET - LINCOLN, IL 62656     | 37-0895679 | 501(C)(3)                     | 10,463.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF NORMAN<br>P.O. BOX 1371<br>NORMAN, OK 73070                               | 73-0931924 | 501(C)(3)                     | 10,141.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government   | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| VALLEY VIEW HOSPITAL<br>1906 BLAKE AVENUE<br>GLENWOOD SPRINGS, CO 81601                                | 73-1664673 | 501(C)(3)                     | 10,121.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF LOVELAND AND BERTHOUD - 437 N GARFIELD AVE - LOVELAND, CO 80537                     | 84-0583386 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF BENNINGTON COUNTY - 124 PLEASANT ST. - BENNINGTON, VT 05201                         | 03-0343945 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CCHAP--COLLABORATION STATION<br>4614 PROSPECT AVENUE EAST<br>CLEVELAND, OH 44103                       | 02-0574567 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SSM HEALTH AT HOME - MEALS ON WHEELS - 2802 WALTON COMMONS LANE - MADISON, WI 53718                    | 39-1839309 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF ALAMEDA COUNTY<br>1721 BROADWAY<br>OAKLAND, CA 94612                                | 94-2651065 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| STERLING SENIOR CENTER<br>34453 STERLING HIGHWAY<br>STERLING, AK 99672                                 | 94-3100045 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LUMBER RIVER COUNCIL OF GOVERNMENTS - 30 CJ WALKER ROAD - PEMBROKE, NC 28372                           | 56-0985258 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CAMDEN COUNTY DIVISION OF SENIOR & DISABLED CITIZEN SERVICES - 512 LAKELAND ROAD - BLACKWOOD, NJ 08012 | 21-6000504 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| VAN BUREN COUNTY AGING PROGRAM<br>311 YELLOWJACKET LANE<br>CLINTON, AR 72031                             | 71-0693353 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BINGHAM COUNTY SENIOR CITIZEN CENTER, INC - 20 EAST PACIFIC STREET - BLACKFOOT, ID 83221                 | 82-0291797 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NORTHEAST GEORGIA REGIONAL COMMISSION - AREA AGENCY ON AGING - 305 RESEARCH DR. - WATKINSVILLE, GA 30605 | 59-0902860 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WILLIAMSBURG AREA MEALS ON WHEELS<br>1769 JAMESTOWN ROAD<br>WILLIAMSBURG, VA 23185                       | 54-0952118 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BOYERTOWN AREA MULTI-SERVICE, INC.<br>200 WEST SPRING ST.<br>BOYERTOWN, PA 19512                         | 23-7289405 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| AGING BEST<br>1121 BUSINESS LOOP 70 EAST<br>COLUMBIA, MO 65201   | 43-1015163 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COASTLINE ELDERLY SERVICES<br>1646 PURCHASE STREET<br>NEW BEDFORD, MA 02740                              | 04-2622121 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| TRI-COUNTY COMMUNITY ACTION AGENCY, INC. - 1015 DISPATCHERS WAY - LAGRANGE, KY 40031                     | 61-0856637 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| EPHRATA AREA SOCIAL SERVICES<br>227 NORTH STATE STREET<br>EPHRATA, PA 17522                              | 23-1857457 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government  | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ALAMEDA COUNTY AREA AGENCY ON AGING - 6955 FOOTHILL BOULEVARD - OAKLAND, CA 94605                     | 11-1111111 | N/A                           | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| EAST ARKANSAS AREA AGENCY ON AGING, INC. - P.O. BOX 5035 - JONESBORO, AR 72403                        | 71-0508299 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIORCARE EXPERTS<br>145 THIERMAN LANE<br>LOUISVILLE, KY 40207                                       | 61-0860265 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CATHOLIC YOUTH ASSOCIATION OF PITTSBURGH, INC. - 286 MAIN STREET - PITTSBURGH, PA 15201               | 25-0984596 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SHELBY COUNTY OUTREACH MINISTRIES, INC. MEALS ON WHEELS - P.O. BOX 1029 - CENTER, TX 75935            | 75-2710921 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KLAMATH BASIN SENIOR CITIZENS' CENTER, INC. - 2045 ARTHUR STREET, PO BOX JE - KLAMATH FALLS, OR 97602 | 46-0716639 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BOSSIER COUNCIL ON AGING<br>706 BEARKAT DRIVE<br>BOSSIER CITY, LA 71111                               | 72-0822231 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SEICAA MEALS ON WHEELS<br>641 N. 8TH AVE.<br>POCATELLO, ID 83201                                      | 82-0290341 | 501(C)(3)                     | 10,000.                  | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF DELAWARE<br>100 WEST 10TH STREET, SUITE 207<br>WILMINGTON, DE 19801                | 51-0355145 | 501(C)(3)                     | 9,783.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government  | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| VALDEZ SENIOR CENTER<br>1300 E HANAGITA<br>VALDEZ, AK 99686   | 92-0082275 | 501(C)(3)                     | 9,587.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| WEST HILLS - MEALS ON WHEELS<br>1205 RIDGE AVENUE<br>CORAOPOLIS, PA 15108                           | 81-2355167 | 501(C)(3)                     | 9,549.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CSRA REGIONAL COMMISSION AREA<br>AGENCY ON AGING - 3626 WALTON WAY<br>EXTENSION - AUGUSTA, GA 30909 | 58-0899839 | 501(C)(3)                     | 9,299.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FAYETTEVILLE SENIOR ACTIVITY & WELLNESS CENTER - 945 S COLLEGE AVE. - FAYETTEVILLE, AR 72701        | 71-0521887 | 501(C)(3)                     | 9,193.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ROUTT COUNTY COUNCIL ON AGING<br>P.O. BOX 770207<br>STEAMBOAT SPRINGS, CO 80477                     | 84-0678596 | 501(C)(3)                     | 9,080.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FIVE CITIES MEALS ON WHEELS<br>P.O. BOX 156<br>PISMO BEACH, CA 93448                                | 95-2932124 | 501(C)(3)                     | 9,073.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LAKEWOOD MEALS ON WHEELS<br>5510 CLARK AVE.<br>LAKEWOOD, CA 90712                                   | 95-2929207 | 501(C)(3)                     | 9,073.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LEWIS COUNTY SENIOR CITIZENS CENTER, INC. - 171 W. 2ND ST. - WESTON, WV 26452                       | 55-0524706 | 501(C)(3)                     | 9,000.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| APPALACHIAN AGENCY FOR SENIOR CITIZENS - PO BOX 765 - CEDAR BLUFF, VA 24609                         | 54-0990533 | 501(C)(3)                     | 8,919.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| MEALS ON WHEELS NIAGARA FALLS<br>1920 18TH STREET<br>NIAGARA FALLS, NY 14305                      | 16-1265460 | 501(C)(3)                     | 8,784.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SENIOR SERVICES OF SOUTHEASTERN VIRGINIA - 6350 CENTER DR., BLDG. 5, STE. 101 - NORFOLK, VA 23502 | 54-6069786 | 501(C)(3)                     | 8,573.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PENINSULA AGENCY ON AGING<br>739 THIMBLE SHOALS BLVD. STE 1006<br>NEWPORT NEWS, VA 23606          | 51-0151069 | 501(C)(3)                     | 8,558.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| BLUE LEDGE, INC.<br>P.O. BOX 1332<br>AMHERST, VA 24521  | 71-1020696 | 501(C)(3)                     | 8,558.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| THOMAS J. RILEY SENIOR CENTER<br>100 MADISON AVENUE<br>WESTWOOD, NJ 07675                         | 22-3179212 | 501(C)(3)                     | 8,500.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS MASON & THURSTON COUNTIES - 222 COLUMBIA ST., NW - OLYMPIA, WA 98501              | 91-0907573 | 501(C)(3)                     | 8,341.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| FISHES AND LOAVES COOPERATIVE MINISTRIES - 5115 SECOND AVENUE - PITTSBURGH, PA 15207              | 90-0681840 | 501(C)(3)                     | 8,274.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF CHEYENNE<br>2015 SOUTH GREELEY HIGHWAY<br>CHEYENNE, WY 82007                   | 83-0211345 | 501(C)(3)                     | 8,000.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| DUNN COUNTY NUTRITION PROGRAM<br>3001 STATE HWY 12 EAST<br>MENOMONIE, WI 54751                    | 39-1540586 | 501(C)(3)                     | 8,000.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ALEXANDER CITY MEALS ON WHEELS<br>3316 HWY 280<br>ALEXANDER CITY, AL 35010                    | 63-0991476 | 501(C)(3)                     | 8,000.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GILA RIVER INDIAN COMMUNITY<br>ELDERLY NUTRITION PROGRAM - PO BOX<br>956 - SACATON, AZ 85147  | 86-0107023 | 501(C)(3)                     | 7,783.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PRESCOTT MEALS ON WHEELS<br>1280 E. ROSSER STREET<br>PRESCOTT, AZ 86301                       | 86-0417621 | 501(C)(3)                     | 7,783.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF GREATER HYDE<br>PARK, INC. - 1 CHURCH STREET -<br>HYDE PARK, NY 12538      | 14-1585991 | 501(C)(3)                     | 7,567.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CHESTNUT HILL MEALS ON WHEELS<br>1710 BETHLEHEM PIKE<br>FLOURTOWN, PA 19031                   | 26-4192537 | 501(C)(3)                     | 7,500.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF NORTHERN<br>VIRGINIA - PO BOX 40203 -<br>ARLINGTON, VA 22204               | 52-1344727 | 501(C)(3)                     | 7,500.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GARRETT COUNTY COMMUNITY ACTION<br>COMMITTEE, INC. - 104 E. CENTER<br>ST. - OAKLAND, MD 21550 | 52-0820662 | 501(C)(3)                     | 7,500.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GENTRY COUNTY SENIOR CENTER, INC.<br>219 NORTH HIGH STREET<br>STANBERRY, MO 64489             | 43-1092074 | 501(C)(3)                     | 7,500.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| COASTAL SENIORS<br>P.O. BOX 437<br>POINT ARENA, CA 95468                                      | 95-4680437 | 501(C)(3)                     | 7,500.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government                                      | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| THE CENTER<br>900 WHITING DR.<br>YANKTON, SD 57078                                      | 46-0309709 | 501(C)(3)                     | 7,500.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PLOWSHARES PEACE AND JUSTICE CENTER - 1346 SOUTH STATE STREET - UKIAH, CA 95482         | 68-0218781 | 501(C)(3)                     | 7,500.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ROCK PORT SENIOR CENTER ASSOCIATES<br>505 SOUTH COUNTRY CLUB DR.<br>ROCK PORT, MO 64482 | 43-1267974 | 501(C)(3)                     | 7,500.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| PLATTE SENIOR SERVICES, INC.<br>11724 N.W. PLAZA CIRCLE<br>KANSAS CITY, MO 64153        | 43-1255220 | 501(C)(3)                     | 7,500.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| ST. JOHNS COUNTY COUNCIL ON AGING, INC. - 180 MARINE STREET - ST. AUGUSTINE, FL 32084   | 59-1525829 | 501(C)(3)                     | 7,495.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| KINSHIP CENTER<br>921 S. CARROLLTON AVE.<br>NEW ORLEANS, LA 70118                       | 94-2971761 | 501(C)(3)                     | 7,296.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MASCOUTAH SENIOR SERVICES PROGRAM<br>227 NORTH MARKET ST.<br>MASCOUTAH, IL 62258        | 37-1009479 | 501(C)(3)                     | 7,163.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MACOMB COMMUNITY ACTION<br>21885 DUNHAM ROAD, SUITE 6<br>CLINTON TOWNSHIP, MI 48036     | 11-1111111 | N/A                           | 7,000.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS NEMAHA COUNTY<br>607 NEMAHA STREET<br>SENECA, KS 66538                  | 11-1111111 | N/A                           | 7,000.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government                                     | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| HARRISON COUNTY COUNCIL ON AGING<br>1316 S. 25TH ST.<br>BETHANY, MO 64424              | 43-0921944 | 501(C)(3)                     | 6,963.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF LEE'S SUMMIT<br>PO BOX 1393<br>LEES SUMMIT, MO 64063                | 43-1886433 | 501(C)(3)                     | 6,926.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| JEWISH SOCIAL SERVICE AGENCY MOW<br>6123 MONTROSE ROAD<br>ROCKVILLE, MD 20852          | 53-0196598 | 501(C)(3)                     | 6,800.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SOLDOTNA AREA SENIOR CITIZENS,<br>INC. - 197 W. PARK AVE. -<br>SOLDOTNA, AK 99669      | 92-0116416 | 501(C)(3)                     | 6,690.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| DUNKIRK-FREDONIA MEALS ON WHEELS<br>196 NEWTON STREET<br>FREDONIA, NY 14063            | 16-1188087 | 501(C)(3)                     | 6,675.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SHENANGO VALLEY MEALS ON WHEELS,<br>INC. - 396 BUHL BLVD. - SHARON, PA<br>16146        | 26-4065859 | 501(C)(3)                     | 6,549.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| GOLDEN CONNECTIONS COMMUNITY<br>CENTER - 20-C GOTHAM PLACE - RED<br>LION, PA 17356     | 23-2289794 | 501(C)(3)                     | 6,549.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| DOUGLAS COUNTY SENIOR SERVICES<br>1036 SE DOUGLAS AVE., ROOM 221<br>ROSEBURG, OR 97470 | 48-0802260 | 501(C)(3)                     | 6,536.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| LASSEN SENIOR SERVICES, INC.<br>1700 SUNKIST DR.<br>SUSANVILLE, CA 96130               | 94-2833250 | 501(C)(3)                     | 6,500.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government   | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| MEALS ON WHEELS ROCKINGHAM COUNTY<br>P.O. BOX 1915<br>REIDSVILLE, NC 27323                           | 56-1480312 | 501(C)(3)                     | 6,256.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| VALLEY PROGRAM FOR AGING SERVICES,<br>INC. - P.O. BOX 817 - WAYNESBORO,<br>VA 22980                  | 54-0958526 | 501(C)(3)                     | 6,194.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| CLINTON COUNTY SENIOR SERVICES<br>630 8TH STREET<br>CARLYLE, IL 62231                                | 37-1053881 | 501(C)(3)                     | 6,000.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| SULLIVAN COUNTY MULTI-PURPOSE<br>SENIOR CENTER - 111 N MARKET<br>STREET - MILAN, MO 63556            | 43-1210881 | 501(C)(3)                     | 6,000.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MORGANTOWN AREA MEALS ON WHEELS,<br>INC. - 3375 UNIVERSITY AVE. -<br>MORGANTOWN, WV 26505            | 55-0536022 | 501(C)(3)                     | 6,000.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| THE COUNCIL OF SENIOR CITIZENS OF<br>GILMER COUNTY - 720 NORTH LEWIS<br>STREET - GLENVILLE, WV 26351 | 55-0537612 | 501(C)(3)                     | 6,000.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| TABITHA MEALS ON WHEELS<br>4720 RANDOLPH ST.<br>LINCOLN, NE 68510                                    | 47-0377998 | 501(C)(3)                     | 5,939.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| NORTH BOROUGH - SEWICKLEY AREA<br>MEALS ON WHEELS - 28 PITTSBURGH<br>STREET - EMSWORTH, PA 15202     | 27-0254773 | 501(C)(3)                     | 5,600.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |
| MEALS ON WHEELS OF WESTERN BROOME<br>705 WEST MAIN ST.<br>ENDICOTT, NY 13760                         | 16-0975652 | 501(C)(3)                     | 5,567.                   | 0.                                |   |  | PROJECT SUPPORT AND OTHER SERVICES |

Schedule I (Form 990)



**Part III** **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|---------------------------------------|
|                                 |                          |                          |                                   |   |                                       |
|                                 |                          |                          |                                   |   |                                       |
|                                 |                          |                          |                                   |   |                                       |
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|                                 |                          |                          |                                   |   |                                       |
|                                 |                          |                          |                                   |   |                                       |

**Part IV** **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE GRANTEE MUST COMPLETE A GRANT REPORT DOCUMENTING THAT FUNDS WERE USED  
AS DESCRIBED IN ITS PROPOSAL BEFORE THE FULL BALANCE OF THE GRANT FUNDS ARE  
PAID. THE EXCEPTION TO THIS PROCEDURE IS THE SUBARU SHARE THE LOVE GRANT,  
WHICH IS FOR UNRESTRICTED GENERAL OPERATING PURPOSES.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

**MEALS ON WHEELS AMERICA**

Employer identification number

**23-7447812**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee   | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

**a** Receive a severance payment or change-of-control payment? .....

**b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....

**c** Participate in or receive payment from an equity-based compensation arrangement? .....

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

**a** The organization? .....

**b** Any related organization? .....

If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

**a** The organization? .....

**b** Any related organization? .....

If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

Yes No

**1b**

**2**

**4a**

**4b**

**4c**

**5a**

**5b**

**6a**

**6b**

**7**

**8**

**9**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2020

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name and Title   |      | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
|--|------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
|  |      | (i) Base compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |  |                         |                                 |   |
| (1) ELLIE HOLLANDER<br>PRESIDENT AND CEO                     | (i)  | 369,782.   | 28,000.                             | 2,188.                              | 11,288.  | 16,921.                 | 428,179.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (2) LUCY THEILHEIMER<br>CHIEF STRATEGY & IMPACT OFFICER      | (i)  | 200,981.   | 17,000.                             | 2,100.                              | 5,784.   | 14,226.                 | 240,091.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (3) ROBERT HERBOLSHEIMER<br>CHIEF LEGAL & COMPLIANCE OFFICER | (i)  | 190,311.   | 19,000.                             | 26,219.                             | 0.   | 0.                      | 235,530.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (4) KRISTINE TEMPLIN<br>CHIEF DEVELOPMENT OFFICER            | (i)  | 196,061.   | 21,000.                             | 1,241.                              | 5,450.   | 7,794.                  | 231,546.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (5) SUSAN WALDMAN<br>CHIEF MARKETING & COMM. OFFICER         | (i)  | 189,290.   | 17,000.                             | 2,077.                              | 5,600.   | 11,967.                 | 225,934.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
| (6) ERIKA KELLY<br>CHIEF MEMBERSHIP & ADVOCACY OFFICER       | (i)  | 156,395.   | 17,000.                             | 1,106.                              | 4,544.   | 5,761.                  | 184,806.                        | 0.  |
|  | (ii) | 0.   | 0.                                  | 0.                                  | 0.   | 0.                      | 0.                              | 0.  |
|  | (i)  |  |                                     |                                     |  |                         |                                 |   |
|  | (ii) |  |                                     |                                     |  |                         |                                 |   |
|  | (i)  |  |                                     |                                     |  |                         |                                 |   |
|  | (ii) |  |                                     |                                     |  |                         |                                 |   |
|  | (i)  |  |                                     |                                     |  |                         |                                 |   |
|  | (ii) |  |                                     |                                     |  |                         |                                 |   |
|  | (i)  |  |                                     |                                     |  |                         |                                 |   |
|  | (ii) |  |                                     |                                     |  |                         |                                 |   |
|  | (i)  |  |                                     |                                     |  |                         |                                 |   |
|  | (ii) |  |                                     |                                     |  |                         |                                 |   |
|  | (i)  |  |                                     |                                     |  |                         |                                 |   |
|  | (ii) |  |                                     |                                     |  |                         |                                 |   |
|  | (i)  |  |                                     |                                     |  |                         |                                 |   |
|  | (ii) |  |                                     |                                     |  |                         |                                 |   |
|  | (i)  |  |                                     |                                     |  |                         |                                 |   |
|  | (ii) |  |                                     |                                     |  |                         |                                 |   |

**Part III** Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 7:

DURING THE YEAR ENDED DECEMBER 31, 2020, THE PRESIDENT AND CEO RECEIVED A  
DISCRETIONARY BONUS AS APPROVED BY THE BOARD OF DIRECTORS. ALL OTHER  
OFFICERS, KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES RECEIVED A  
DISCRETIONARY BONUS AS APPROVED BY THE PRESIDENT AND CEO, AND ENDORSED BY  
THE BOARD OF DIRECTORS.

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
▶ **Attach to Form 990.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization

**MEALS ON WHEELS AMERICA**

Employer identification number

**23-7447812**

**Part I Types of Property**

|   | (a)<br>Check if<br>applicable | (b)<br>Number of<br>contributions or<br>items contributed | (c)<br>Noncash contribution<br>amounts reported on<br>Form 990, Part VIII, line 1g | (d)<br>Method of determining<br>noncash contribution amounts |
|---|-------------------------------|---|--|--|
| 1 Art - Works of art .....  |                               |   |  |  |
| 2 Art - Historical treasures .....                                    |                               |   |  |  |
| 3 Art - Fractional interests .....                                    |                               |   |  |  |
| 4 Books and publications .....  |                               |   |  |  |
| 5 Clothing and household goods .....                                  | X                             |   | 85,417.  | FMV  |
| 6 Cars and other vehicles .....                                       |                               |   |  |  |
| 7 Boats and planes .....  |                               |   |  |  |
| 8 Intellectual property .....   |                               |   |  |  |
| 9 Securities - Publicly traded .....                                  | X                             | 19  | 57,341.  | FMV  |
| 10 Securities - Closely held stock .....                              |                               |   |  |  |
| 11 Securities - Partnership, LLC, or<br>trust interests .....         |                               |   |  |  |
| 12 Securities - Miscellaneous .....                                   |                               |   |  |  |
| 13 Qualified conservation contribution -<br>Historic structures ..... |                               |   |  |  |
| 14 Qualified conservation contribution - Other ...                    |                               |   |  |  |
| 15 Real estate - Residential .....                                    |                               |   |  |  |
| 16 Real estate - Commercial .....                                     |                               |   |  |  |
| 17 Real estate - Other .....  |                               |   |  |  |
| 18 Collectibles .....   |                               |   |  |  |
| 19 Food inventory .....   |                               |   |  |  |
| 20 Drugs and medical supplies .....                                   |                               |   |  |  |
| 21 Taxidermy .....  |                               |   |  |  |
| 22 Historical artifacts .....   |                               |   |  |  |
| 23 Scientific specimens .....   |                               |   |  |  |
| 24 Archeological artifacts .....                                      |                               |   |  |  |
| 25 Other ▶ ( <u>GIFT CARDS</u> )                                      | X                             | 1   | 590,000.   | FMV  |
| 26 Other ▶ ( <u>OFFICE EQUIPM</u> )                                   | X                             | 1   | 3,000.   | FMV  |
| 27 Other ▶ ( _____ )  |                               |   |  |  |
| 28 Other ▶ ( _____ )  |                               |   |  |  |

29 Number of Forms 8283 received by the organization during the tax year for contributions  
for which the organization completed Form 8283, Part V, Donee Acknowledgement .....

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it  
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for  
exempt purposes for the entire holding period? .....

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash  
contributions? .....

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,  
describe in Part II.

|     | Yes | No |
|-----|-----|----|
| 30a |     | X  |
| 31  | X   |    |
| 32a |     | X  |
| 33  |     |    |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2020

**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THIS COLUMN REPRESENTS THE NUMBER OF CONTRIBUTORS.

Blank lines for supplemental information.



**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

MEALS ON WHEELS AMERICA

Employer identification number

23-7447812

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

(CONTINUATION FROM PART III, LINE 4A ON PAGE 2)

AS A RESULT OF THE COVID-19 PANDEMIC AND A DRAMATIC INCREASE IN DEMAND FOR HOME DELIVERED MEALS, MEALS ON WHEELS AMERICA ESTABLISHED A FUND EARMARKED FOR "RESPONSE AND RECOVERY" SUPPORT OF THE ASSOCIATION'S NATIONAL AND MEMBER'S LOCAL PROGRAMS. AS A RESULT, THE ASSOCIATION WAS ABLE TO INCREASE ITS GRANTMAKING ACTIVITIES TO AN UNPRECEDENTED LEVEL. IN ADDITION, THE ASSOCIATION IMPLEMENTED SEVERAL OTHER MEMBER SUPPORT PROGRAMS AIMED AT MEETING THE CURRENT AND FUTURE CHALLENGES OF THE NEW PARADIGM WE FIND OURSELVES IN.

THE TRUST MEALS ON WHEELS HAS BUILT OVER DECADES OF SUPPORTING SENIORS IN THEIR COMMUNITIES MEANS THE ASSOCIATION MEMBERS ARE INVITED INTO THE HOMES OF THEIR CLIENTS DAILY, AND THEREFORE ARE ABLE TO IDENTIFY ANY THREATENING CHANGES IN THEIR CONDITION OR HOME SAFETY HAZARDS THAT NEED ATTENTION. AS SUCH, MEALS ON WHEELS IS ALSO GROWING ITS ROLE IN THE HEALTHCARE CONTINUUM, PROVIDING PREVENTATIVE SUPPORT TO OUR MOST VULNERABLE OLDER AMERICANS THAT HELPS AVERT HEALTH CRISES BEFORE THEY HAPPEN AND TO SUPPORT TRANSITIONS OUT OF HOSPITALS, NURSING HOMES AND REHAB CENTERS BACK INTO THEIR HOMES AS PAINLESSLY AS POSSIBLE.

IN ADDITION, THE STRATEGY AND IMPACT TEAM ENGAGES IN RESEARCH TO DEMONSTRATE THE IMPACT AND VALUE THAT MEALS ON WHEELS HAS IN ADDRESSING HUNGER, MALNUTRITION, ISOLATION AND LONELINESS AMONG MILLIONS OF

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Name of the organization

MEALS ON WHEELS AMERICA

Employer identification number

23-7447812

SENIORS EACH YEAR. THIS WORK SUPPORTS OUR COMMITMENT TO ENSURING THAT LOCAL MEALS ON WHEELS PROGRAMS HAVE THE TOOLS AND RESOURCES THEY NEED TO MEET THE GROWING DEMAND FOR SERVICES IN THEIR COMMUNITIES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

(CONTINUATION FROM PART III, LINE 4B ON PAGE 2)

THE TEAM IS ALSO ENGAGED IN ONGOING ADVOCACY INITIATIVES AND ACTIVITIES AIMED AT DRIVING SUBSTANTIAL REVENUE FOR LOCAL PROGRAMS TO SUPPORT THEIR EFFORTS TO COMBAT THE GROWING PROBLEMS OF SENIOR HUNGER AND ISOLATION. TO THAT END, WE WORK TO BUILD SUPPORT ON CAPITOL HILL AND WITHIN THE ADMINISTRATION TO ADVANCE LEGISLATION AND POLICIES THAT STRENGTHEN HOME-DELIVERED AND GROUP SETTING (CONGREGATE) PROGRAMS, THE VOLUNTEERS WHO MAKE THEM HAPPEN AND THE SENIORS THEY SERVE.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

(CONTINUATION FROM PART III, LINE 4C ON PAGE 2)

IN ADDITION, THIS TEAM SUPPORTS THE COMMUNICATIONS NEEDS OF OUR HEALTHCARE INITIATIVES, ADVOCACY TEAM AND MEMBER SERVICES TEAM TO ENSURE THAT THE NATIONAL NETWORK IS INFORMED, ENGAGED AND BUILDING A SUSTAINABLE AND EFFECTIVE FUTURE ON BEHALF OF AMERICA'S SENIORS.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION IS A MEMBERSHIP ORGANIZATION CONSISTING OF GENERAL MEMBERSHIP.

Name of the organization

MEALS ON WHEELS AMERICA

Employer identification number

23-7447812

FORM 990, PART VI, SECTION A, LINE 7A:

THE BOARD OF DIRECTORS' OFFICERS OF THE ORGANIZATION ARE ELECTED BY ITS  
GENERAL MEMBERS EVERY TWO YEARS.

FORM 990, PART VI, SECTION A, LINE 7B:

GENERAL MEMBERS OF THE ORGANIZATION HAVE AUTHORITY TO AMEND OR REPEAL THE  
BYLAWS, AND APPOINT OR REMOVE MEMBERS OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ORGANIZATION'S DRAFT OF IRS FORM 990 UNDERGOES A NUMBER OF INTERNAL AND  
EXTERNAL REVIEWS BEFORE IT IS FILED WITH THE IRS. IT IS PREPARED BY THE  
SENIOR DIRECTOR OF FINANCE AND THE ORGANIZATION'S INDEPENDENT AUDITORS  
(MARCUM) AND THEN REVIEWED BY THE CHIEF FINANCIAL AND OPERATIONS OFFICER  
AND THE PRESIDENT AND CEO BEFORE PRESENTATION TO THE AUDIT COMMITTEE. THE  
FINAL DRAFT OF THE FORM 990 IS THEN PROVIDED TO THE AUDIT COMMITTEE AT  
LEAST THREE BUSINESS DAYS PRIOR TO AN AUDIT COMMITTEE MEETING WHERE IT IS  
PRESENTED BY MANAGEMENT AND THE ORGANIZATION'S INDEPENDENT AUDITORS FOR  
ACCEPTANCE BY THE COMMITTEE. ONCE ACCEPTED BY THE AUDIT COMMITTEE, COPIES  
OF THE FULL FORM 990 ARE MADE AVAILABLE TO THE BOARD OF DIRECTORS FOR A  
REVIEW AND COMMENT PERIOD OF NO LESS THAN THREE BUSINESS DAYS PRIOR TO  
FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL BOARD OF DIRECTORS ARE REQUIRED TO REVIEW THE CONFLICT OF INTEREST  
POLICY AND SUBMIT A DISCLOSURE STATEMENT AT THE BOARD OF DIRECTORS MEETING  
HELD IN AUGUST OR SEPTEMBER OF EACH YEAR. IT IS THE RESPONSIBILITY OF THE  
BOARD OF DIRECTORS TO BRING ANY CONFLICTS UP AS THEY ARISE. THE

Name of the organization

MEALS ON WHEELS AMERICA

Employer identification number

23-7447812

ORGANIZATION REGULARLY AND CONSISTENTLY REQUIRES BOARD MEMBERS TO RECUSE THEMSELVES FROM PARTICIPATING IN ANY MATTER IN WHICH THEY HAVE A PERSONAL INTEREST. THIS IS REQUIRED IN THE ORGANIZATION'S BYLAWS. FURTHER, THE ORGANIZATION HAS A COMPLIANCE OFFICER TO OVERSEE COMPLIANCE WITH CONFLICT OF INTEREST AND OTHER ORGANIZATIONAL POLICIES.

FORM 990, PART VI, SECTION B, LINE 15:

THE PRESIDENT AND CEO'S COMPENSATION IS DETERMINED BY THE BOARD OF DIRECTORS, DURING EXECUTIVE SESSION OF A REGULARLY SCHEDULED MEETING, USING BENCHMARKING DATA FROM A PRIOR YEAR, INDEPENDENTLY PREPARED COMPENSATION STUDY AND INFORMAL SURVEYS OF SIMILAR ORGANIZATIONS. COMPENSATION OF OFFICERS AND KEY EMPLOYEES IS DETERMINED BY THE PRESIDENT AND CEO USING INDEPENDENTLY PREPARED COMPENSATION SURVEYS AND BASED ON AN OVERALL COMPENSATION PHILOSOPHY REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AK,AL,AR,AZ,CA,CO,CT,DC,DE,FL,GA,HI,IA,ID,IL,IN,KS,KY,LA,MA,MD,ME,MI,MN,MO,MS,MT,NC,ND,NE,NH,NJ,NM,NV,NY,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VA,VT,WA,WI,WV,WY

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC VIA THE ORGANIZATION'S WEBSITE, OR UPON REQUEST.