

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2022

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning 7/01, 2022, and ending 6/30, 2023

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending
C Meals On Wheels of Contra Costa, Inc. P.O. Box 3195 Martinez, CA 94553
D Employer identification number 68-0231350
E Telephone number (925) 313-6320
G Gross receipts \$ 2,504,428.

F Name and address of principal officer: A. Paul Krantz Same As C Above
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No

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

J Website: www.mowofcontracosta.org
H(c) Group exemption number

K Form of organization: X Corporation Trust Association Other
L Year of formation: 1998
M State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: Provide meals delivered to the homebound elderly of Contra Costa County, California.

Table with 2 columns: Description and Amount. Rows include: 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 9. 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 9. 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 0. 6 Total number of volunteers (estimate if necessary) 6 50. 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. 7b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 8 Contributions and grants (Part VIII, line 1h) 3,031,569. 2,342,217. 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -669,951. 162,211. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,361,618. 2,504,428.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 1,743,264. 2,108,538. 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 116,007. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 509,699. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 455,966. 672,987. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,315,237. 2,781,525. 19 Revenue less expenses. Subtract line 18 from line 12 46,381. -277,097.

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows include: 20 Total assets (Part X, line 16) 5,076,941. 4,783,913. 21 Total liabilities (Part X, line 26) 16,431. 500. 22 Net assets or fund balances. Subtract line 21 from line 20 5,060,510. 4,783,413.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer A. Paul Krantz, Date, Sec/Treasurer

Paid Preparer Use Only: Print/Type preparer's name Douglas Williams, Preparer's signature Douglas Williams, Date, Check self-employed, PTIN P01480457, Firm's name Douglas E. Williams, C.P.A., Firm's address 1022 Deepview Dr Covina, CA 91724, Firm's EIN 95-4631697, Phone no. (626) 641-4272

May the IRS discuss this return with the preparer shown above? See instructions. X Yes No