

March 25, 2025

Ms. Stephanie Archer-Smith Meals on Wheels of Central Maryland, Inc.

### Dear Stephanie:

As arranged, we have prepared the Form 990, Return of an Organization Exempt from Income Tax, for the year ended <u>June 30, 2024</u>. We are uploading three files to the portal. A complete client copy, a copy to be attached to your MD Annual Update of Charitable Registration via the MD OneStop website and a file with Form 8879-TE, the federal efile authorization form.

If the return meets with your approval, it should be executed and filed in accordance with the following instructions.

### **Signature**

Form 8879-TE, the federal efile authorization form must be signed by an officer to authorize electronic filing.

## <u>Filing</u>

Return the signed Form 8879-TE to our office by email or uploading to the portal. We will then transmit your federal return electronically to the IRS. Please return the form promptly so that we can transmit the form by the due date of **May 15, 2025**.

The Maryland copy of the Form 990, with the detail Schedule B pages removed, and audited financial statement attached, will need to be submitted via Maryland's OneStop portal as part of your Annual Charitable Registration Renewal.

### Tax/refund due

No tax is due with the return to the Internal Revenue Service, the Maryland Annual Registration fee is paid via the OneStop filing.

The client copy of the return for your files. We suggest that you retain this copy indefinitely.

If you have any questions regarding the enclosures, please contact the signer.

Sincerely,

Susan P. Keller, CPA

Susay P. Keller

## Form 8879-TF

## IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning JUL 1 , 2023, and ending JUN 30 , 20 24

OMB No. 1545-0047

Do not send to the IRS. Keep for your records.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form8879TE for the latest information. EIN or SSN Name of filer 52-6074723 MEALS ON WHEELS OF CENTRAL MARYLAND, INC. Name and title of officer or person subject to tax STEPHANIE ARCHER-SMITH EXECUTIVE DIRECTOR Type of Return and Return Information Part I Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. Form 990 check here ..... 1a b Total revenue, if any (Form 990-EZ, line 9) 2b 2a Form 990-EZ check here ... За Total tax (Form 1120-POL, line 22) Form 1120-POL check here Tax based on investment income (Form 990-PF, Part V, line 5) 4a Form 990-PF check here ... b Balance due (Form 8868, line 3c) 5b Form 8868 check here ...... 5a Form 990-T check here ..... 6a Total tax (Form 990-T, Part III, line 4) 6b 7a Form 4720 check here b FMV of assets at end of tax year (Form 5227, Item D) 8b Form 5227 check here ..... 8a **b** Tax due (Form 5330, Part II, line 19) 9a Form 5330 check here 9b Form 8038-CP check here **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10a Declaration and Signature Authorization of Officer or Person Subject to Tax Part II Under penalties of perjury, I declare that 🛛 🛣 I am an officer of the above entity or 🔛 I am a person subject to tax with respect to (name , (E**I**N) and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information processary to answer inquiries and resolve issues related to the payment. I have selected a payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only X | authorize ELLIN & TUCKER, CHARTERED 05685 to enter my PIN Enter five numbers, but ERO firm name do not enter all zeros as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an office or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program. I will enter my PIN on the return's disclosure consent screen. gnature of officer or person subject to tax Certification and Authentication Part III ERO's EFIN/PIN. Enter your six-digit electronic filing identification 52781929934 number (EFIN) followed by your five-digit self-selected PIN. I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of 🔐 ub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. 03/25/25 ERO's signature Date **ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So Form **8879-TE** (2023) For Privacy Act and Paperwork Reduction Act Notice, see instructions.

LHA 302521 01-05-24

## EXTENDED TO MAY 15, 2025 **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.

OMB No. 1545-0047

Department of the Treasury

Go to www.irs.gov/Form990 for instructions and the latest information.

2024 A For the 2023 calendar year, or tax year beginning JUL 1, 2023 and ending JUN C Name of organization D Employer identification number Check if applicable: Address change MEALS ON WHEELS OF CENTRAL MARYLAND, INC. Name change 52-6074723 Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ termin-ated 515 S HAVEN STREET 410-558-0932 15,999,801. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended BALTIMORE, MD 21224 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: STEPHANIE ARCHER-SMITH Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 527 501(c) ( (insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.MEALSONWHEELSMD.ORG H(c) Group exemption number K Form of organization: X Corporation Association Other L Year of formation: 1967 M State of legal domicile: MD Trust Part I Summary Briefly describe the organization's mission or most significant activities: SPECIALIZING IN SERVICES TO THE Activities & Governance AGING, MEALS ON WHEELS OF CENTRAL MARYLAND SERVES HOMEBOUND AGING 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 26 3 Number of voting members of the governing body (Part VI, line 1a) 25 Number of independent voting members of the governing body (Part VI, line 1b) 4 160 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 3244 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h Prior Year **Current Year** 16,008,24911,404,019. Contributions and grants (Part VIII, line 1h) 8 Revenue 3,405,339. 2,291,458. Program service revenue (Part VIII, line 2g) 300,777. 788,743. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 -23,950.-24,605.Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 19,690,415 14,459,615. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 5,067,749. 5,508,246. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 8,730,657. 9,002,013. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 13,798,406. 14,510,259. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5,892,009. -50,644. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 33,034,118. 35,041,065 Total assets (Part X, line 16) 2,030,118. 2,589,291 21 Total liabilities (Part X, line 26) 31,004,000. 32,451,774 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign STEPHANIE ARCHER-SMITH, EXECUTIVE DIRECTOR Here Type or print name and title PTIN Date Preparer's signature Print/Type preparer's name Nucary 03/25/25 P00245169 SUSAN KELLER Paid self-employed ELLIN & TUCKER, CHARTERED Firm's EIN 52-0959934 Preparer Firm's name 400 EAST PRATT ST. SUITE 200 Use Only Firm's address Phone no. 410-727-5735 BALTIMORE, MD 21202 May the IRS discuss this return with the preparer shown above? See instructions X Yes No

Pa	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 OF CENTRAL MARYLAND'S CHARITABLE MISSION, TO KEEP
	HOMEBOUND PEOPLE LIVING SAFELY AND INDEPENDENTLY AT HOME THROUGH THE
	PROVISION OF NUTRITIOUS MEALS, PERSONAL CONTACT AND SUPPORT SERVICES,
_	REDUCES HOSPITALIZATION, AND PREVENTS PREMATURE INSTITUTIONALIZATION.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	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?
	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
4-	revenue, if any, for each program service reported.  (Code:) (Expenses \$ 8 , 465 , 301
4a	(Code:) (Expenses \$ 8 , 465 , 301 • including grants of \$ ) (Revenue \$ 2 , 291 , 458 • )  NUTRITION SERVICES
	MOTRITION BERVICES
	NUTRITION SERVICES INCLUDES THE DELIVERY OF A DAILY HOT LUNCH MEAL AND
	COLD DINNER MEAL WHICH OFFER TWO-THIRDS OF THE DAILY ALLOWANCE OF
	NUTRIENTS FOR AN ADULT OVER 60 AND ARE LOW IN FAT, SODIUM, AND
	CONCENTRATED SUGARS. WEEKEND AND HOLIDAY MEALS ARE OFFERED AS ARE
	SPECIALTY MEALS INCLUDING KOSHER, KOREAN, DIABETIC AND TEXTURE MODIFIED
	MEALS.
4b	(Code:) (Expenses \$3, 182, 738 •including grants of \$) (Revenue \$)
	CLIENT SERVICES
	CLIENT SUPPORT SERVICES BEGIN WITH A COMPREHENSIVE ASSESSMENT OF CLIENT
	NEEDS AND OFFER A UNIQUE AND INDIVIDUAL COMPLEMENT OF SERVICES THAT
	INCLUDES DAILY SAFETY AND WELLNESS MONITORING, CRISIS RESPONSE, SNAP
	SCREENING AND ENROLLMENT, GROCERY ASSISTANCE, HOME REPAIR AND
	MODIFICATION, PET FOOD DELIVERY, AND CASE MANAGEMENT AND CARE
	COORDINATION SERVICES THAT OFFER LINKS TO OTHER COMMUNITY RESOURCES.
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 11,648,039.
	Form <b>990</b> (2023)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	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? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_X_
9	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?			
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments?  f "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total		7.7	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	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			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	<u> </u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	х	
L	Schedule D, Parts XI and XII	12a	- 22	
D		12b		x
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13 14a		14a		X
b	Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	144		
J	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	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? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	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? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	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? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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? If "Yes." complete Schedule I. Parts I and II	21		X

Form 990 (2023) MEALS ON WHEELS OF CENTRAL MARYLAND, INC. 52-6074723 Page 4

Part IV Checklist of Required Schedules (continued)

Yes No

			162	NO
22	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? If "Yes," complete Schedule I, Parts I and III	22		_X_
23	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? If "Yes," complete			
	Schedule J	23	X	
24 a	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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		_X_
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			37
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
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? If "Yes," complete			37
	Schedule L, Part I	25b		<u> </u>
26	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%			37
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	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			37
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			37
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			v
	"Yes," complete Schedule L, Part IV	28c	v	<u> </u>
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			37
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			37
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	00		v
c=	If "Yes," complete Schedule R, Part V, line 2	36		_ <u>X</u> _
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
00	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		_ <u>X</u> _
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	00	х	
Pai	Note: All Form 990 filers are required to complete Schedule O tt V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	<u> </u>
. u	Check if Schedule O contains a response or note to any line in this Part V			
	Chook it Schedule C contains a response of flote to any line in this Fart V			NI-
4-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 26  Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners?	10		
	Garming withings to bite withers:	1c		

332004 12-21-23

Form **990** (2023)

Form 990								AND, INC.	52-6074723	Pa	age 5
Part V	Statements	Regarding	Othe	r IRS Filin	gs ar	nd Tax Comp	oliance	(continued)			

			Yes	No
2a	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 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	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)?	4a		X
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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_	37	
а	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?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		v
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7-		Х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/11		
Ü	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	Ŭ		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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 13b			
	Enter the amount of reserves on hand			v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4.		Х
	excess parachute payment(s) during the year?	15		^
16	If "Yes," see the instructions and file Form 4720, Schedule N.	46		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  If "Yes," complete Form 4720, Schedule O.	16		- 47
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
.,	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.	.,		

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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			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year										
	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	Enter the number of voting members included on line 1a, above, who are independent										
2											
_	officer, director, trustee, or key employee?	2		Х							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
Ü	of officers, directors, trustees, or key employees to a management company or other person?	3		Х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X							
6											
_	Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6		X							
7a		7-		Х							
	more members of the governing body?	7a		Λ							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<b></b>		х							
_	persons other than the governing body?	7b									
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		37								
a	The governing body?	8a	X								
b	Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			37							
<del></del>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		X							
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?	10b 11a	Х								
11a											
b	<b>b</b> Describe on Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	on Schedule O how this was done	12c	X								
13	Did the organization have a written whistleblower policy?	13	X								
14	Did the organization have a written document retention and destruction policy?	14	Х								
15	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?										
а	The organization's CEO, Executive Director, or top management official	15a	X								
b	Other officers or key employees of the organization	15b	X								
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
	taxable entity during the year?	16a		X							
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?	16b									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed MD										
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	on <b>l</b> y)	avai <b>l</b> at	ole							
	for public inspection. Indicate how you made these available. Check all that apply										
	Own website Another's website X 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	financ	cial								
	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										
	JANET E. HEIFNER - 410-558-0917										
	515 S. HAVEN ST., BALTIMORE, MD 21224										

# 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

Check this box if neither the organization	n nor any related	orga	niza	tion	con	nper	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	Position (do not check more than one			<b>)</b> than ເ	one	Reportab <b>l</b> e	Reportable	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		Cer ai		ii ecte	n/tius	100)	from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-M <b>I</b> SC/	compensation from the
	related	e or (	stee			satec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trus		ıyee	mper		1099-NEC)	10001120)	and related
	below	ndividual trustee or director	Institutional trustee	le et	Key employee	Highest compensated employee	Je.	, ·		organizations
	line)	Indiv	Insti	Officer 0	Key	High	Former			
STEPHANIE ARCHER-SMITH	35.00								_	
EXECUTIVE DIRECTOR		Х		Х				200,396.	0.	14,264.
JAN E HEIFNER	35.00								_	
CFO				Х				134,352.	0.	15,759.
TIM MAY	35.00								_	
CDO		_				Х		125,668.	0.	10,741.
ALAN HIRSCH	1.00	ļ								
COMMUNITY DIRECTOR	1 00	Х						0.	0.	0.
ALLAN DALEY	1.00	١								•
COMMUNITY DIRECTOR	1 00	Х						0.	0.	0.
CAROL WRIGHT	1.00	l								•
SITE REPRESENTATIVE		Х						0.	0.	0.
COLLEEN PLEASANT KLINE, ESQ.	5.00	١		l						•
PRESIDENT	1 00	Х		Х				0.	0.	0.
DAN MCGRAIN	1.00	l								•
SITE REPRESENTATIVE		Х						0.	0.	0.
DANIELLE FORD	1.00	١								•
COMMUNITY DIRECTOR	1 00	Х						0.	0.	0.
DENNIS FINNEGAN	1.00	l								•
COMMUNITY DIRECTOR	1 00	Х					_	0.	0.	0.
EVAN FELPS	1.00	١,,							_	^
COMMUNITY DIRECTOR	1 00	Х						0.	0.	0.
GARY PEISACH	1.00	.,		ν,					0	0
IMMEDIATE PAST PRESIDENT	1.00	Х	_	Х				0.	0.	0.
JENNIFER RAY COMMUNITY DIRECTOR	1.00	₩.						0.	0.	^
	1.00	Х						0.	0.	0.
KEIVA RODRIQUES	1.00	₩.							_	^
COMMUNITY DIRECTOR	1.00	X					_	0.	0.	0.
KENYETTA (KENYA) TAYLOR COMMUNITY DIRECTOR	1.00	Х						0.	0.	0.
KRISTIN CARTER	1.00	^				$\vdash$		0.	0.	<u></u>
COMMUNITY DIRECTOR	1.00	Х						0.	0.	0.
KRISTINA GREGORY	1.00	┢	$\vdash$	-	$\vdash$	$\vdash$	_	· ·	· ·	<u></u>
COMMUNITY DIRECTOR	1.00	Х						0.	0.	0.
- COLLIGITIE DIRECTOR		Δ.				<u> </u>	<u> </u>	<u> </u>	ı	5 000 (2222)

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Part VII Section A. Officers, Directors, Trus								ompensated Employee	s (continued)	<u>,                                    </u>
(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)			than o	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
LORI BURGHAUSER	1.00									
TREASURER		Х		Х				0.	0.	0.
PATRICK DUROSEAU	1.00									
COMMUNITY DIRECTOR		Х						0.	0.	0.
PETER DELLA-CROCE	1.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
PHIL BRISCOE	1.00									
COMMUNITY DIRECTOR		Х						0.	0.	0.
ROBERT BRAGER	1.00									
SECRETARY		Х		Х				0.	0.	0.
ROSA M. SCHARF	1.00									
ASST. TREASURER		Х		Х				0.	0.	0.
SCOTT SIMMONS	1.00									
COMMUNITY DIRECTOR		Х						0.	0.	0.
SUSAN D. DRAKE	1.00									
COMMUNITY DIRECTOR		Х						0.	0.	0.
SUZAN LUMPKIN	1.00									
COMMUNITY DIRECTOR		Х						0.	0.	0.
1b Subtotal								460,416.	0.	40,764.
c Total from continuation sheets to Part VI	I, Section A							0.	0.	0.
d Total (add lines 1b and 1c)	<u></u>							460,416.	0.	40,764.

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

Yes No 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 3 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 Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes." complete Schedule J for such person

#### **Section B. Independent Contractors**

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) Name and business address	(B) Description of services	(C) Compensation
TRIO COMMUNITY MEALS	Description of services	Обтрепвалот
	HOOD GEDITTOE	F 0F0 011
P O BOX 742992, ATLANTA, GA 30374	FOOD SERVICE	5,058,311.
LEVINDALE HEBREW GERIATRIC CENTER, 2434		
WEST BELVEDERE AVENUE, BALTIMORE, MD 21215	FOOD SERVICE	192,659.
ECHO EFFECT, LLC		
6100 SEAFORTH ST, BALTIMORE, MD 21224	FUNDRAISING	180,592.
ENTERPRISE FM TRUST		
P O BOX 800089, KANSAS CITY, MO 64180	FLEET MANAGEMENT	166,234.
COMPASSMSP, LLC, 67 PROSPECT AVE, STE 202,	COMPUTERS AND	
HARTFORD, CT 06106	SUPPORT	160,896.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 5		
~		

SEE PART VII, SECTION A CONTINUATION SHEETS

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8

Form 990 MEALS ON	WHEELS	OF	' C	EN	TR	AL	M	ARYLAND, INC.	52-607	4723
Part VII Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, aı	nd F	ligh	est (	Compensated Employe	es (continued)	
(A) Name and title	<b>(B)</b> Average hours	(cl	neck	Pos			ly)	( <b>D)</b> Reportable compensation	(E) Reportable compensation from related organizations (W-2/1099-MISC)	<b>(F)</b> Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)		other compensation from the organization and related organizations
THERON RUSSELL COMMUNITY DIRECTOR	1.00	х						0.	0.	0.
WADE H. BARNES VICE PRESIDENT	1.00	х		х				0.	0.	0.
		21		21				3.	· ·	•
Total to Part VII, Section A, line 1c										

Form 990 (2023) MEALS O
Part VIII Statement of Revenue

		Check if Schedule O contains a response o	r note to any line	e in this Part VIII			
		Official in Octreditie O Contains a response o	i note to any ini	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenuè excluded
					function revenue	business revenue	from tax under
							sections 512 - 514
nts its	1 a	a Federated campaigns 1a	54,110.				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues1b					
G, G	c	Fundraising events1c	181,947.				
ifts Ir A		Related organizations 1d					
nig.	-	e Government grants (contributions) 1e	6,325,442.				
Sir		All other contributions, gifts, grants, and	, ,				
uti Je	•		4,842,520.				
ri Otto		***					
ont	ç	Noncash contributions included in lines 1a-1f	37,055.	11 101 010			
Ca	r	n Total. Add lines 1a-1f		11,404,019.			
		-	Business Code				
e	2 a		624100	2,110,470.	2,110,470.		
ξo	b	MEDICAID WAIVER REVENUE	624100	180,988.	180,988.		
Se	c	·					
am		<u> </u>					
gra	e	<u> </u>					
Program Service Revenue	f	All other program service revenue					
_				2,291,458.			
_		Total. Add lines 2a-2f		2,231,130.			
	3	Investment income (including dividends, interes		667 610			667 610
		other similar amounts)		667,612.			667,612.
	4	Income from investment of tax-exempt bond pro	oceeds				
	5	Royalties					
		(i) Real	(ii) Persona <b>l</b>				
	6 a	a Gross rents 6a					
	b	Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)					
		a Gross amount from sales of (i) Securities	(ii) Other				
	, ,	the state of the s	128,469.				
	_	,	120, 405.				
4	t	Less: cost or other basis	F2 F8F				
her Revenue		and sales expenses 7b 1,435,408.	53,575.				
,ve		Gain or (loss)	74,894.				
Re		d Net gain or (loss)		121,131.			121,131.
Jer	8 a	a Gross income from fundraising events (not					
₹		including \$ 181,947. of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a	26,598.				
	ŀ	Less: direct expenses 8b	51,203.				
		Net income or (loss) from fundraising events	•	-24,605.			-24,605.
		a Gross income from gaming activities. See		, ,			, ,
	9 6						
		Part IV, line 19 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
	10 a	a Gross sales of inventory, less returns					
		and allowances10a					
	k	Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory					
			Business Code				
sno	11 a	•					
nec	ıı c						
illan							
Miscellaneous Revenue	•						
Ξ̈́	•	All other revenue					
	e	e Total. Add lines 11a 11d		44 450 515	0.004 177		764 100
	12	Total revenue. See instructions		14,459,615.	2,291,458.	0.	764,138.

Pa	Part IX Statement of Functional Expenses											
Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must cor	nplete column (A).								
	Check if Schedule O contains a response or note to any line in this Part IX											
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses							
1	Grants and other assistance to domestic organizations											
	and domestic governments. See Part IV, line 21											
2	Grants and other assistance to domestic											
	individuals. See Part IV, line 22											
3	Grants and other assistance to foreign											
	organizations, foreign governments, and foreign											
	individuals. See Part IV, lines 15 and 16											
4	Benefits paid to or for members											
5	Compensation of current officers, directors,	204 415	202 222	72 142	20 040							
_	trustees, and key employees	394,415.	282,332.	73,143.	38,940.							
6	Compensation not included above to disqualified											
	persons (as defined under section 4958(f)(1)) and											
-	persons described in section 4958(c)(3)(B)	4,250,658.	3,042,457.	788,201.	420,000.							
7 8	Other salaries and wages  Pension plan accruals and contributions (include	4,230,030.	3,042,437.	700,201.	420,000.							
٥	section 401(k) and 403(b) employer contributions	284,678.	224,934.	38,710.	21,034.							
9	Other employee benefits	223,507.	154,130.	45,558.	23,819.							
10	Payroll taxes	354,988.	257,904.	61,676.	35,408.							
11	Fees for services (nonemployees):	301,5001		0_,0.00								
a	Management											
b	Legal	8,797.	1,527.	7,270.								
С		57,501.	-	57,501.								
d												
е	D ( ' 1( 1 ' ' ' O D IN( P 47											
f	Investment management fees	72,465.		72,465.								
g	Other. (If line 11g amount exceeds 10% of line 25,											
	column (A), amount, list line 11g expenses on Sch O.)	878,785.	329,345.	421,243.	128,197.							
12	Advertising and promotion	133,454.	89,126.	2,241.	42,087.							
13	Office expenses	532,497.	313,576.	126,431.	92,490.							
14	Information technology											
15	Royalties	210 020	167 124	20 265	12 /20							
16	Occupancy	210,929. 417,630.	167,134. 416,574.	30,365. 1,056.	13,430.							
17	Iravel	41/,030.	410,5/4.	1,030.								
18	Payments of travel or entertainment expenses											
19	for any federal, state, or local public officials  Conferences, conventions, and meetings	46,861.	22,433.	11,257.	13,171.							
20	Interest	45,965.	45,656.	309.	13,1710							
21	Payments to affiliates	23,303.		200.								
22	Depreciation, depletion, and amortization	549,690.	530,095.	11,706.	7,889.							
23	Insurance	42,276.	30,375.	10,639.	1,262.							
24	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.)											
а	FOOD & KITCHEN SUPPLIES	5,372,294.	5,372,194.	14.	86.							
b	OUTSIDE PRINTING & POST	293,350.	46,464.	13,493.	233,393.							
С	CLIENT HOUSING REPAIRS	217,166.	204,386.	12,780.								
d	UNCOLLECTIBLE ACCTS	89,832.	89,832.									
е	All other expenses	32,521.	27,565.	3,189.	1,767.							
<u>25</u>	Total functional expenses. Add lines 1 through 24e	14,510,259.	11,648,039.	1,789,247.	1,072,973.							
26	<b>Joint costs.</b> Complete this line only if the organization											
	reported in column (B) joint costs from a combined											
	educational campaign and fundraising solicitation.											

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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) Beginning of year End of year 3,000,068. 1,916,789. 1 Cash - non-interest-bearing 4,689,300. 8,849,577. Savings and temporary cash investments 518,518. 522,832. Pledges and grants receivable, net 3 3 6,368,827. 1,434,690. 4 Accounts receivable, net 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 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 Inventories for sale or use 8 171,890. 270,937. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 7,420,033. basis. Complete Part VI of Schedule D \_\_\_\_\_\_ 10a 4,193,254. 2,889,732. 3,226,779. b Less: accumulated depreciation 10b 10c 3,842,859. 4,379,147. Investments - publicly traded securities 11 11 12,470,434. 13,165,819. Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 161,455. 195,530. 15 Other assets. See Part IV, line 11 15 33,034,118. 35,041,065. 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 1,104,334. 1,338,558. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 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 601,120. 839,708. 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 324,664. 411,025. of Schedule D 2,030,118. 2,589,291. 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 30,213,953. 31,685,061. Net assets without donor restrictions 27 27 790,047. 766,713. Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 31,004,000.

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32,451,774.

35,041,065.

32

Total net assets or fund balances

Total liabilities and net assets/fund balances

33,034,118.

32

33

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>, 45</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	<u> 14</u>	, 51	0,2	<u>59.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		-5	0,6	<u>44.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	<u>31</u>	,00	4,0	<u>00.</u>
5	Net unrealized gains (losses) on investments	5	1	, 49	<b>8,4</b> :	<u> 18.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	32	<u>, 45</u> :	1,7'	<u>74.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	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:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	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?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on School	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	X	L
				Form	990 (	(2023)

332012 12-21-23

#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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 for instructions and the latest information.

**ZUZ**3

OMB No. 1545-0047

Open to Public Inspection

Name of the organization MEALS ON WHEELS OF CENTRAL MARYLAND, INC.

Employer identification number 52-6074723

Pa	rt I	Reason for Public (	Charity Status.	All organizations must c	omplete th	nis part.) S	ee instructions.	
The	he 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 secti	ion 170(b)(1)(A)(ii).	Attach Schedu <b>l</b> e E (Form	1 990).)			
3	一	A hospital or a cooperative				/h)/1\/A\/ii	i)	
4	H	A medical research organization					•	the hospital's name
•	ш	city, and state:	ation operated in cor	ijanotion with a noopital	docomboa	500110		ino noopital o namo,
_		• •	or the benefit of a col	laga ar university award	or operate	ad by a ga	vornmental unit describe	ad in
5	ш	An organization operated for		lege of university owned	or operati	ed by a go	vernmental unit describe	eu III
		section 170(b)(1)(A)(iv). (C						
6		A federal, state, or local gov	•				• •	
7	X	An organization that norma	Ily receives a substar	ntia <b>l</b> part of its support fr	om a gove	ernmental	unit or from the genera <b>l</b> (	public described in
		section 170(b)(1)(A)(vi). (C						
8		A community trust describe	ed in <b>section 170(b)(</b>	1)(A)(vi). (Complete Part	t II.)			
9		An agricultural research org	anization described	in <b>section 170(b)(1)(A)(</b> i	i <b>x)</b> operate	ed in conju	nction with a land-grant	college
		or university or a non-land-g	rant college of agricu	ulture (see instructions).	Enter the i	name, city	and state of the college	or
		university:						
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	s, membership fees, an	d gross receipts from
		activities related to its exem						
		income and unrelated busin	•	•			• •	-
		See section 509(a)(2). (Con		(lood doction of reak) no	iii badiiide	ooo aoqan	od by the organization t	ator dance do, rore.
11		An organization organized a		valy to test for public sat	faty Saa	section 50	10(2)(4)	
12	H	An organization organized a	•	-	-			nurnassa of one or
12		•	•	•	•		•	• •
		more publicly supported org	=					Sheck the box on
		lines 12a through 12d that					<del>-</del>	
а				·		-		= =
		the supported organization	., .		majority o	the direc	tors or trustees of the su	upporting
		organization. You must o	complete Part IV, Se	ctions A and B.				
b								=
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	oorted
		organization(s). You mus	t complete Part IV,	Sections A and C.				
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functionally integrate	ed with,
		its supported organization	n(s) (see instructions)	You must complete F	Part IV, Se	ctions A,	D, and E.	
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nection w	rith its supported organia	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sati	sfy a distri	ibution rec	uirement and an attentiv	veness
		requirement (see instructi	ions). You must con	nplete Part IV. Sections	A and D.	and Part	V.	
е		Check this box if the orga	•	•				
_		functionally integrated, or					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
f	Ente	er the number of supported o		iani, miagratica capporti	.9 0.90			
a.		ride the following information	-	d organization(s)				
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10	in your governi <b>Yes</b>	No No	support (see instructions)	support (see instructions)
				above (see instructions))	165	NO		
								1

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(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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and		-				
	membership fees received. (Do not						
	include any "unusual grants.")	9103460.	11547729.	10039244.	11372411.	11404019.	53466863.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
Ū	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	9103460.	11547729.	10039244.	11372411.	11404019.	53466863.
5	The portion of total contributions	32001001					
•	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,						
_	**						53466863.
	Public support. Subtract line 5 from line 4.						p3400003.
	• •	(-) 0010	(I-) 0000	(-) 0001	(-I) 0000	(-) 0000	(6) Tatal
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020 1 1 5 4 7 7 2 9	(c) 2021	(d) 2022 11372411.	(e) 2023	(f) Total
	Amounts from line 4	9103400.	11341123.	10039244.	113/2411.	11404019.	53400003.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	02 601	06 001	250 200	254 760	667 610	1450040
	and income from similar sources	83,681.	86,901.	239,288.	354,760.	00/,012.	1452242.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	<b>Total support.</b> Add lines 7 through 10						54919105.
	Gross receipts from related activities,	•	,				<u>,014,769.</u>
13	First 5 years. If the Form 990 is for the	-		-			
_	organization, check this box and stor						
	ction C. Computation of Publi					г г	
	Public support percentage for 2023 (li					14	97.36 %
	Public support percentage from 2022					15	98.20 <u>%</u>
16a	33 1/3% support test - 2023. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies		•				
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test	- 2023. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qua <b>l</b> ifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2022. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	7a, and <b>l</b> ine 15 is	10% or
	more, and if the organization meets th	ne facts-and-circum	nstances test, che	ck this box and st	t <b>op here.</b> Exp <b>l</b> ain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	
<u>1</u> 8	Private foundation. If the organization				•		
	<u> </u>		,	. ,			(Form 990) 2023

## 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.)

qualify under the tests listed be Section A. Public Support	now, please comp	лете наптп.)				
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and	(-)	(=)	(-,	(/		
membership fees received. (Do not						
include any "unusual grants.")						
2 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						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						_
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a 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 <b>l</b> ines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a 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						
c Add lines 10a and 10b						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizatio	on,
check this box and stop here						
check this box and stop here						
	c Support Per	centage	column (f))		15	%
check this box and stop here Section C. Computation of Publi  15 Public support percentage for 2023 (ii  16 Public support percentage from 2022	<b>c Support Per</b> ine 8, column (f), d Schedule A, Part	centage livided by line 13, o III, line 15	column (f))		15 16	% %
check this box and stop here Section C. Computation of Publi 15 Public support percentage from 2023 (li 16 Public support percentage from 2022 Section D. Computation of Inves	c Support Per ine 8, column (f), d Schedule A, Part itment Income	centage ivided by line 13, o III, line 15 Percentage			16	%
check this box and stop here	c Support Per ine 8, column (f), d Schedule A, Part tment Income 123 (line 10c, colur	centage livided by line 13, o III, line 15 Percentage mn (f), divided by li	ne 13, column (f))		16	%
check this box and stop here  Section C. Computation of Publi  15 Public support percentage for 2023 (li  16 Public support percentage from 2022  Section D. Computation of Inves  17 Investment income percentage from 20  18 Investment income percentage from 20	c Support Per ine 8, column (f), d Schedule A, Part trent Income 123 (line 10c, colur 2022 Schedule A,	ivided by line 13, of lill, line 15	ne 13, column (f))		16 17 18	% %
check this box and stop here  Section C. Computation of Publi  15 Public support percentage for 2023 (li  16 Public support percentage from 2022  Section D. Computation of Inves  17 Investment income percentage from 20  18 Investment income percentage from 20  19 33 1/3% support tests - 2023. If the	c Support Per ine 8, column (f), d Schedule A, Part stment Income 123 (line 10c, colur 2022 Schedule A, organization did n	ivided by line 13, of line 15. or line 15. or line 15. or line 16. or line 17. or line 17. or line 17. or line 18.	ne 13, column (f)) on line 14, and line	15 is more than	16 17 18 33 1/3%, and line 17	% %
check this box and stop here  Section C. Computation of Publi  15 Public support percentage for 2023 (li  16 Public support percentage from 2022  Section D. Computation of Inves  17 Investment income percentage for 20  18 Investment income percentage from 21  19a 33 1/3% support tests - 2023. If the more than 33 1/3%, check this box ar	c Support Per ine 8, column (f), d Schedule A, Part tment Income 23 (line 10c, colur 2022 Schedule A, organization did n d stop here. The	ivided by line 13, of lill, line 15 Percentage mn (f), divided by line 17 Part III, line 17 not check the box organization qualication decirication in the line 17 of lill, line 17 organization qualication qualication decirication decirication qualication decirication decirication qualication decirication decirication decirication qualication decirication	ne 13, column (f)) on line 14, and line fies as a publicly s	15 is more than upported organiz	16 17 18 33 1/3%, and line 17 ation	% % % 7 is not
check this box and stop here  Section C. Computation of Publi  15 Public support percentage for 2023 (li  16 Public support percentage from 2022  Section D. Computation of Inves  17 Investment income percentage from 20  18 Investment income percentage from 20  19 33 1/3% support tests - 2023. If the	c Support Per ine 8, column (f), d Schedule A, Part treent Income 23 (line 10c, colur 2022 Schedule A, organization did not stop here. The organization did not stop did not s	ivided by line 13, or line 15 e Percentage mn (f), divided by line 17 mot check the box or organization qualitation to the check a box on livided box or line 17 mot check a box or line 17 mot check a box or line 17 mot check a box or line 18 mot check a box or lin	ne 13, column (f)) on line 14, and line fies as a publicly s line 14 or line 19a	e 15 is more than a upported organiz u, and line 16 is m	16 17 18 33 1/3%, and line 17 ation	% % % ' is not

## Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- c 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 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? If "Yes," provide detail in Part VI.
- 7 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? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

  If "Yes." complete Part I of Schedule L (Form 990).
- 9a 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))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a 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)? If "Yes," answer line 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	•		
	2		
	За		
	01		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b 5c		
	6		
	7		
	7		
	8		
	9a		
	34		
	9b		
	9c		
	90		
	10a		
	10b		
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Schedule A (Form 990) 2023

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 Part VI the role played by the organization in this regard.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ing Organ	izations		
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on l	Nov. 20, 1970 ( explain in I	Part VI). See instructions.	
	All other Type III non-functionally integrated supporting organizations mu		•	•	
Sect	ion 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	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion 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):				
а	Average monthly value of securities	1a			
	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
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	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion 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	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting orga	nization (see	
	instructions).				

Schedule A (Form 990) 2023

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sect	ion D - Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
_3_	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3		
_4_	Amounts paid to acquire exempt-use assets			4		
_5_	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
_6_	Other distributions (describe in Part VI). See instructions.			6		
_7_	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.			8		
_9_	Distributable amount for 2023 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	ıs	(iii) Distributable Amount for 2023	
_1_	Distributable amount for 2023 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2023 (reason-					
	able cause required - explain in Part VI). See instructions.					
_3_	Excess distributions carryover, if any, to 2023					
<u>a</u>	From 2018					
<u>b</u>	From 2019					
c	From 2020					
<u>d</u>	From 2021					
<u> </u>	From 2022					
<u>f</u>	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
<u>h</u>	Applied to 2023 distributable amount					
<u>i</u>	Carryover from 2018 not applied (see instructions)					
<u>_</u> i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2023 from Section D,					
	line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2023 distributable amount					

Schedule A (Form 990) 2023

c Remainder. Subtract lines 4a and 4b from line 4.
5 Remaining underdistributions for years prior to 2023, if

than zero, explain in Part VI. See instructions.
Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2024. Add lines 3j

Part VI. See instructions.

and 4c.
 B Breakdown of line 7:
 a Excess from 2019
 b Excess from 2020
 c Excess from 2021
 d Excess from 2022
 e Excess from 2023

any. Subtract lines 3g and 4a from line 2. For result greater

## Schedule B

(Form 990)

## **Schedule of Contributors**

2022

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

2023

OMB No. 1545-0047

52-6074723 MEALS ON WHEELS OF CENTRAL MARYLAND, INC. Organization type (check one): Filers of: Section: X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 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 X 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), 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), 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

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

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023) Page **2** 

Name of organization

Employer identification number

## MEALS ON WHEELS OF CENTRAL MARYLAND, INC.

52-6074723

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	0074723
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANNE ARUNDEL COUNTY AREA AGENCY ON AGING  7320 RITCHIE HWY  GLEN BURNIE, MD 21061	\$ <u>457,974.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BALTIMORE CITY HEALTH DEPARTMENT CARE SERVICES  417 E FAYETTE STREET  BALTIMORE, MD 21202	\$3,594,692.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	BALTIMORE COUNTY DEPARTMENT OF AGING 611 CENTRAL AVENUE TOWSON, MD 21204	\$ <u>1,089,709</u> .	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	CARROLL COUNTY BUREAU OF AGING  125 STONER AVE  WESTMINSTER, MD 21157	\$165,766.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	HARFORD COUNTY AREA AGENCY ON AGING  145 NORTH HICKORY AVE  BEL AIR, MD 21014	\$ 282,735.	Person X Payroll
(a) <u>N</u> o.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
6	HOWARD COUNTY DEPT. OF CITIZEN SERVICES  9830 PATUXENT WOODS DR  COLUMBIA, MD 21046	\$314,987.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
	COLUMBIA, MD 21046		Schedule B (Form 990) (2023)

Dage 2

Schedule B (Form 990) (2023) Name of organization

Employer identification number

## MEALS ON WHEELS OF CENTRAL MARYLAND, INC.

52-6074723

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	JEWISH COMMUNITY FEDERATION OF BALTIMORE  101 W MOUNT ROYAL AVE BALTIMORE, MD 21201	\$ 120,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	UNITED WAY OF CENTRAL MARYLAND  P O BOX 1576  BALTIMORE, MD 21203	\$5 <b>4</b> ,110.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	MONTGOMERY COUNTY HEALTH & HUMAN SERVICES  401 HUNGERFORD DR, 4TH FLR  ROCKVILLE, MD 20850	\$ 249,588.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)

Name of organization Employer identification number

## MEALS ON WHEELS OF CENTRAL MARYLAND, INC.

52-6074723

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<b></b> \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	

Schedule B (Form 990) (2023) Name of organization Employer identification number 52-6074723 MEALS ON WHEELS OF CENTRAL MARYLAND, INC. 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 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

323454 12-26-23

Schedule B (Form 990) (2023)

## **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 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

MEALS ON WHEELS OF CENTRAL MARYLAND, INC.

Employer identification number 52-6074723

Par	rt I Organizations Maintaining Donor Advised Funds or Other Simila	ar Funds or Ac	counts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, line 6.		•			
	(a) Donor advised fun	ds (	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 fund	ls			
	are the organization's property, subject to the organization's exclusive legal control?		Yes No			
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant ful	nds can be used or	nly			
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other	er purpose conferri	ng			
	impermissible private benefit?					
Par	rt 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)	servation of a histo	rically important land area			
	Protection of natural habitat	servation of a certit	fied 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 cor				
	day of the tax year.		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
С			2c			
d	•					
	on a historic structure listed in the National Register		2d			
3	Number of conservation easements modified, transferred, released, extinguished, or termin	ated by the organiz	zation 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, h					
_	violations, and enforcement of the conservation easements it holds?					
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enf	orcing conservation	n easements during the year			
7	Amount of avanage incurred in manitaring inspecting handling of violations and enforcing	a concentation con	soments during the year			
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing	ig conservation eas	sements during the year			
8	Does each conservation easement reported on line 2d above satisfy the requirements of se	oction 170/b\/4\/P\/i\				
0						
9	and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation easements in its revenue ar					
3	balance sheet, and include, if applicable, the text of the footnote to the organization's finan	*				
	organization's accounting for conservation easements.	olai statements the	at describes the			
Par	rt III Organizations Maintaining Collections of Art, Historical Treasur	es, or Other Si	imilar Assets.			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	r				
	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue	statement and bala	nce sheet works			
	of art, historical treasures, or other similar assets held for public exhibition, education, or re					
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.					
b			sheet works of			
	art, historical treasures, or other similar assets held for public exhibition, education, or rese	arch 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					
	the following amounts required to be reported under FASB ASC 958 relating to these items					
а	Revenue included on Form 990, Part VIII, line 1		\$			
<u>b</u>	A I					
	For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Schedule D (Form 990) 2023			

Schedule D (Form 990) 2023

Part VII Investments - Other Securities		L MARYLAND, INC.	52-6074723 Page 3
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1b. 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) CONSOLIDATED INVESTMENT	10 750 701		
(B) FUND	12,768,794.	END-OF-YEAR MARKI	
(C) HEDGE FUNDS	397,025.	END-OF-YEAR MARK	ET VALUE
(D)			
(E)			
(F)			
(G)			
(H)	13,165,819.		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))  Part VIII Investments - Program Related.	13,103,019.		
Complete if the organization answered "Yes" of	on Form 990 Part IV line 1	1c. See Form 990. Part X. line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-vear market value
(1)	(b) Book value	(e) member of valuations cook of	ond or your marrier value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets  Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1 <sup>-</sup>	1d. See Form 990, Part X, line 15.	
(a) [	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			

Total. (Cold	ımn (b) must equal Form 990, Part X, line 15, col. (B))
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)	PENSION LIABILITY	201,405.
(3)	PRIVATE CLIENT DEPOSITS	13,347.
(4)	LEASE LIABILITY	196,273.
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	411,025.

<sup>2.</sup> 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) 2023

Sche	edule D (Form 990) 2023 MEALS ON WHEELS OF CENTRAL	MARY	LAND, INC.	52-	6074723 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statemen	ts Wit	h Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			Ι.	16 622 457
1	Total revenue, gains, and other support per audited financial statements  Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1	16,633,457.
2 a	Net unrealized gains (losses) on investments	2a	1,498,418.		
b	Donated services and use of facilities	2b	747,889.		
c	Recoveries of prior year grants	2c			
d		2d			
е	Add lines 2a through 2d			2e	2,246,307.
3	Subtract line 2e from line 1			3	14,387,150.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	46-		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	72,465.	-	
b	Other (Describe in Part XIII.)	4b			72 465
c				4c 5	72,465. 14,459,615.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  rt XII   Reconciliation of Expenses per Audited Financial Statemen	nts Wi	th Expenses per F		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		ar Experiede per i	iotai	•
1	Total expenses and losses per audited financial statements			1	15,185,683.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				, , , , , , , , , , , , , , , , , , , ,
а	Donated services and use of facilities	2a	747,889.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	,	2d			
е	Add lines 2a through 2d			2e	747,889.
3	Subtract line 2e from line 1			3	14,437,794.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	ا مه ا	72,465.		
a b	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4a 4b	72,403.	-	
C				4c	72,465.
5				5	14,510,259
Pa	rt XIII Supplemental Information				
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I $\!$	/, lines 1	b 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 $\frac{1}{2}$	onal info	ormation.		
וגם	om v tine 4.				
PAI	RT V, LINE 4:				
THI	E ENDOWMENT FUNDS WERE ESTABLISHED TO PROVII	DE A	PREDICTABLE	ST	REAM OF
FUI	NDS TO SUPPORT THE ORGANIZATION'S OPERATIONS	S, T	O PROVIDE A	HAR	DSHIP FUND
ШΟ	DAY FOR MEAT C FOR LOW INCOME CITEMES AND MO	אמת כ		(1 A D	ттат
10	PAY FOR MEALS FOR LOW INCOME CLIENTS AND TO	J PRO	JVIDE FOR A	CAP	ITAL
BII.	ILDING RESERVE FOR THE NEW BUILDING PROJECT	_			
	India india in the new bollbino incolor.	•			
PAI	RT X, LINE 2:				
TH:	E ORGANIZATION FOLLOWS THE PROVISIONS OF ACC	COUN'	ring for unc	ERT.	AINTY IN
T NT/	COME MAYES TINDED MUE TNOOME MAYES MODIS OF S	nut /	~^^_	, ,	muc
TIM	COME TAXES UNDER THE INCOME TAXES TOPIC OF T	י מחיו	CODIFICATION	•	THE
COI	DIFICATION REQUIRES THE ORGANIZATION'S EVALU	JATI	ON OF TAX PO	SIT	IONS,
WH:	ICH INCLUDE MAINTAINING ITS TAX-EXEMPT STATU	JS AI	ND THE TAXAB	ILI	TY OF ANY
וואדן	RELATED BUSINESS INCOME, AND DOES NOT ALLOW	RECO	ЭСИТТТОИ ОБ	ጥል፶	POSTTTONS
			I I L / IN L / C	. ~ ^	

332054 09-28-23

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 MEALS ON WHEELS OF CENTRAL MARYLAND, INC. 52-6074723 Page 5  Part XIII Supplemental Information (continued)
WHICH DO NOT MEET A "MORE-LIKELY-THAN-NOT" THRESHOLD OF BEING SUSTAINED BY
THE APPLICABLE TAX AUTHORITY. MANAGEMENT DOES NOT BELIEVE IT TOOK ANY TAX
POSITIONS THAT WOULD NOT MEET THIS THRESHOLD.

## **SCHEDULE G** (Form 990)

## **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

MEALS O	N WHEELS OF CENTRA	L MA	\RYI	LAND, INC.	52-6074	723
Part I Fundraising Activities, required to complete this par	Complete if the organization answet	ered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
Indicate whether the organization raise		na activ	rities (	Check all that apply		
a X Mail solicitations				overnment grants		
b X Internet and email solicitations			_	nment grants		
c X Phone solicitations	g X Special					
d X In-person solicitations	<b>9</b> Openia.	rarrare		0.000		
2 a Did the organization have a written of	or oral agreement with any individual	(inclue	lina of	fficers directors trus	tees or	
key employees listed in Form 990, F	•	•	-		X Yes	No
<b>b</b> If "Yes," list the 10 highest paid indi				=		
compensated at least \$5,000 by the		ant to	agreei	monts ander which th	ic idildiaisci is to be	,
- Compensated at least \$6,000 by the	Torganization.				ı	ı
(2) Name and address of individual		(iii) fundr	Ņіd	(i. ) Ourse wassints	(v) Amount paid	(vi) Amount paid
<ul><li>(i) Name and address of individual or entity (fundraiser)</li></ul>	(ii) Activity	have c	ustody	(iv) Gross receipts	to (or retained by) fundraiser	to (or retained by)
or entity (idilaraiser)			itro <b>l</b> of utions?	from activity	listed in col. (i)	organization '
ECHO EFFECT, LLC - 6100		Yes	No			
SEAFORTH ST, BALTIMORE, MD	MAIL SOLICITATIONS	100	х	180,592.	33,000.	147,592.
HUNTSINGER & JEFFER - 809				, ,	, -	, .
BROOK HILL CIR, RICHMOND, VA	MAIL SOLICITATIONS		x	116,408.	45,094.	71,314.
,				, ,	, ,	, ,
Total				297,000.	78,094.	218,906.
3 List all states in which the organization						gistration
or licensing.						
MD						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2023

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-FZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

	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 NIGHT OF A MILLION MEAL	<b>(b)</b> Event #2	(c) Other events NONE	(d) Total events (add col. (a) through			
Revenue			(event type)	(event type)	(total number)	col. <b>(c)</b> )			
			(Gront type)	(6161111) (6161111)	(total names)				
	1	Gross receipts	208,545.			208,545.			
	2	Less: Contributions	181,947.			181,947.			
	3	Gross income (line 1 minus line 2)	26,598.			26,598.			
	4	Cash prizes							
s	5	Noncash prizes							
pense	6	Rent/facility costs	9,570.			9,570.			
Direct Expenses	7	Food and beverages	10,780.			10,780.			
О	8	Entertainment	3,000.			3,000. 27,853.			
	9	Other direct expenses	27,853.			27,853.			
	10	Direct expense summary. Add lines 4 through	. ,			51,203.			
Pa	11 rt I	Net income summary. Subtract line 10 from li  Gaming. Complete if the organization a		000 Part IV line 10 or	roported more than	-24,605.			
		\$15,000 on Form 990-EZ, line 6a.	answered res on rollin	990, 1 art [V, ]ine 19, 01	reported more than				
		,, <u></u> ,	( ) 5:	(b) Pull tabs/instant		(d) Total gaming (add			
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))			
eve									
	1	Gross revenue							
es	2	Cash prizes							
Expenses	3	Noncash prizes							
Direct E	4	Rent/facility costs							
	5	Other direct expenses							
	6	Volunteer labor	Yes %  No	Yes % No	Yes % No				
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)						
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)						
_	_	teather abdotted to the time of the							
9		ter the state(s) in which the organization condu							
		the organization licensed to conduct gaming ac				Yes No			
D	11	No," explain:							
	_								
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax v	year?	Yes No			
		Yes," explain:	·						
						_			

332082 09-13-23 Schedule G (Form 990) 2023

Schedul	e G (Form 990) 2023 MEALS ON WHEELS OF CENTRAL MARYLAND, INC. 52-6	<u>074723</u>	Page 3
<b>11</b> Do	es the organization conduct gaming activities with nonmembers?	Yes	☐ No
<b>12</b> Is t	he organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
to a	administer charitable gaming?	Yes	No
<b>13</b> Ind	icate the percentage of gaming activity conducted in:		
a The	e organization's facility	13a	<u>%</u>
<b>b</b> An	outside facility	13b	<u>%</u>
<b>14</b> Ent	ter the name and address of the person who prepares the organization's gaming/special events books and records:		
NI-			
Na	me		
Ad	dress		
<b>15a</b> Do	es the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b lf "	Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
	gaming revenue retained by the third party \$		
	Yes," enter name and address of the third party:		
Na	me		
Ad	dress		
<b>16</b> Ga	ming manager information:		
Na	me		
Ga	ming manager compensation \$		
De	scription of services provided		
_			
_			
	Director/officer Employee Independent contractor		
<b>17</b> Ma	indatory distributions:		
	he organization required under state law to make charitable distributions from the gaming proceeds to		
	ain the state gaming license?	Yes	No
	ter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
org	panization's own exempt activities during the tax year \$		01 401
Parti		III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
SCHE	DULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS		
(I)	NAME OF FUNDRAISER: ECHO EFFECT, LLC		
(1)	NAME OF FUNDARISER: ECHO EFFECI, DDC		
(I)	ADDRESS OF FUNDRAISER: 6100 SEAFORTH ST, BALTIMORE, MD 21224		
/ T \ '	NAME OF FUNDDATORD, HUNDOTNORD ( TREEP)		
<u>(I)</u>	NAME OF FUNDRAISER: HUNTSINGER & JEFFER		
(I)	ADDRESS OF FUNDRAISER: 809 BROOK HILL CIR, RICHMOND, VA 2322	7	
	· · · · · · · · · · · · · · · · · · ·		
	T. T.T. OD. GOLIDOT (II)		
PAKT'	I, LINE 2B, COLUMN (V):		

332083 09-13-23

### SCHEDULE J (Form 990)

**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 for instructions and the latest information.

2023

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

MEALS ON WHEELS OF CENTRAL MARYLAND, INC.

Employer identification number 52-6074723

Pa	Part I Questions Regarding Compensation			
			Yes	No
1a	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 9	90,		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for person	al use		
	Travel for companions Payments for business use of personal res	idence		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur	r, chef)		
b	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	1b		
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?	2		
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 organizatio	n to		
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation compensation	mmittee		
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:			
а	a Receive a severance payment or change-of-control payment?	4a		X
b	b Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	c Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	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	1		
	contingent on the revenues of:			
а	a The organization?	5a	X	
b	b Any related organization?	5b		X
	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	1		
	contingent on the net earnings of:			
а	a The organization?	6a		X
	b Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	, , , , , , , , , , , , , , , , , , , ,			
	not described on lines 5 and 6? If "Yes," describe in Part III			X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	<b>)</b>		1
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

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.

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	-2 and/or 1099-MISC compensation	3 and/or 1099-NEC	ည	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
STEPHANIE ARCHER-SMITH	≘	185,396.	15,000.	0	13,02	1,238.	214,660.	0
EXECUTIVE DIRECTOR		0 0 0 0 0 0 0	0 000	0	c	000		0
JAN E HEIFNER	<u>e</u>	132,052.	2,300.		8,73	. , 027.	111,061	00
CFO		0	0	0	0	0	0	0
	≘ €							
	1 =							
	€							
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	(ii)							
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	Ξ							
	(ii)							
							Schedu	Schedule J (Form 990) 2023

37

Schedule J (Form 990) 2023	MEALS	ON	WHEELS	ОF	CENTRAL	MEALS ON WHEELS OF CENTRAL MARYLAND, INC.	INC.		
Part III Supplemental Informatic	uc								
Provide the information, explanation	n, or descriptio	ns rec	uired for Part	I, lines	, 1a, 1b, 3, 4a,	n, 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 comple	3b, 7, and 8, and	for Part II. Als	o comple

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 5:
S AND MEAL DELIVERY GOALS, AND
Schedule J (Form 990) 202

### SCHEDULE M (Form 990)

### Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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 for instructions and the latest information.

Inspection **Employer** identification number

52-6074723 MEALS ON WHEELS OF CENTRAL MARYLAND, INC. Types of Property Part I (a) (b) (c) (d) Number of Noncash contribution Check if Method of determining contributions or amounts reported on applicable noncash contribution amounts Form 990, Part VIII, line 1g items contributed Art - Works of art Art - Historical treasures 2 Art - Fractional interests 3 Books and publications ..... 4 5 Clothing and household goods Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 18,680.FMV Securities - Publicly traded ..... X 9 10 Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 18 Collectibles ..... Х 75.FMV 19 Food inventory Drugs and medical supplies \_\_\_\_\_ 20 21 Taxidermy Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 10,780.FMV (FOOD AND WINE X 15 Other 25 ( AUCTION ITEM 7.520.FMV X 35 Other 26 27 Other Other 28 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 Yes No 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 3 years from the date of the initial contribution, and which isn't required to be used for Х exempt purposes for the entire holding period? 30a **b** If "Yes," describe the arrangement in Part II. Х Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? **b** If "Yes," describe in Part II. 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

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

Schedule M (Form 990) 2023

Schedule M	(Form 990) 2023 🛚 🛚	MEALS ON	WHEELS OF	CENTRAL	MARYLAND	,INC.	52-6074723	Page 2
Part II	(Form 990) 2023 <b>I</b> Supplemental I	nformation.	Provide the informa	ation required by	Part I, lines 30b, 3	32b, and 33, ai	nd whether the organi ation of both. A <b>l</b> so co	zation
	is reporting in Part I,	column (b), the	number of contribu	ıtions, the numb	er of items receive	d, or a combin	ation of both. A <b>l</b> so co	mp <b>l</b> ete
	this part for any add	itional informatio	on.					
-								
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•								
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332142 09-11-23

Schedule M (Form 990) 2023

### SCHEDULE O (Form 990)

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 Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2023
Open to Public Inspection

Name of the organization

MEALS ON WHEELS OF CENTRAL MARYLAND, INC.

Employer identification number 52-6074723

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND DISABLED ADULTS TO KEEP THEM LIVING SAFELY AND INDEPENDENTLY IN

THEIR HOMES AND COMMUNITIES. BY PROVIDING NUTRITIOUS, HOME-DELIVERED

MEALS AND INDIVIDUALIZED SUPPORT SERVICES, MOWCM IMPACTS REDUCES HEALTH

DISPARITIES, IMPROVES HEALTH OUTCOMES AND SUPPORTS SUCCESSFUL AGING.

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

MEALS ON WHEELS OF CENTRAL MARYLAND, INC. HAS A PROCESS TO REVIEW THE 990 AND COPIES ARE PROVIDED TO THE ORGANIZATION'S GOVERNING BOARD AFTER THE AUDITED FINANCIAL STATEMENTS HAVE BEEN REVIEWED AND APPROVED BY THE FINANCE/AUDIT COMMITTEE. A DRAFT FORM 990 IS PREPARED BY OUR ACCOUNTANT. THE DRAFT IS THEN REVIEWED BY THE CFO, IT, FACILITY, CDO AND CEO. AFTER A REVISED DRAFT IS PRESENTED TO THE ANY NECESSARY CHANGES ARE MADE, FINANCE/AUDIT COMMITTEE. AFTER ANY ADDITIONAL CHANGES ARE MADE AND FINAL APPROVAL IS OBTAINED FROM THE FINANCE COMMITTEE, THE FORM 990 IS EMAILED TO THE ENTIRE GOVERNING BOARD. THE APPROVED 990 IS SIGNED BY THE EXECUTIVE DIRECTOR AND SUBMITTED WITHIN THE FILING DEADLINE.

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

CONFLICT OF INTEREST GUIDELINES ARE ESTABLISHED FOR BOARD MEMBERS AND

MEMBERS OF THE SENIOR MANAGEMENT STAFF. ANNUALLY, WE REQUIRE THAT A

DIRECTOR DISCLOSES THE EXISTENCE OF A DIRECT OR INDIRECT FINANCIAL INTEREST

ON THE PART OF THE DIRECTOR, AND WHERE SUCH FINANCIAL INTEREST EXISTS TO

ABSTAIN FROM ANY VOTE ON SUCH MATTERS.

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

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

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2

Name of the organization **Employer** identification number MEALS ON WHEELS OF CENTRAL MARYLAND, INC. 52-6074723 MEALS ON WHEELS OF CENTRAL MARYLAND (MOWCM) IS COMMITTED TO INDIVIDUAL PERFORMANCE EVALUATIONS, COMPETITIVE PAY, MERIT-BASED PAY INCREASES, AND OTHER EMPLOYEE INCENTIVES. IT IS THE RESPONSIBILITY AND INTENTION OF THE EXECUTIVE DIRECTOR AND BOARD OF DIRECTORS TO ADMINISTER COMPENSATION EQUITABLY, CONSISTENTLY, AND FAIRLY WITHIN MOWCM, AND TO MAKE MODIFICATIONS TO THIS POLICY AS NECESSARY AND APPROPRIATE. MOWCM'S COMPENSATION SYSTEM IS STRUCTURED AROUND A SALARY-GRADE SCALE THAT IS MARKET-BASED, AND FOCUSES ON THE INTERNAL EQUITY OF POSITIONS. UNDER THE SALARY-GRADE SYSTEM, POSITIONS ARE CLASSIFIED INTO SALARY GRADES BASED ON COMPENSABLE FACTORS SUCH AS REQUIRED SKILLS, EDUCATION, TRAINING, AND DECISION-MAKING AND SUPERVISORY RESPONSIBILITIES. NOTABLE CHANGES AND FULL SCALE CHANGES ARE REVIEWED BY THE BOARD OF DIRECTORS. THE EXECUTIVE DIRECTOR'S SALARY IS SET BY THE BOARD OF DIRECTORS USING COMPARABLE MARKET DATA. FORM 990, PART VI, SECTION C, LINE 19: MEALS ON WHEELS OF CENTRAL MARYLAND, INC. WILL PROVIDE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS TO THE PUBLIC BY WRITTEN REQUEST MAILED TO: MEALS ON WHEELS OF CENTRAL MARYLAND

ATTN DEPUTY EXECUTIVE DIRECTOR OF FINANCE, IT, FACILITY

515 S HAVEN STREET BALTIMORE, MD 21224

FORM 990, PART XII, LINE 2C:

THE PROCESS REGARDING THE PREPARATION OF THE AUDITED FINANCIAL

STATEMENTS IS UNCHANGED FROM THE PRIOR YEAR.

### Form **8868**

(Rev. January 2024)

### Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information. OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Type or **Print** 52-6074723 MEALS ON WHEELS OF CENTRAL MARYLAND, INC. File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 515 S HAVEN STREET instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. BALTIMORE, MD 21224 Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Return | Application Is For Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 8870 12 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of **JANET** E. **HEIFNER** 515 S. HAVEN ST. - BALTIMORE, MD 21224 Telephone No. 410-558-0917 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box ...... and attach a list with the names and TINs of all members the extension is for. , 20 25 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: \_\_\_ calendar year 20 \_\_\_\_ or X tax year beginning \_\_\_\_\_ JUL 1 , 20 23 , and ending JUN 30 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return ☐ Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2024)

LHA 323841 12-22-23

## ELLIN & TUCKER

MEALS ON WHEELS OF CENTRAL MARYLAND, INC.
FINANCIAL STATEMENTS AND REPORTS ON
INTERNAL CONTROL AND COMPLIANCE
JUNE 30, 2024 AND 2023



### **Financial Statements:**

Independent Auditors' Report 1-2
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Statements of Activities5-6
Statements of Functional Expenses
Statements of Cash Flows
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Uniform Guidance Supplementary Information:
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Notes to Schedule of Expenditures of Federal Awards





### **INDEPENDENT AUDITORS' REPORT**

To the Board of Directors of Meals on Wheels of Central Maryland, Inc.

### **OPINION**

We audited the accompanying financial statements of Meals on Wheels of Central Maryland, Inc. (Organization), which comprise the Statements of Financial Position as of June 30, 2024 and 2023, the related Statements of Activities, Functional Expenses, and Cash Flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Organization as of June 30, 2024 and 2023 and the change in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### **BASIS FOR OPINION**

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audits of the Financial Statements section of our report. We are required to be independent of the Organization and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe the audit evidence we obtained is sufficient and appropriate to provide a basis for our audit opinion.

### RESPONSIBILITIES OF MANAGEMENT FOR THE FINANCIAL STATEMENTS

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Organization's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

### **AUDITORS' RESPONSIBILITIES FOR THE AUDITS OF THE FINANCIAL STATEMENTS**

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with generally accepted auditing





standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due
  to fraud or error, and design and perform audit procedures responsive to those risks. Such
  procedures include examining, on a test basis, evidence regarding the amounts and disclosures in
  the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit
  procedures that are appropriate in the circumstances but not for the purpose of expressing an
  opinion on the effectiveness of the Organization's internal control. Accordingly, no such opinion
  is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Organization's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance matters regarding, among other matters, the planned scope and timing of the audits, significant audit findings, and certain internal control-related matters that we identified during the audits.

### OTHER REPORTING REQUIRED BY GOVERNMENT AUDITING STANDARDS

In accordance with *Government Auditing Standards*, we also issued our report dated December 19, 2024 on our consideration of the Organization's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, grant agreements, and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing and not to provide an opinion on internal control over financial reporting or on compliance. The report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control over financial reporting and compliance.

ELLIN & TUCKER

**Certified Public Accountants** 

in + Bucker

Baltimore, Maryland December 19, 2024



### **ASSETS**

	2024	2023
CURRENT ASSETS		
Cash and Cash Equivalents	\$ 3,000,068	\$ 1,916,789
Accounts and Pledges Receivable, Net	1,509,365	6,368,827
Government Fees and Grants Receivable	443,843	522,832
Prepaid Expenses and Other Current Assets	270,937	171,890
Total Current Assets	5,224,213	8,980,338
OTHER ASSETS		
Investments (Note 2)	26,394,543	21,002,593
Right-of-Use Assets, Net of Accumulated Amortization		
of \$90,938 and \$38,816, Respectively (Note 7)	195,530	161,455
Property and Equipment, Net (Note 3)	3,226,779	2,889,732
Total Other Assets	29,816,852	24,053,780
Total Assets	\$ 35,041,065	\$ 33,034,118

### **LIABILITIES AND NET ASSETS**

	2024	2023
CURRENT LIABILITIES		
Accounts Payable	\$ 1,016,552	\$ 846,598
Accrued Payroll and Payroll Tax Withholdings	322,006	257,736
Accrued Retirement Plan Expense	201,405	148,975
Deferred Revenue	13,347	13,347
Operating Lease Obligations, Current Portion (Note 7)	57,790	39,424
Finance Lease Obligations, Current Portion (Note 8)	225,719	181,658
Total Current Liabilities	1,836,819	1,487,738
OTHER LIABILITIES		
Operating Lease Obligations, Long Term (Note 7)	138,483	122,918
Finance Lease Obligations, Long Term (Note 8)	613,989	419,462
Total Other Liabilities	752,472	542,380
Total Liabilities	2,589,291	2,030,118
COMMITMENTS AND CONTINGENCIES (Note 11)		
NET ASSETS		
Without Donor Restrictions:		
Board Designated (Note 4)	26,394,543	25,643,431
General	5,290,518	4,570,522
Total Net Assets Without Donor Restrictions	31,685,061	30,213,953
With Donor Restrictions (Note 5)	766,713	790,047
Total Net Assets	32,451,774	31,004,000
Total Liabilities and Net Assets	\$ 35,041,065	\$ 33,034,118

Meals on Wheels of Central Maryland, Inc.

For the Year Ended June 30, 2024 (With Comparative Totals for 2023)

		2024		
	Without			
	Donor	With Donor		2023
	Restrictions	Restrictions	Total	Total
SUPPORT AND REVENUE				
Public Support:				
Contributions From the Public	\$ 2,538,743	\$ 1,092,987	\$ 3,631,730	\$ 3,491,972
United Way of Central Maryland, Inc.	54,110	-	54,110	70,800
The Associated Jewish Community Federation of Baltimore	120,000	-	120,000	120,000
Federal Government Grants	6,102,631	-	6,102,631	5,573,283
State and Local Government Grants	167,231	-	167,231	195,965
Donated Materials, Services, and Occupancy (Note 6)	747,889	-	747,889	697,069
Bequests	19,174	-	19,174	5,530,455
Other	1,071,616	-	1,071,616	833,248
Net Assets Released From Restrictions	1,116,321	(1,116,321)		
Total Public Support	11,937,715	(23,334)	11,914,381	16,512,792
Other Revenue:				
Culinary Event Revenue, Net	157,342	_	157,342	168,575
Meal Service Income	2,166,050	_	2,166,050	3,249,431
Medicaid Waiver Income	180,988	-	180,988	155,908
Draw From Endowments (Note 2)	712,399		712,399	621,165
Total Other Revenue	3,216,779		3,216,779	4,195,079
Total Support and Revenue	15,154,494	(23,334)	15,131,160	20,707,871
EXPENSES				
Program Services:				
Nutrition	8,465,301	-	8,465,301	8,557,933
Client Services	3,872,886	-	3,872,886	3,463,453
Supporting Services:				
Management and General	1,659,041	-	1,659,041	1,390,857
Fundraising	1,015,231		1,015,231	941,081
Total Expenses	15,012,459	-	15,012,459	14,353,324
Change in Net Assets Before Non-Operating Activities	142,035	(23,334)	118,701	6,354,547
NON-OPERATING ACTIVITIES				
Investment Income, Net (Note 2)	1,427,403	_	1,427,403	523,802
Gain on Disposal of Property and Equipment	74,894	_	74,894	10,053
Other Expenses	(173,224)	<u>-</u>	(173,224)	(80,538)
Total Non-Operating Activities	1,329,073			453,317
		(22.224)	1,329,073	
Change in Net Assets	1,471,108	(23,334)	1,447,774	6,807,864
NET ASSETS – BEGINNING OF YEAR	30,213,953	790,047	31,004,000	24,196,136
NET ASSETS – END OF YEAR	\$ 31,685,061	\$ 766,713	\$ 32,451,774	\$ 31,004,000

	Without Donor Restrictions	With Donor Restrictions	Total
SUPPORT AND REVENUE			
Public Support:			
Contributions From the Public	\$ 2,300,326	\$ 1,191,646	\$ 3,491,972
United Way of Central Maryland, Inc.	70,800	-	70,800
The Associated Jewish Community Federation of Baltimore	120,000	-	120,000
Federal Government Grants	5,573,283	-	5,573,283
State and Local Government Grants	195,965	-	195,965
Donated Materials, Services, and Occupancy (Note 6)	697,069	-	697,069
Bequests	5,530,455	-	5,530,455
Other	833,248	-	833,248
Net Assets Released From Restrictions	771,341	(771,341)	
Total Public Support	16,092,487	420,305	16,512,792
Other Revenue:			
Culinary Event Revenue, Net	168,575	-	168,575
Meal Service Income	3,249,431	-	3,249,431
Medicaid Waiver Income	155,908	-	155,908
Draw from Endowments (Note 2)	621,165		621,165
Total Other Revenue	4,195,079		4,195,079
Total Support and Revenue	20,287,566	420,305	20,707,871
EXPENSES			
Program Services:			
Nutrition	8,557,933	-	8,557,933
Client Services	3,463,453	-	3,463,453
Supporting Services:			
Management and General	1,390,857	-	1,390,857
Fundraising	941,081		941,081
Total Expenses	14,353,324		14,353,324
Change in Net Assets Before Non-Operating Activities	5,934,242	420,305	6,354,547
NON-OPERATING ACTIVITIES			
Investment Income, Net (Note 2)	523,802	-	523,802
Gain on Disposal of Property and Equipment	10,053	-	10,053
Other Expenses	(80,538)		(80,538)
Total Non-Operating Activities	453,317		453,317
Change in Net Assets	6,387,559	420,305	6,807,864
NET ASSETS – BEGINNING OF YEAR	23,826,394	369,742	24,196,136
NET ASSETS – END OF YEAR	\$ 30,213,953	\$ 790,047	\$ 31,004,000

# STATEMENT OF FUNCTIONAL EXPENSES Meals on Wheels of Central Maryland, Inc. For the Year Ended June 30, 2024

		<b>Program Services</b>		5	<b>Supporting Services</b>	S	
			Total	Management		Total	
		Client	Program	and		Supporting	
	Nutrition	Services	Services	General	Fundraising	Services	Total
Client Housing Repairs	· \$	\$ 204,386	\$ 204,386	\$ 12,780	· \$	\$ 12,780	\$ 217,166
Computer Supplies	237	201	438	1,727	619	2,346	2,784
Conference Fees and Meetings	1,419	21,013	22,432	11,257	13,172	24,429	46,861
Delivery and Travel	375,707	290,516	666,223	1,056	ı	1,056	667,279
Depreciation and Amortization	478,216	51,879	530,095	11,706	7,888	19,594	549,689
<b>Employee Health and Retirement Benefits</b>	185,938	216,170	402,108	90,238	47,998	138,236	540,344
Food and Kitchen Supplies	5,372,194	ı	5,372,194	273	98	359	5,372,553
Insurance	10,655	19,720	30,375	10,639	1,262	11,901	42,276
Miscellaneous	66,205	11,315	77,520	63,791	16,061	79,852	157,372
Occupancy	93,922	553,077	646,999	30,105	13,430	43,535	690,534
Office Supplies	5,810	060′9	11,900	7,185	4,144	11,329	23,229
Organization Dues and Subscriptions	95	3,944	4,039	3,775	1,710	5,485	9,524
Outside Printing	1	146,394	146,394	2,464	203,779	206,243	352,637
Payroll Taxes and Workers' Compensation	115,562	142,342	257,904	61,676	35,408	97,084	354,988
Postage and Shipping	13	7,559	7,572	13,271	71,701	84,972	92,544
Professional Fees	160,436	112,695	273,131	428,272	70,457	498,729	771,860
Rental and Maintenance of Equipment	93,118	97,059	190,177	34,158	63,597	97,755	287,932
Salaries and Wages	1,471,720	1,830,026	3,301,746	855,375	455,794	1,311,169	4,612,915
Telephone	34,054	699'89	102,723	19,293	8,125	27,418	130,141
Uncollectable Accounts		89,831	89,831	1	1	1	89,831
Total Functional Expenses	\$ 8,465,301	\$ 3,872,886	\$ 12,338,187	\$ 1,659,041	\$ 1,015,231	\$ 2,674,272	\$ 15,012,459



# STATEMENT OF FUNCTIONAL EXPENSES Meals on Wheels of Central Maryland, Inc. For the Year Ended June 30, 2023

		<b>Program Services</b>		S	<b>Supporting Services</b>	Se	
			Total	Management		Total	
		Client	Program	and		Supporting	
	Nutrition	Services	Services	General	Fundraising	Services	Total
Client Housing Repairs	٠ ٠	\$ 203,551	\$ 203,551		· \$	❖	\$ 203,551
Computer Supplies	1,065	514	1,579	1,056	96	1,152	2,731
Conference Fees and Meetings	1,123	21,158	22,281	22,572	22,659	45,231	67,512
Delivery and Travel	457,462	347,942	805,404	477	30	202	805,911
Depreciation and Amortization	368,179	91,715	459,894	17,203	6,073	23,276	483,170
<b>Employee Health and Retirement Benefits</b>	166,357	171,963	338,320	60,734	47,662	108,396	446,716
Food and Kitchen Supplies	5,557,746	ı	5,557,746	1	1	1	5,557,746
Insurance	13,232	25,310	38,542	15,464	1,438	16,902	55,444
Miscellaneous	43,407	26,735	70,142	53,059	6,224	59,283	129,425
Occupancy	90,872	464,231	555,103	29,984	6,552	36,536	591,639
Office Supplies	5,031	7,122	12,153	6,852	4,745	11,597	23,750
Organization Dues and Subscriptions	1	1,160	1,160	3,125	2,086	5,211	6,371
Outside Printing	35	84,759	84,794	(440)	144,426	143,986	228,780
Payroll Taxes and Workers' Compensation	135,806	150,844	286,650	60,925	33,518	94,443	381,093
Postage and Shipping	1	7,154	7,154	9,226	107,816	117,042	124,196
Professional Fees	59,123	49,111	108,234	254,936	103,975	358,911	467,145
Rental and Maintenance of Equipment	124,414	83,953	208,367	50,969	50,833	101,802	310,169
Salaries and Wages	1,484,492	1,570,896	3,055,388	785,727	398,827	1,184,554	4,239,942
Telephone	49,589	75,647	125,236	18,988	4,121	23,109	148,345
Uncollectable Accounts		79,688	79,688	1		•	79,688
Total Functional Expenses	\$ 8,557,933	\$ 3,463,453	\$ 12,021,386	\$ 1,390,857	\$ 941,081	\$ 2,331,938	\$ 14,353,324



Meals on Wheels of Central Maryland, Inc. For the Years Ended June 30, 2024 and 2023

	2024	2023
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in Net Assets	\$ 1,447,774	\$ 6,807,864
Adjustments to Reconcile Change in Net Assets to Net Cash		
Provided by Operating Activities:		
Depreciation and Amortization	549,689	483,170
Non-Cash Operating Lease Activity	(144)	887
Net Realized and Unrealized Gain on Investments	(1,544,655)	(851,820)
Gain on Disposal of Property and Equipment	(74,894)	(10,053)
Net Changes in:		
Accounts and Pledges Receivable, Net	4,859,462	(4,849,039)
Government Fees and Grants Receivable	78,989	24,909
Prepaid Expenses and Other Current Assets	(99,047)	(12,754)
Accounts Payable	169,954	394,951
Accrued Payroll and Payroll Tax Withholdings	64,270	13,961
Accrued Retirement Plan Expense	52,430	19,177
Deferred Revenue		(11)
Net Cash Provided by Operating Activities	5,503,828	2,021,242
CASH FLOWS FROM INVESTING ACTIVITIES		
Proceeds From Sale of Property and Equipment	128,469	39,029
Purchases of Property and Equipment	(490,653)	(315,381)
Proceeds From Sale of Investments	1,481,645	1,333,132
Purchases of Investments	(5,328,940)	(1,223,396)
Net Cash Used in Investing Activities	(4,209,479)	(166,616)
CASH FLOWS FROM FINANCING ACTIVITY		
Payment of Finance Lease Obligations	(211,070)	(335,087)
Net Change in Cash and Cash Equivalents	1,083,279	1,519,539
CASH AND CASH EQUIVALENTS – BEGINNING OF YEAR	1,916,789	397,250
CASH AND CASH EQUIVALENTS – END OF YEAR	\$ 3,000,068	\$ 1,916,789

### **NOTE 1** SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

### NATURE OF OPERATIONS

Meals on Wheels of Central Maryland, Inc. (Organization), envisions a society in which aging is defined by health, dignity, independence, and self-determination. The Organization's charitable mission—to enable people to live independently at home through the provision of nutritious meals, personal contact, and support services—helps those who are aging and disabled sustain their optimum health, maintain economic stability, and improve their overall quality of life. By helping clients to remain living independently and safely in their homes, the Organization prevents premature institutionalization, affirms dignity, and supports continued integration in the social fabric of the community.

Specializing in services to aging and disabled adults, the Organization provides nutritious meals, delivered daily, and support services that impact food and economic security, reduce social isolation, improve health, and promote successful aging. Fundamental to the success of its programs, in addition to healthy and nutritious food, is early identification and intervention through in-depth assessment, linkages to community resources, wellness checks and client concerns reporting, and case management services.

In addition to daily home-delivered, hot, nutritious meals, the following programs and support services are offered:

- Daily health and wellness checks
- Client concerns reporting and emergency response
- GAP: a grocery shopping assistance program
- Groceries to Go: a monthly shelf-stable food delivery program
- Call Connections: a social isolation and loneliness reduction service
- HUBS: a home repair and modification program
- Case management and care coordination services to address economic security, optimize health and reduce hospitalization and health care costs, and improve overall quality of life

Following the pandemic crisis, the Organization continues to support increased need throughout the region, providing services to over 7,000 individuals throughout Central Maryland.

### **ACCOUNTING STANDARDS CODIFICATION**

All references in the financial statements to the Codification refer to the Accounting Standards Codification and the Hierarchy of Generally Accepted Accounting Principles (GAAP) issued by the Financial Accounting Standards Board (FASB). The Codification is the single source of authoritative GAAP in the United States.



### **New Accounting Standard Adoption**

In June 2016, the FASB issued Accounting Standards Update (ASU) 2016-13 — Financial Instruments — Credit Losses (Topic 326) to modify the model for recognizing credit losses on financial instruments not measured at fair value. The modified model requires the immediate recognition of credit losses on financial instruments based on an estimate of expected losses, replacing the incurred loss method under previous guidance. The Organization adopted the standard effective July 1, 2023. The adoption of ASU 2016-13 did not have a material impact on the Organization's financial statements.

### **BASIS OF PRESENTATION**

The financial statements were prepared on the accrual basis of accounting in accordance with GAAP. Under the accrual basis of accounting, support and revenue are recorded when earned, and expenses are recorded when incurred. Net assets, revenues, and expenses are classified based on the existence or absence of donor-imposed restrictions. Net assets with donor restrictions consist of assets whose use is limited by donor-imposed time and/or purpose restrictions.

### **REVENUE RECOGNITION**

Contributions received and unconditional promises to give are measured at their fair values and reported as an increase in net assets. The Organization reports gifts of cash and other assets as donor-restricted support if they are received with donor stipulations that limit the use of the donated assets or designated as support for future periods. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the Statements of Activities as net assets released from restrictions. Donor-restricted contributions whose restrictions are met in the same reporting period are reported as unrestricted revenue.

The Organization obtained funding agreements related to conditional contributions to be received in future years. The Organization's unrecognized conditional contributions to be received in future years totaled approximately \$2,046,000 as of June 30, 2024.

Meal service income and Medicaid waiver income are both generated by supplying home-delivered, nutritious meals to individuals. The Organization records income upon delivery of the meals, which is when the performance obligation is satisfied.

### **CASH AND CASH EQUIVALENTS**

The Organization maintains its cash in bank deposit accounts, which at times may exceed federally insured limits. The Organization believes it is not exposed to any significant credit



risk on cash. The Organization considers all highly liquid investments with original maturities of less than three months to be cash equivalents.

### ACCOUNTS, GOVERNMENT FEES, GRANTS, AND PLEDGES RECEIVABLE

Unconditional promises to give that are expected to be collected within one year are recorded at net realizable value. Unconditional promises to give that are expected to be collected in future years are recorded at the present value of their estimated future cash flows. The discounts on those amounts are computed using risk-free interest rates applicable to the years in which the promises are received. Amortization of the discounts is included in contribution revenue.

Receivables are valued at management's estimate of the amount that will ultimately be collected. The allowance for credit losses is based on specific identification of uncollectable accounts and the Organization's historical collection experience. The allowance for credit losses was \$23,581 and \$75,335 at June 30, 2024 and 2023, respectively.

### **INVESTMENTS**

Investments are reported at fair value. Both realized and unrealized gains and losses are reflected in the Statements of Activities. See Note 2 for a discussion of fair value measurements.

### PROPERTY AND EQUIPMENT

Property and equipment are stated at cost or, if donated, at approximate fair value at date of donation. The Organization follows the practice of capitalizing expenditures in excess of \$2,500.

Depreciation is computed on the straight-line method over the estimated useful lives of the assets.

### **FUNCTIONAL ALLOCATION OF EXPENSES**

The costs of providing programs and other activities were summarized on a functional basis in the Statements of Activities and Functional Expenses. Accordingly, certain costs were allocated among the benefiting programs and supporting services.

### **ADVERTISING**

Advertising costs totaled \$151,830 and \$84,301 for the years ended June 30, 2024 and 2023, respectively, and are expensed as incurred. There was no donated advertising in the years ended June 30, 2024 and 2023.



### **INCOME TAXES**

The Organization is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code (Code). In addition, the Internal Revenue Service determined the Organization is not a private organization within the meaning of Section 509(a) of the Code.

The Organization follows the provisions of Accounting for Uncertainty in Income Taxes under the Income Taxes Topic of the Codification. The Codification requires the Organization's evaluation of tax positions, which include maintaining its tax-exempt status and the taxability of any unrelated business income, and does not allow recognition of tax positions which do not meet a "more-likely-than-not" threshold of being sustained by the applicable tax authority. Management does not believe it took any tax positions that would not meet this threshold.

### **USE OF ESTIMATES**

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual amounts could differ from those estimates.

### **SUBSEQUENT EVENTS**

The Organization evaluated subsequent events and transactions for potential recognition or disclosure in the financial statements through December 19, 2024, the date the financial statements were available to be issued.

### NOTE 2 VALUATION OF INVESTMENTS

The fair value and cost of investments at June 30, 2024 and 2023 consisted of the following:

	20	24	20	23
	Fair Value	Cost	Fair Value	Cost
Money Market and Cash				
Equivalents	\$ 8,849,577	\$ 8,849,577	\$ 4,689,300	\$ 4,689,300
Common Stocks	622,240	534,298	538,517	530,328
Corporate Fixed Income	-	-	27,483	30,597
Government Securities	-	-	52,738	55,968
Mutual and Exchange Traded				
Funds	3,756,907	3,391,154	3,224,121	3,228,631
Hedge Funds	397,025	396,287	426,771	428,058
Jewish Community Investment				
Fund	12,768,794	8,999,808	12,043,663	9,318,895
Total	\$ 26,394,543	\$ 22,171,124	\$ 21,002,593	\$ 18,281,777



The Fair Value Measurements and Disclosures Topic of the Codification establishes a hierarchal disclosure framework, which prioritizes and ranks the level of market price observability used in measuring investments and other financial instruments at fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described below:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Organization has the ability to access.

Level 2 Inputs to the valuation methodology include:

Quoted prices for similar assets or liabilities in active markets;

Quoted prices for identical or similar assets or liabilities in inactive markets;

Inputs other than quoted prices that are observable for the asset or liability;

Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Below is a description of the valuation methodologies used for assets measured at fair value. There were no changes in the methodologies used at June 30, 2024 and 2023.

Common Stocks, Exchange Traded Funds, and Government and Corporate Securities: Valued at the closing price reported on the active markets on which the individual securities are traded.

Mutual Funds: Valued at the net asset value (NAV) of shares held at period end. NAV is based on the value of the underlying assets owned by the fund, minus its liabilities, and then divided by the number of shares outstanding. NAV is a quoted price in an active market.



Jewish Community Investment Fund (JCIF): The Organization holds an interest in JCIF, a fund managed by The Associated: Jewish Community Federation of Baltimore. JCIF has discretionary investment authority over the Organization's interest and provides periodic value assessments of the fund, which are incorporated into the Organization's financial statements. As of June 30, 2024, JCIF's investments consisted of equity and debt securities (Level 1 and 2 investments) and investments in private capital investment entities, off-shore investment vehicles, and other partnership investments (Level 3 investments). The Level 3 investments are not marketable generally due to stipulations in the partnership or investment agreements. The value of these investments was determined by the general partner or investment manager. As such, the Organization classified this investment as Level 3. There are no restrictions for withdrawing the Organization's investments from JCIF.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Organization believes its valuation method is appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The Organization's investments in hedge funds are measured at fair value using the NAV as a practical expedient. In accordance with the Fair Value Measurements and Disclosures Topic of the codification, these investments are not required to be categorized within the fair value hierarchy.

Hedge funds generally restrict redemptions. Redemptions may be subject to fees up to 5% and lock-up periods up to one year.

The following tables set forth by level, within the fair value hierarchy, the Organization's assets for the years ended June 30, 2024 and 2023:

	2024			
	Level 1	Level 1 Level 3		
Money Market and Cash Equivalents Common Stocks Mutual and Exchange Traded Funds JCIF	\$ 8,849,577 622,240 3,756,907	\$ - - 12,768,794	\$ 8,849,577 622,240 3,756,907 12,768,794	
Total Level 1 and 3	\$ 13,228,724	\$ 12,768,794	25,997,518	
Hedge Funds			397,025	
Total Investments			\$ 26,394,543	

		2023	
	Level 1	Level 3	Total
Money Market and Cash Equivalents Common Stocks Corporate Fixed Income Government Securities Mutual and Exchange Traded Funds JCIF	\$ 4,689,300 538,517 27,483 52,738 3,224,121	\$ - - - - 12,043,663	\$ 4,689,300 538,517 27,483 52,738 3,224,121 12,043,663
Total Level 1 and 3 Hedge Funds	\$ 8,532,159	\$ 12,043,663	20,575,822
Total Investments			\$ 21,002,593

The table below sets forth a summary of changes in fair value of the Organization's Level 3 assets for the years ended June 30, 2024 and 2023:

	2024	2023
Balance at July 1 Investment Return, Net Disbursements	\$ 12,043,663 1,221,291 (496,160)	\$ 11,498,620 545,043 -
Balance at June 30	\$ 12,768,794	\$ 12,043,663

Investments are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with investments, it is reasonably possible that changes in the values of investments will occur in the near term, and those changes could materially affect the amounts reported in the financial statements.

Investment income for the years ended June 30, 2024 and 2023 consisted of the following:

	 2024	 2023
Dividends and Interest	\$ 667,612	\$ 354,760
Net Realized Gain (Loss) on Sale of Investments	46,237	(64,035)
Unrealized Appreciation on Investments	 1,498,418	 915,855
Less: Investment Fees	2,212,267 72,465	1,206,580 61,613
	\$ 2,139,802	\$ 1,144,967

Investment income is classified as follows for the years ended June 30, 2024 and 2023:

	2024	2023
Operating Income Drawn From Endowments Non-Operating Income	\$ 712,399 1,427,403	\$ 621,165 523,802
	\$ 2,139,802	\$ 1,144,967

### NOTE 3 PROPERTY AND EQUIPMENT

Property and equipment at June 30, 2024 and 2023 consisted of the following:

	2024	2023
Building and Improvements	\$ 2,674,804	\$ 2,631,702
Land	385,554	385,554
Kitchen Equipment	1,090,000	1,095,491
Furniture and Fixtures	93,887	93,887
Computer Software and Equipment	505,046	534,404
Motor Vehicles	2,290,107	2,272,087
Construction in Progress	380,635	144,526
	7,420,033	7,157,651
Less: Accumulated Depreciation and Amortization	4,193,254	4,267,919
Property and Equipment, Net	\$ 3,226,779	\$ 2,889,732
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·

Depreciation and amortization expense totaled \$549,689 and \$483,170 for the years ended June 30, 2024 and 2023, respectively.

### NOTE 4 BOARD-DESIGNATED ENDOWMENT

In August 1989, the Board of Directors (Board) created a Board-designated endowment fund (Endowment Fund) to support the mission of the Organization. The Board established policies for the management, investment strategy, and distribution of bequests made to the Organization. Historically, bequests made to the Organization were unrestricted, but the Organization has the capacity to manage restricted bequests if received.

### **INVESTMENT POLICY**

The Endowment Fund is overseen by the Finance Committee using the services of professional advisors. The Finance Committee has established four investment pools for the purpose of managing investment returns within acceptable risk parameters.

A portion of the Endowment Fund is retained in a money market account to provide for near-term operational support (see Use of Funds – Spending Policy) and covers any cash flow needs that arise.

Gains and losses will remain in the principal of the Endowment Fund. Earnings that accrue from investments will be credited and remain in the Endowment Fund.

### USE OF FUNDS - SPENDING POLICY

Annually, up to 5% of the market value of the Endowment Funds, except for the Capital Building and Campaign Fund, will be transferred to the operating account for use by the Organization to support its basic mission. The percentage may be amended by the Finance Committee as determined to be appropriate. In the event of an operational cash surplus, the Finance Committee may transfer a portion of such surplus to the Endowment Fund with the approval of the Board.

The Capital Building and Campaign Fund will be used as needed for building-related expenses. Requests for the use of the Endowment Fund for capital expenditures are submitted to the Finance Committee and presented to the Board for approval.

The Finance Committee reserves funds for specific purposes. Net assets with Board designations at June 30, 2024 and 2023 were as follows:

2024

	2024	2023
Undesignated Hardship Reserve Fund	\$ 13,077,466 5,044,693	\$ 13,003,027 4,733,814
Capital Building and Campaign Fund	8,272,384	7,906,590
Board-Designated Endowment Net Assets, End of Year	\$ 26,394,543	\$ 25,643,431

### **BORROWING OF FUNDS**

In the event of a cash deficit in the operating account, the Organization's finance department is authorized to borrow up to \$400,000 from the Endowment Fund to avoid short-term



borrowing costs. These funds will generally be provided from the Endowment Fund's money market account. Amounts borrowed and subsequent repayments are reported to the Finance Committee and Board. During the fiscal years ended June 30, 2024 and 2023, no such activity occurred.

### **FAIR VALUE OF ENDOWMENT FUND**

A bequest of \$4,640,838 was Board-designated to the Capital Building and Campaign Fund and is included in accounts and pledges receivable, net in the Statement of Financial Position as of June 30, 2023. These funds were invested in the endowment during the year ended June 30, 2024 and are reflected as contributions in the following table.

Changes in the Endowment Fund's net assets for the years ended June 30, 2024 and 2023 were as follows:

	2024	2023
Board-Designated Endowment Fund Net Assets,		
Beginning of Year:	\$ 21,002,593	\$ 20,260,509
Investment Return, Net	2,139,802	1,144,967
Contributions	4,658,308	880,448
Amounts Appropriated for Expenditure	(1,406,160)	(1,283,331)
Board-Designated Endowment Fund Net	¢ 26 204 542	¢ 21 002 F02
Assets, End of Year	\$ 26,394,543	\$ 21,002,593

### NOTE 5 NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions at June 30, 2024 and 2023 were restricted for the following purposes:

	 2024	 2023
Subject to Expenditure for Specified Purposes:		
Specific Meal Programs	\$ 169,321	\$ 3,350
Client Home Repairs	77,438	199,917
Operations Support	-	5,083
Time Restricted	205,000	-
Other Support Services	 314,954	 581,697
	\$ 766,713	\$ 790,047

### NOTE 6 DONATED MATERIALS, SERVICES, AND OCCUPANCY

The Organization receives donated services from volunteers who staff area packing sites and deliver meals. In addition, various expenses are incurred by outside parties for the operation of area kitchens and include rent and utility expense. The Organization also receives donated items and services for the culinary special event.

In accordance with GAAP, the Organization reported the value of the donated materials, services, and occupancy as public support and program expense in the Statements of Activities for the years ended June 30, 2024 and 2023. The value of the donated time by volunteers for staffing area packing sites and delivering meals and volunteer Board and committee hours was not reported in these financial statements, as these donated services do not meet the criteria for recognition.

Donated materials, services, and occupancy are valued at estimated fair market values based on comparable offerings within the Maryland region.

The value of donated materials, services, and occupancy was as follows at June 30:

	2024	2023
Personal Services (Approximately 65,207 and 69,988		
Hours, Respectively)	\$ 2,281,593	\$ 2,387,991
Occupancy	479,865	386,770
Delivery and Services	249,648	307,954
Other	18,376	2,345
	3,029,482	3,085,060
Less: Value of Personal Services Not Recognized	2,281,593	2,387,991
	\$ 747,889	\$ 697,069

### NOTE 7 OPERATING LEASES

The Organization leases office and packing sites as well as various office equipment under operating leases expiring through 2027. The right-of-use assets and operating lease liabilities are being amortized over the respective lives of the leases. The weighted average remaining lease term was 3.43 years and 3.96 years as of June 30, 2024 and 2023, respectively. The weighted average discount rate was 3.52% and 2.88% as of June 30, 2024 and 2023, respectively.

Future minimum rental expenses under these leases are as follows:

Year Ending June 30,	2025 2026 2027 2028 Thereafter	Ç	Ş	63,517 61,494 57,503 17,338 8,665
Total Minimum Lease Payments		_		208,517
Less: Amount Representing Interest			12,244	
Present Value of	f Minimum Lease Payments			196,273
Less: Current Portion		_		57,790
Present Value of	f Minimum Lease Payments	<u>,                                    </u>	\$	138,483

The Organization also leases office and packing sites under short term leases.

Rent expense under operating leases totaled \$126,470 and \$137,427 for the years ended June 30, 2024 and 2023, respectively.

### NOTE 8 FINANCE LEASE OBLIGATIONS

The Organization has a comprehensive fleet management agreement, which includes programs for fuel, maintenance, and repairs for the current fleet and any additional vehicles leased under this agreement. The weighted average remaining lease term was 4.1 years as of June 30, 2024 and 2023, respectively. The weighted average discount rate was 5.51% and 4.93% as of June 30, 2024 and 2023, respectively.

Future minimum lease payments under finance leases are as follows:

Year Ending June 30,	2025 2026 2027 2028 2029	<u> </u>	<b>5</b>	284,401 248,480 245,958 207,318 86,365
Total Minimum	Lease Payments			1,072,522
Less: Amount Represe	enting Interest			232,814
Present Value of	Minimum Lease Payments			839,708
Less: Current Portion		_		225,719
Net Long-Term F	Portion	<u> </u>	\$	613,989

The cost and accumulated amortization of assets held under finance leases were as follows:

	2024	2023
Cost Less: Accumulated Amortization	\$ 1,435,759 529,598	\$ 1,118,191 406,293
	\$ 906,161	\$ 711,898

Amortization expense was \$242,186 and \$255,586 for the years ended June 30, 2024 and 2023, respectively.

### NOTE 9 LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS

The Organization's financial assets available to meet cash needs for general expenditures within one year of the Statements of Financial Position date were as follows:

	2024	2023
Cash and Cash Equivalents Accounts and Pledges Receivable, Net Government Fees and Grants Receivable Investments	\$ 3,000,068 1,509,365 443,843 26,394,543	\$ 1,916,789 6,368,827 522,832 21,002,593
Total Financial Assets	31,347,819	29,811,041
Contractual or Donor-Imposed Restrictions:  Donor Contributions Restricted to Specific Purposes	(766,713)	(790,047)
Financial Assets Available to Meet Cash Needs for General Expenditures Within One Year Before Board Designations	30,581,106	29,020,994
Board-Designated	(26,394,543)	(25,643,431)
Financial Assets Available to Meet Cash Needs for General Expenditures Within One Year After Board Designations	\$ 4,186,563	\$ 3,377,563

As part of the Organization's liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due. Additionally, the Organization has Board-designated net assets without donor restrictions that could be made available for current operations if necessary.

### NOTE 10 RETIREMENT PLAN

The Organization has a 401(k) plan. Eligible employees may contribute up to 100% of their compensation each year, subject to certain statutory limitations. The Organization makes matching contributions equal to the lesser of 50% of a participant's contribution during the plan year or 1.5% of a participant's compensation during the year. The Organization may also make a discretionary contribution, which is determined by the Board each year. The Board elected to make discretionary contributions equal to 5% of a participant's compensation during the years ended June 30, 2024 and 2023. Retirement expense charged to operations for the years ended June 30, 2024 and 2023 was \$247,053 and \$188,387, respectively.

### **NOTE 11** COMMITMENTS AND CONTINGENCIES

The Organization has an agreement with an outside party to manage and operate its food preparation facilities and production of meals. The agreement requires payment based on average daily meals provided. The agreement expires on June 30, 2026. The Organization incurred expenses of \$5,058,311 and \$5,146,206 under this agreement during the years ended June 30, 2024 and 2023, respectively.

The Organization receives a portion of its revenues from grants, some of which are subject to audit by the grantor. The ultimate determination of amounts received under these programs may be based on allowable costs and subject to audit by the grantor. Management believes such audits will not have a material adverse effect on the financial statements.

### NOTE 12 SUPPLEMENTAL CASH FLOW INFORMATION

Equipment acquired under finance leases totaled \$449,658 and \$763,767 during the years ended June 30, 2024 and 2023, respectively.

Facilities acquired under operating leases totaled approximately \$89,000 and \$200,000 during the years ended June 30, 2024 and 2023, respectively.

Uniform Guidance Supplementary Information



# INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Board of Directors of Meals on Wheels of Central Maryland, Inc.

We audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Meals on Wheels of Central Maryland, Inc. (Organization), which comprise the Statement of Financial Position as of June 30, 2024, the related Statements of Activities, Functional Expenses, and Cash Flows for the year then ended, and the related notes to the financial statements, and issued our report thereon dated December 19, 2024.

### REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING

In planning and performing our audit of the financial statements, we considered the Organization's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control.

A *deficiency* in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A *material weakness* in internal control is a deficiency or a combination of deficiencies in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented or detected and corrected on a timely basis. A *significant deficiency* in internal control is a deficiency or a combination of deficiencies in internal control that is less severe than a material weakness yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit, we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that were not identified.

### **REPORT ON COMPLIANCE AND OTHER MATTERS**

As part of obtaining reasonable assurance about whether the Organization's financial statements were free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statement. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.





### **PURPOSE OF THIS REPORT**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing and not to provide an opinion on the effectiveness of the Organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

**ELLIN & TUCKER** 

**Certified Public Accountants** 

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Baltimore, Maryland December 19, 2024





## INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

To the Board of Directors of Meals on Wheels of Central Maryland, Inc.

### **OPINION ON EACH MAJOR FEDERAL PROGRAM**

We audited Meals on Wheels of Central Maryland, Inc.'s (Organization) compliance with the types of compliance requirements described in the Office of Management and Budget's Compliance Supplement that could have a direct and material effect on each of the Organization's major federal programs for the year ended June 30, 2024. The Organization's major federal programs are identified in the Summary of Auditors' Results section of the accompanying Schedule of Findings and Questioned Costs.

In our opinion, the Organization complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2024.

### BASIS FOR OPINION ON EACH MAJOR FEDERAL PROGRAM

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America, the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditors' Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the Organization and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each of its major federal programs. Our audit does not provide a legal determination of the Organization's compliance with the compliance requirements referred to above.

### RESPONSIBILITY OF MANAGEMENT FOR COMPLIANCE

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to the Organization's federal programs.

### **AUDITORS' RESPONSIBILITIES FOR THE AUDIT OF COMPLIANCE**

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the Organization's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in





accordance with generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the Organization's compliance with the requirements of each of its major federal programs as a whole.

In performing an audit in accordance with generally accepted auditing standards, Government Auditing Standards, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design
  and perform audit procedures responsive to those risks. Such procedures include examining, on
  a test basis, evidence regarding the Organization's compliance with the compliance requirements
  referred to above and performing such other procedures as we considered necessary in the
  circumstances.
- Obtain an understanding of the Organization's internal control over compliance relevant to the
  audit in order to design audit procedures that are appropriate in the circumstances and to test
  and report on internal control over compliance in accordance with the Uniform Guidance, but not
  for the purpose of expressing an opinion on the effectiveness of the Organization's internal
  control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

### **REPORT ON INTERNAL CONTROL OVER COMPLIANCE**

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditors' Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not





identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

### REPORT ON SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS REQUIRED BY THE UNIFORM GUIDANCE

We audited the financial statements of the Organization as of and for the year ended June 30, 2024 and issued our report thereon dated December 19, 2024 that contained an unmodified opinion on those financial statements. Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying Schedule of Expenditures of Federal Awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information was subjected to the auditing procedures applied in the audit of the financial statements and to certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the Schedule of Expenditures of Federal Awards is fairly stated in all material respects in relation to the financial statements as a whole.

**ELLIN & TUCKER** 

**Certified Public Accountants** 

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Baltimore, Maryland December 19, 2024



### **SECTION I – SUMMARY OF AUDITORS' RESULTS**

FINANCIAL STATEMENTS			
Type of auditors' report issued on whether the financial statements were prepared in accordance with generally accepted accounting principles:	Unmodified		
Internal control over financial reporting:			
Material weakness identified?	Yes	Х	_No
Significant deficiencies identified?	Yes	X R	None eported
Noncompliance material to the financial statements?	Yes	Х	_No
FEDERAL AWARDS			
Internal control over major programs:  Material weakness identified?	Yes	Х	_No
Significant deficiencies identified that are not considered to be			
material weaknesses?	Yes	Χ	None
	-	R	_ eported
Type of auditors' report issued on compliance for major programs:  Any audit findings disclosed that are required to be reported in accordance with 2 CFR section 200.516(a)?	Unmodified Yes	Х	_No
Identification of Major Programs:			
Federal Assistance Listing Number Name of Federal Prog	ram or Cluster		
93.045 Older Americans Act, 21.027 Coronavirus State and Local		Funds	
Dollar threshold used to distinguish between type A and type B programs:	\$750,000		
Auditee qualified as low-risk auditee?	XYes		_No



# SCHEDULE OF FINDINGS AND QUESTIONED COSTS, CONTINUED Meals on Wheels of Central Maryland, Inc. For the Year Ended June 30, 2024

### **SECTION II – FINANCIAL STATEMENT FINDINGS**

No matters were reported.

### **SECTION III – FEDERAL AWARD FINDINGS AND QUESTIONED COSTS**

No matters were reported.

	Federal		
Federal Grantor	Assistance	Pass-Through	
Program Title	Listing	Contract	Federal
Pass-Through Grantor	Number	Number	Expenditures
5			
Department of Health and Human Services			
Older Americans Act, Title III, Part C Nutrition Services			<b></b>
Anne Arundel County Area Agency on Aging	93.045	5812	\$ 457,974
Baltimore County Department of Aging	93.045	4187 /SCON-10001850	1,089,709
Baltimore City Commission on Aging and Retirement			
Education	93.045	38968 / 39435	589,324
Carroll County Office on Aging	93.045	25-F-2-18/19	
		25-F-1-23/24	165,766
Harford County Area Agency on Aging	93.045	22-018	282,735
Howard County Office on Aging	93.045	4400003982	314,987
Montgomery County Office on Aging	93.045	1149335	249,558
			3,150,053
Department of the Treasury			
Coronavirus State and Local Fiscal Recovery Funds			
Baltimore City Commission on Aging and Retirement			
Education	21.027	38968 / 39435	2,740,353
Department of Homeland Security			
Federal Emergency Management Agency, Emergency			
Food and Shelter National Board Program			
Baltimore City Commission on Aging and Retirement			
Education	97.024		10,111
Baltimore County Department of Aging	97.024		12,750
Carroll County Department of Aging	97.024		1,500
Howard County Department of Aging	97.024		1,500
nottal a county population of Aging	37.021		
			25,861
Department of Agriculture			
Supplemental Nutrition Assistance Program			
Maryland State Department of Human Resources	10.568		186,364
Total Expenditures of Federal Awards			\$ 6,102,631

### **NOTE 1** BASIS OF PRESENTATION

The accompanying Schedule of Expenditures of Federal Awards (Schedule) includes the federal grant activity of Meals on Wheels of Central Maryland, Inc. (Organization) under programs for the federal government for the year ended June 30, 2024. The information in the Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the Organization, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Organization.

### NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported in the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Pass-through entity identifying numbers are presented where available.

### NOTE 3 INDIRECT COST RATE

The Organization elected not to use the 10% de minimis indirect cost rate as allowed under the Uniform Guidance.