Internal Revenue Service

## **Short Form Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public

► Go to www.irs gov/Form990EZfor instructions and the latest information

OMB No 1545-1150

2018

Open to Public Inspection

Ā	For the 2018 calend	, 20		
В	Check if applicable	D Employer identification number		
	Address change	MEALS ON WHEELS 2 19 96		76-6116808
	Initial return	Number and street (or P O box, if mail is not delivered to street address)	Room/suite	E Telephone number
	Final return/terminated	6325 S RAINBOW BLVD STE 300		(888) 730-4933
		Citizan town state or province country and 7IP or foreign postal code	<del>-</del>	F Group Evernation

	If "Yes," enter the name of the foreign country			_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		▶	$\cdot \bigsqcup$
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	 44b	-	X
C	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	- 44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		_	1
	Form 990-EZ See instructions	45b		X
JSA		m 990	O-EZ	(2018)

Fair	Balance Sheets (see the instructions for Part II)	ugetion in this Part II	
	Check if the organization used Schedule O to respond to any q	(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	61,806. <b>22</b>	57,828
23	l and and buildings	23	NONI
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Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V. Yes No Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a X

n 990-EZ	(2018)					F	Page
	I the organization engage, directly or indirectly candidates for public office? If "Yes," complete S					Yes	No X
t VI	Section 501(c)(3) Organizations Only All section 501(c)(3) organizations must 50 and 51. Check if the organization used Schedule	·		·			;s .[_
	the organization engage in lobbying activitie					Yes	No
yea	ar? If "Yes," complete Schedule C, Part II		· · · · · · · · · · · · · · · ·	· · · · · · · · · · · · ·	^. <b>4</b> 7		Х
	he organization a school as described in section				1		Х
	I the organization make any transfers to an exer	•	-		T		X
	Yes," was the related organization a section 527 mplete this table for the organization's five hig				. 49b		<u> </u>
em	mplete this table for the organization's five hig ployees) who each received more than \$100,00	nest compensated 30 of compensation	employees (other the from the organization	on. If there is none, e	enter "No	s, an ne "	UK
<u> </u>	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimat other coi	ed amo	
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		<u> </u>					
Cor	tal number of other employees paid over \$100,0 mplete this table for the organization's five h 00,000 of compensation from the organization	ighest compensated	0 d independent cont ter "None "	ractors who each r	eceived	more	tha
	(a) Name and business address of each independent contrar	ctor	(b) Type of service	(c) C	ompensatio	ก	
-							
				-			
	tal number of other independent contractors ea			0			
	the organization complete Schedule A?				a ▼ X Ye		٦N
nenalti	npleted Schedule A	luding accompanying sch	redules and statements, ar	nd to the best of my know			
correct,	and complete Transport of orers of the that dricer) is t	pased on all information o	f which preparer has any k	nowledge	<del>.</del>		
	Wells Fargo Bank, N.A.			05/08/2019			
า	Signature of officer			Date			
e		TRUSTEE					
	Type or print name and title				OTIN		
j	Print/Type preparer's name Preparer's	signature 18	Date	Check X If	PTIN	15150	2
oarer	JOSEPH J. CASTRIANO	with the	05/08/20			251603	5
	Firm's name ► PRICEWATERHOUSECOOPERS CLP			Firm's EIN ► 13-	4008324		
Only		DN 15210	<del></del>	Phone no 412-255-	6000		
	Firm's address   600 GRANT STREET, PITTSBURGH  RS discuss this return with the preparer shown a	-	ons	Phone no 412-355-	6000 ► X Ye	s l	٦N

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Par	Support Schedule for Orga (Complete only if you checke Part III. If the organization fai	d the box on l	ine 5, 7, or 8 (	of Part I or if the	he organizatio	n failed to qua	(vi) lify under
Sect	ion A. Public Support	<u> </u>	` `				N/A
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						,
3	The value of services or facilities furnished by a governmental unit to the organization without charge				-		
4	Total. Add lines 1 through 3					/	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)					/	
6	Public support. Subtract line 5 from line 4						
Sect	ion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	/(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4				/		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
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	Total support. Add lines 7 through 10				L	1	<u></u>
12	Gross receipts from related activities, etc. (s		,			12	<del></del>
13	First five years If the Form 990 is f organization, check this box and stop here tion C. Computation of Public Sup	<u> </u>	<u>/</u>				
	Public support percentage for 2018 (li			11 column (f)\	<del></del>	14	<u></u> %
14 15	Public support percentage from 2017						%
	331/3% support test - 2018. If the or	ganization did r	not check the bo	x on line 13. ai	nd line 14 is 33	1/3% or more	
	box and stop here. The organization q						
b	33 1/3% support test - 2017. If the org						
	this box and stop here. The organization	on qualifies,ás a	publicly suppor	rted organizatio	n		▶ 🛄
17a	10%-facts-and-circumstances test - :						
	10% or more, and if the organization						
	Part VI how the organization meets to	,					supported
b	organization	2017. If the org	_	ot check a box	on line 13, 16	a, 16b, or 17a,	
	15 is 10% or more, and if the org.						
	Explain in Part VI how the organization						a publicly
10	supported organization	did not shoot	hov on line 12	 16a 16h 17a	or 17h check	this how and see	🟲 🗀
18	instructions						
	Instructions	<u> </u>					90 or 990-EZ) 2018
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Schedule A (Form 990 or 990-EZ) 2018

Part III

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						N/Á
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 business under section 513 .						
4 Tax revenues levied for the						
organization'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 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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from			/			
line 6 )						
ection B. Total Support						

Part IV	Supporting	Organiza	tions

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

	Sections	Μ, υ,	anu E.	шy	you checkeu	120	ULFAILI	, comp	nete	Section	1112
Section A	A. All Suppo	rtina	Organ	iza	ations						

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain	1	X.	
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		X
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		X
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 <b>Part VI</b> when and how the organization made the determination.	3b_		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		X
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
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 <b>Part VI</b> 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	4c		• •
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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)	5a	*	x
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?	- 5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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.	6		X
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

11 Has the organization accepted a gift or contribution from any of the following persons?  a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?  b A family member of a person described in (a) above?  c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.  Section B. Type I Supporting Organizations  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities if the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization operate for the benefit of any supported organization other than the supported organization of supporting organization of the supported organization of the supporting organization of the supporting organization of the supporting organization of the supporting organization or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)  Section D. All Type III Supporting Organizations  N/A	Part	V Supporting Organizations (continued)			
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below. The governing body of a supported organization?  b A family member of a person described in (a) above?  c A 35% controlled entry of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No." describe in Part VI how the supported organization's directors or trustees at all times during the tax year? If "No." describe how the powers to appoint and/or remove directors or trustees at all times during the tax year and the supported organization's activities or appoint and/or or supported organization or trustees were allocated among the supported organizations what conditions or restrictions, if any, applied to such powers during the tax year organizations what conditions or restrictions, if any, applied to such powers during the tax year organizations what conditions or restrictions, if any, applied to such powers during the tax year organizations of the supporting organization of any supported organizations if If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization's lith to operated.  Section C. Type II Supporting Organizations N/A  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organizations when the organization's supported organization in the supporting Organization N/A  1 Did the registeration provide to each of its supported organizations, by the last day of the fifth month of the organization's apported organization and (sill copies of the organization's new three apports of the organization's power of the organization's power of the organization's power o				Yes	No
below, the governing body of a supported organization?  A family immehr of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.  Section B. Type I Supporting Organizations  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's effectively operated, supervised, or controlled the organization activates If the organization and more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year?  2 Did the organization operate for the benefit of any supported organization of the than the supported organization of the supported organization is a supported organization if Yes," Explain in Part VI how providing such benefit carried out the purposes of the supported organization if Yes, Explain in Part VI how providing such benefit carried out the purposes of the supported organization is a provided organization or trustees of sech of the gagnization as years and the supported organization was vested in the same persons that controlled or managed the supported organizations).  Section D. All Type III Supporting Organizations N/A  1 Did the organization provide to such of its supported organizations, by the last day of the lifth month of the organization is officers, directors, or trustees either (i) appoint provided during the prior tax year, (ii) a copy of the Form 390 that was most recently filed as of the date of notification, and (iii) copies of the organization maintained acuse and continuous working relievable than explored organizations.  2 Were any of t	11				
b A family member of a person described in (a) above?  A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.  Section B. Type I Supporting Organizations  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's directors or trustees at all times during the tax year? If "No," describe how the powers to appoint and/or remove directors or trustees with supported organization and what conditions or restrictions, if any, applied to such powers during the tax year and what conditions or restrictions, if any, applied to such powers during the tax year and the supported organization for the supported organization is the supported organization is the supported organization is the supported organization is the supported organizations? If "Yes," explain in Part VI how providing such benefic carried out the purposes of the supported organizations is the supported organizations in Part VI how providing such benefic carried out the purposes of the supported organizations is the supported organizations in Part VI how providing such benefic carried out the purposes of the supported organizations in Part VI how control or management of the supporting Organizations in N/A  1 Were a majority of the organizations is directors or trustees during the tax year allow the supported organizations or trustees of each of the organizations or trustees of each of the organizations organizations was vested in the same parsons that controlled or managed the supported organizations or trustees of each of the organizations organizatio	а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		ا ـ ـ	-
c. A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization as upported organization, describe the organization as activates. If the organization and more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year organization operated, supervised, or controlled the supporting organization or the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.  2 Did the organization operate for the benefit of any supported organization(s) if "No," describe in Part VI how providing use the supporting organization was vested in the same parsons that controlled or managed the supporting organization was vested in the same parsons that controlled or managed the supporting Organization was vested in the same parsons that controlled or managed the supporting Organization was vested in the same parsons that controlled or managed the supported organization or to the supported organization was vested in the same parsons that controlled or managed the supported organization or supported organizations is the supported organization or supported organizations or the supported organization was vested in the same parsons that controlled or the directors or trustees of each of the organization or supported organizations or supported organizations or supported organizations or suported organizations or supported organizations or supported organ			-		
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1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part Whow the supported organization's directors or trustees at all times during the tax year? If "No," describe in Part Whow the supported organization as supported organization, adescribe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year and the programation organization organization organization or controlled the supporting organization or trustees described, or controlled the supporting organization. A controlled the supporting organization is the supported organization is the supported organization is a supported organization. A controlled or managed in the supported organization is the supported organization was vested in the same persons that controlled or managed in the supported organization was vested in the same persons that controlled or managed in the supported organization is a vest of the supported organization was vested in the same persons that controlled or managed in the supported organization is a vest of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's provided to each of the organization is the supported organization is a vest of the organization provide to each of its supported organizations by the controlled organization of the rest of the organization was vested in the same persons that controlled organization is a vest of the organization organization is the person of the electronic organization's officers, directors, or trustees of each of the supported organization's officers, directors, or trustees or the organization is an expensive organization was responsive to the organization's supported organizations and the organiz			<u>11c</u>		X
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2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)  3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.  Section E. Type III Functionally Integrated Supporting Organizations N/A  1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)  1 The organization satisfied the Activities Test Complete line 2 below  2 The organization is the parent of each of its supported organizations. Complete line 3 below  3 The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)  4 The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)  5 Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization's towns exponsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities described in (a) constitute activities that, but for the organization determined that these activities of the organization (s) would have een engaged in If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engag		the organization's governing documents in effect on the date of notification, to the extent not previously			
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trustees of each of the supported organizations? <i>Provide details in Part VI.</i> b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	đ		3a		
of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard	h	· · · · · · · · · · · · · · · · · · ·			
		of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	izatio	ns N/A	
1 Check here if the organization satisfied the Integral Part Test as a qualifying to	rust or	Nov 20, 1970 (explai	n in Part VI) See
instructions. All other Type III non-functionally integrated supporting organiz	ations	must complete Section	s A through E
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		<u> </u>
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	•	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see		•	
instructions for short tax year or assets held for part of year).		<u> </u>	
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e 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		<u> </u>
4 Cash deemed held for exempt use Enter 1-1/2% 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 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 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		1
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		1
7 Check here if the current year is the organization's first as a non-functionally	ıntegra	ated Type III supporting	organization (see
instructions)			

Schedule A (Form 990 or 990-EZ) 2018

Pert V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)  Amounts paid to supported organizations to accomplish exempt purposes  Amounts paid to supported organizations to accomplish exempt purposes		orm 990 or 990-EZ) 2018	Page 7
1 Amounts paid to supported organizations to accomplish exempt purposes	Part V	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued	d) N/A
			Current Year
	1 Am	punts paid to supported organizations to accomplish exempt purposes	
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Schedule A (	Form 990 or 990-EZ) 2018 Page <b>8</b>
Part VI	
PART V	I
N	ONE
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Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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SCHEDULE A, PART I (g) - INFORM	MATION ABOUT	SUPPORTED O	RGANIZATIONS	
NAME OF SUPPORTED ORGANIZATION MEALS ON WHEELS	:			,
EIN: 27-1211503 TYPE OF ORGANIZATION FROM PART IS THE ORGANIZATION LISTED IN (		'UMENT?: YES	, }	
AMOUNT OF SUPPORT:				7,022.
TOTAL SUPPORT:			=======	7,022.
TOTAL OTHER SUPPORT:			=======	NONE

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

## 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.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ ► Go to www.irs.gov/Form990for the latest information. Inspection Employer identification number Name of the organization MEALS ON WHEELS 2 19 96 76-6116808

MEADS	ON WHEEDS 2 19 96
Part	I, Line 10:
	Grants Paid: Activity: Grantee: GALVESTION ISLAND 20853 53RD ST,,
	GALVESTON, TX 77551, Cash Grant: 7,022
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Name of the organization

MEALS ON WHEELS 2 19 96

Employer identification number 76-6116808

FORM 990EZ, PAGE 1, PART I, LINE 10 - GRANTS AND SIMILAR AMOUNTS PAID

RECIPIENT NAME:
GALVESTON ISLAND
ADDRESS:
MEALS ON WHEELS ATTN RAY PINARD
GALVESTON, TX 77551

AMOUNT OF GRANT PAID ....

7,022.

Name of the organization ,
MEALS ON WHEELS 2 19 96

Employer identification number

76-6116808

FORM 990-EZ, PAGE 1, PART I, LINE 16 - OTHER EXPENSE

DESCRIPTION

AMOUNT

FOREIGN TAXES PAID

48.

48.

TOTAL

1

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Name of the organization

MEALS ON WHEELS 2 19 96

Employer identification number 76-6116808

FORM 990EZ, PAGE 2, PART II, LINE 22 - CASH, SAVINGS AND INVESTMENTS

	BEGINNING	END
DESCRIPTION	OF YEAR	OF YEAR
SAVINGS INVESTMENTS - PUBLICLY TRADED SECURITIES	61,806.	3,363. 54,465.
TOTALS	61,806.	57,828.
	==============	_=============

TOTAL

1-

6.

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18.

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