

Extended to May 15, 2019

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

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

OMB No. 1545-0047

2017Open to Public
Inspection**A** For the 2017 calendar year, or tax year beginning **JUL 1, 2017** and ending **JUN 30, 2018****B** Check if applicable:

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

C Name of organization**MAMA'S KITCHEN**

Doing business as

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

3960 HOME AVENUE

City or town, state or province, country, and ZIP or foreign postal code

SAN DIEGO, CA 92105**F** Name and address of principal officer: **ALBERTO CORTES**
same as C above**D** Employer identification number**** - ***4246****E** Telephone number**619-233-6262****G** Gross receipts \$ **2,884,481.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.MAMASKITCHEN.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1990** **M** State of legal domicile: **CA****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WE PROVIDE NUTRITION SUPPORT TO THOSE AFFECTED BY CRITICAL ILLNESSES WHO ARE VULNERABLE TO HUNGER.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	16
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	17
	6 Total number of volunteers (estimate if necessary)	6	923
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 2,690,872.	Current Year 2,469,734.
	9 Program service revenue (Part VIII, line 2g)	92,860.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	85,253.	104,661.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,741.	-26,071.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,875,726.	2,548,324.
	Expenses	13 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)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		762,060.	792,379.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 475,512.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,793,089.	1,685,324.
Net Assets or Fund Balances	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,555,149.	2,477,703.
	19 Revenue less expenses. Subtract line 18 from line 12	320,577.	70,621.
	20 Total assets (Part X, line 16)	Beginning of Current Year 4,146,693.	End of Year 3,872,327.
21 Total liabilities (Part X, line 26)	1,199,039.	829,957.	
22 Net assets or fund balances. Subtract line 21 from line 20	2,947,654.	3,042,370.	

Part II Signature Block

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

Sign Here	Signature of officer	Date
	ALBERTO CORTES, EXECUTIVE DIRECTOR	12/24/18
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature
	JASON C. GUTZMER	JASON C. GUTZMER
	Firm's name ▶ LING & BOUMAN CPA'S, LLP	Firm's EIN ▶ ** - ***0836
	Firm's address ▶ 4669 MURPHY CANYON ROAD, STE 130 SAN DIEGO, CA 92123-1833	Phone no. (858) 467-4770

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

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

MAMA'S KITCHEN, A COMMUNITY-DRIVEN ORGANIZATION, BELIEVES THAT EVERYONE IS ENTITLED TO THE BASIC NECESSITY OF LIFE - NUTRITIOUS FOOD. OUR NUTRITION SERVICES IMPROVE THE LIVES OF WOMEN, MEN AND CHILDREN VULNERABLE TO HUNGER DUE TO HIV, CANCER, OR OTHER CRITICAL ILLNESSES.

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 1,852,793. including grants of \$) (Revenue \$ 2,548,324.)
DELIVERY OF FREE MEALS TO HOME-BOUND PEOPLE WITH AIDS OR CANCER. THE ORGANIZATION DELIVERED 319,482 MEALS, HAD 5,346 VISITS TO MAMA'S PANTRY, DELIVERED 561 EMERGENCY FOOD ASSISTANCE BAGS, AND PROVIDED MEDICAL NUTRITION THERAPY TO 175 CLIENTS. MONDAY AND WEDNESDAY DELIVERIES EACH CONSIST OF SIX MEALS, INCLUDING ONE HOT DINNER AND ONE PREPARED DINNER. THE FRIDAY DELIVERY CONSISTS OF NINE MEALS, INCLUDING ONE HOT DINNER AND TWO PREPARED DINNERS.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

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

4e Total program service expenses **1,852,793.**

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	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 Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
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 Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
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? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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		X
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		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		X
24a 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		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
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 Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

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

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
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)?		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?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	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?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	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		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		
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?		
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.		
a	Is the organization licensed to issue qualified health plans in more than one state? 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		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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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 in Schedule O. See instructions.

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

☒**Section A. Governing Body and Management**

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	16			
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 in Schedule O.				
b Enter the number of voting members included in line 1a, above, who are independent		16		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?			3	X
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?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
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 organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	X

Section 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?		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?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in 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	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
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?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization		X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
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?		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?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **CA**

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

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records: **ALBERTO CORTES - 619-233-6262**
3960 HOME AVENUE, SAN DIEGO, CA 92105

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MIKE HORN PRESIDENT	2.00	X						0.	0.	0.
(2) TIM ROURKE PRESIDENT ELECT/VICE PRESI	2.00	X						0.	0.	0.
(3) MICHELLE BURKART TREASURER	2.00	X						0.	0.	0.
(4) JENNIFER KEARNS SECRETARY	2.00	X						0.	0.	0.
(5) JIM BLEVINS DIRECTOR	2.00	X						0.	0.	0.
(6) JILL ABASTO DIRECTOR	2.00	X						0.	0.	0.
(7) KIM FRITZ DIRECTOR	2.00	X						0.	0.	0.
(8) DORA GUILLEN DIRECTOR	2.00	X						0.	0.	0.
(9) SCOTT WALLS DIRECTOR	2.00	X						0.	0.	0.
(10) MARK JAMES DIRECTOR	2.00	X						0.	0.	0.
(11) SCOTT LAWRY DIRECTOR	2.00	X						0.	0.	0.
(12) MICHELLE JAHN DIRECTOR	2.00	X						0.	0.	0.
(13) ANDREW ROSENBERG DIRECTOR	2.00	X						0.	0.	0.
(14) GARY WEITZMAN DIRECTOR	2.00	X						0.	0.	0.
(15) ADAM ZWEIG DIRECTOR	2.00	X						0.	0.	0.
(16) KEVIN ATTO MEMBER AT LARGE	2.00	X						0.	0.	0.
(17) ALBERTO CORTES EXECUTIVE DIRECTOR	40.00			X				116,274.	0.	7,784.

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

[illegible]

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

1

		Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	NONE	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶	0		

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	360,894.			
	d Related organizations	1d				
	e Government grants (contributions)	1e	727,305.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,381,535.			
	g Noncash contributions included in lines 1a-1f: \$		93,481.			
	h Total. Add lines 1a-1f		2,469,734.			
Program Service Revenue	Business Code					
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		40,443.			40,443.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real (ii) Personal				
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	329,104.			
	b Less: cost or other basis and sales expenses		264,886.			
	c Gain or (loss)		64,218.			
	d Net gain or (loss)		64,218.			64,218.
	8 a Gross income from fundraising events (not including \$ 360,894. of contributions reported on line 1c). See Part IV, line 18	a	45,200.			
	b Less: direct expenses	b	71,271.			
	c Net income or (loss) from fundraising events		-26,071.			-26,071.
	9 a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10 a Gross sales of inventory, less returns and allowances	a				
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions.		2,548,324.	0.	0.	78,590.	

Part IX Statement of Functional Expenses

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

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
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, trustees, and key employees	129,479.	81,599.	25,737.	22,143.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	559,266.	334,728.	41,571.	182,967.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	12,395.	5,702.	3,098.	3,595.
9 Other employee benefits	33,057.	15,206.	8,264.	9,587.
10 Payroll taxes	58,182.	34,930.	5,359.	17,893.
11 Fees for services (non-employees):				
a Management				
b Legal	43,797.	15,179.	3,523.	25,095.
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	14,714.	10,885.	1,417.	2,412.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	64,249.		250.	63,999.
13 Office expenses	20,071.	10,628.	3,276.	6,167.
14 Information technology	25,893.	8,637.	3,178.	14,078.
15 Royalties				
16 Occupancy	111,228.	85,074.	9,131.	17,023.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	43,729.	31,629.	3,738.	8,362.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	141,221.	114,084.	10,584.	16,553.
23 Insurance	39,532.	22,173.	7,994.	9,365.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOOD COSTS	1,060,366.	1,060,330.		36.
b SUPPLIES	53,260.			53,260.
c PROFESSIONAL DEVELOPMENT	22,259.	1,254.	15,844.	5,161.
d BANK FEES	16,890.			16,890.
e All other expenses	28,115.	20,755.	6,434.	926.
25 Total functional expenses. Add lines 1 through 24e	2,477,703.	1,852,793.	149,398.	475,512.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	216,459.	1	142,706.
	2 Savings and temporary cash investments	1,015.	2	1,016.
	3 Pledges and grants receivable, net	287,830.	3	154,513.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	40,429.	8	31,129.
	9 Prepaid expenses and deferred charges	39,438.	9	44,675.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,868,804.		
	b Less: accumulated depreciation	10b 1,055,729.	10c	1,813,075.
	11 Investments - publicly traded securities	1,942,729.	11	1,666,127.
	12 Investments - other securities. See Part IV, line 11	1,600,331.	12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets	6,175.	14	4,495.
	15 Other assets. See Part IV, line 11	12,287.	15	14,591.
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,146,693.	16	3,872,327.	
Liabilities	17 Accounts payable and accrued expenses	104,825.	17	108,189.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,094,214.	23	721,768.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	1,199,039.	26	829,957.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,789,635.	27	2,958,166.
	28 Temporarily restricted net assets	120,732.	28	44,613.
	29 Permanently restricted net assets	37,287.	29	39,591.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	2,947,654.	33	3,042,370.
	34 Total liabilities and net assets/fund balances	4,146,693.	34	3,872,327.

Form 990 (2017)

Part XI Reconciliation of Net AssetsCheck 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	2,548,324.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,477,703.
3	Revenue less expenses. Subtract line 2 from line 1	3	70,621.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,947,654.
5	Net unrealized gains (losses) on investments	5	24,095.
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 in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,042,370.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

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

Form 990 (2017)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2092885.	1154503.	1870803.	2152585.	2015359.	9286135.
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	2092885.	1154503.	1870803.	2152585.	2015359.	9286135.
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.						9286135.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	2092885.	1154503.	1870803.	2152585.	2015359.	9286135.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	37,842.	19,368.	38,335.	37,699.	40,443.	173,687.
9 Net income from unrelated business activities, whether or not the business is regularly carried on		34,557.	52,542.	17,240.		104,339.
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						9564161.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	97.09	%
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	97.24	%
16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2017

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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 Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
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 five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 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.)

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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 (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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 in 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 in 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 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		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Part IV Supporting Organizations (continued)

	Yes	No
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?		
11a		
b A family member of a person described in (a) above?		
11b		
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.		
11c		

Section B. Type I Supporting Organizations

	Yes	No
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 organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
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 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).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
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).		
2		
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.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	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):		
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	
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	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2017

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

Part VI

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

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

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

OMB No. 1545-0047

2017

Name of the organization

MAMA 'S KITCHEN

Employer identification number

****-***4246**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

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

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization MAMA'S KITCHEN	Employer identification number **-***4246
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KENNETH R. SPOTTS TRUST 7373 UNIVERSITY AVE., SUITE 115 LA MESA, CA 91942	\$ 279,462.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	WALTER HENN 3359 CAMINITO GANDARA LA JOLLA, CA 92037	\$ 95,262.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

MAMA'S KITCHEN**** - ***4246****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
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

MAMA'S KITCHEN

-*4246

Part III

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

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

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

SCHEDULE 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

2017

Open to Public Inspection

Name of the organization

MAMA'S KITCHEN

Employer identification number

**** - ***4246**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

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

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

☐ Yes ☐ No

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

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

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

☐ Yes ☐ No

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

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

Schedule D (Form 990) 2017

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

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

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	37,287.	35,449.	36,672.	36,650.	35,827.
b Contributions		1,000.			
c Net investment earnings, gains, and losses	2,304.	838.	-1,223.	22.	823.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	39,591.	37,287.	35,449.	36,672.	36,650.

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

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☐ %
 c Temporarily restricted endowment ☐ %

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

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

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		176,700.		176,700.
b Buildings		2,221,314.	668,162.	1,553,152.
c Leasehold improvements				
d Equipment		39,735.	15,938.	23,797.
e Other		431,055.	371,629.	59,426.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,813,075.

Schedule D (Form 990) 2017

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

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

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

1	Total revenue, gains, and other support per audited financial statements	1	2,956,720.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	24,095.
b	Donated services and use of facilities	2b	384,301.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	408,396.
3	Subtract line 2e from line 1	3	2,548,324.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,548,324.

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

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

1	Total expenses and losses per audited financial statements	1	2,862,004.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	384,301.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	384,301.
3	Subtract line 2e from line 1	3	2,477,703.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,477,703.

Part XIII Supplemental Information.

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

Part V, line 4:

THE ENDOWMENT FUND WAS CREATED FOR CONTINUED OPERATING PURPOSES OF THE ORGANIZATION

Department of the Treasury
Internal Revenue Service

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.

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

2017

Open to Public Inspection

Name of the organization

MAMA'S KITCHEN

Employer identification number

**** - *** 4246**

Part I

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes☐ No

- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		MAMA'S DAY (event type)	PIE IN THE SKY (event type)	4 (total number)	
Revenue	1 Gross receipts	209,236.	137,897.	58,961.	406,094.
	2 Less: Contributions	193,636.	108,297.	58,961.	360,894.
	3 Gross income (line 1 minus line 2)	15,600.	29,600.		45,200.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	40,473.	22,987.	7,811.	71,271.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				71,271.
	11 Net income summary. Subtract line 10 from line 3, column (d)				-26,071.

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

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

Name ► _____

Address ► _____

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

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

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

Name ► _____

Address ► _____

- 16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer ☐ Employee ☐ Independent contractor

- 17 Mandatory distributions:

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

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

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

Part IV Supplemental Information (continued)

Lined area for supplemental information.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2017

Open To Public
Inspection

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization **MAMA'S KITCHEN** Employer identification number ****-***4246**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	151	40,222.	COMPARABLE SALES
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (AUCTION ITEMS)	X	102	25,057.	SELLING PRICE
26 Other ▶ (CATERING FOOD)	X	77	23,778.	COMPARABLE SALES
27 Other ▶ (OTHER MISCELL)	X	8	4,425.	COMPARABLE SALES
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, 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 three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2017

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

MAMA'S KITCHEN

Employer identification number

**** - ***4246**

Form 990, Part VI, Section B, line 11b:

THE FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND TREASURER, THEN
PROVIDED TO THE FINANCE COMMITTEE FOR REVIEW AND APPROVAL TO FILE. ONCE THE
FORM 990 HAS BEEN APPROVED BY THE FINANCE COMMITTEE IT IS PROVIDED TO THE
ENTIRE BOARD OF DIRECTORS.

Form 990, Part VI, Section B, Line 12c:

NEW MEMBERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE
STATEMENT AFTER BEING ELECTED TO THE BOARD. ALL BOARD MEMBERS COMPLETE A
NEW CONFLICT OF INTEREST DISCLOSURE STATEMENT EACH JANUARY.

Form 990, Part VI, Section B, Line 15a:

THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS THE COMPENSATION
OF THE EXECUTIVE DIRECTOR BASED ON COMPARIBILITY DATA AVAILABLE FOR THE
GEOGRAPHIC AREA AND NATURE OF THE ORGANIZATION.

Form 990, Part VI, Section C, Line 19:

GOVERNING DOCUMENTS AND POLICIES ARE AVAILABLE UPON RECEIPT OF A WRITTEN
REQUEST. AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S
WEBSITE.

FORM 990. PART XII, LINE 2C

THE AUDITOR SELECTION PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

2017 DEPRECIATION AND AMORTIZATION REPORT

Form 990 Page 10

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation
	Buildings											
1	BUILDING	09/01/11	SL	30.00		16	656,824.				656,824.	127,73
2	BLDG-GENERAL	09/01/11	SL	30.00		16	1,224,134.				1,224,134.	238,02
3	BLDG-HVAC	09/01/11	SL	10.00		16	110,860.				110,860.	64,66
4	BLDG-FIRE ALARM/SPRINKLER	09/01/11	SL	10.00		16	62,177.				62,177.	36,27
5	BLDG-ELEVATOR	09/01/11	SL	15.00		16	41,064.				41,064.	15,97
6	BLDG-FLOOR COVERING	09/01/11	SL	5.00		16	30,313.				30,313.	30,31
7	BLDG-FENCING/GATES	09/01/11	SL	7.00		16	19,892.				19,892.	16,57
8	BLDG-INTRUSION SYSTEM	09/01/11	SL	7.00		16	12,632.				12,632.	10,52
9	BLDG-PHONE SYSTEM	09/01/11	SL	5.00		16	11,301.				11,301.	11,30
10	BLDG-LANDSCAPING	09/01/11	SL	7.00		16	8,988.				8,988.	7,49
11	BLDG-SIGNAGE	09/01/11	SL	5.00		16	4,320.				4,320.	4,32
12	BLDG-INTERIOR WINDOW TREATMENT	09/01/11	SL	7.00		16	2,313.				2,313.	1,92
13	BLDG-ROLL UP DOOR	09/01/11	SL	5.00		16	1,995.				1,995.	1,99
14	BLDG-FIRE EXTINGUISHERS (5)	09/01/11	SL	7.00		16	1,500.				1,500.	1,25
15	BLDG-BLINDS	06/01/12	SL	7.00		16	1,274.				1,274.	91
16	BLDG-LOADING DOCK COVER	11/01/13	SL	15.00		16	16,333.				16,333.	3,99
86	AUTOMATIC GATE	09/06/16	SL	5.00		16	7,900.				7,900.	1,32

728111 04-01-17

(D) - Asset disposed

* ITC, Salvage, Bonus, Cr

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2017 DEPRECIATION AND AMORTIZATION REPORT

Form 990 Page 10

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation
87	FRONT DOOR	06/30/17	SL	5.00		16	7,494.				7,494.	
	* 990 Page 10 Total Buildings						2,221,314.				2,221,314.	574,59
	Furniture & Fixtures											
17	FF&E-MINOLTA COPIER D351	05/07/03	SL	5.00		16	8,243.				8,243.	8,24
18	FF&E-RAISERS EDGE SOFTWARE	06/12/03	SL	3.00		16	15,420.				15,420.	15,42
19	FF&E-HP LASER JET PRINTER	06/24/03	SL	5.00		16	1,077.				1,077.	1,07
20	FF&E-MEALSERVICE SOFTWARE	09/28/03	SL	3.00		16	6,250.				6,250.	6,25
21	FF&E-BLACKBAUD SOFTWARE	01/01/05	SL	3.00		16	8,740.				8,740.	8,74
22	FF&E-DELL COMPUTERS-OPTIPLEX 170L (5)	12/04/05	SL	3.00		16	2,441.				2,441.	2,44
23	FF&E-DONATED MICROSOFT SOFTWARE	02/28/07	SL	3.00		16	20,943.				20,943.	20,94
24	FF&E-DELL COMPUTERS (3)	03/08/07	SL	3.00		16	2,046.				2,046.	2,04
25	FF&E-TECHSOUP COMPUTER SOFTWARE	03/13/07	SL	3.00		16	1,104.				1,104.	1,10
26	FF&E-DONATED COPIER - BIZHUB	09/30/07	SL	3.00		16	6,500.				6,500.	6,50
27	FF&E-DELL LAPTOP COMPUTERS (3)	04/10/08	SL	3.00		16	5,460.				5,460.	5,46
28	FF&E-SMALL BIZ COMPUTER SERVER	01/01/10	SL	5.00		16	6,682.				6,682.	6,68
29	FF&E-OFFICE FURNITURE BMS	09/01/11	SL	7.00		16	42,445.				42,445.	34,86
30	FF&E-FILE CABNETS (12)	09/02/11	SL	5.00		16	3,029.				3,029.	3,02
31	FF&E-PROJECTION SCREEN-CONF ROOM	09/01/11	SL	5.00		16	2,300.				2,300.	2,30

728111 04-01-17

(D) - Asset disposed

* ITC, Salvage, Bonus, Cc

2017 DEPRECIATION AND AMORTIZATION REPORT

Form 990 Page 10

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation
32	FF&E-REFRIGERATOR/WATER COOLER-VOLUNTEER	09/01/11	SL	5.00		16	2,047.				2,047.	2,04
33	FF&E-REFRIGERATOR-STAFF KITCHEN	09/01/11	SL	5.00		16	1,453.				1,453.	1,45
34	FF&E-DONATED HP COMPUTERS (5)	06/01/12	SL	3.00		16	5,195.				5,195.	5,19
35	FF&E-CAPITAL CAMPAIGN VIDEO	07/01/12	SL	3.00		16	3,400.				3,400.	3,40
36	FF&E-DONOR WALL	07/01/12	SL	5.00		16	11,888.				11,888.	11,74
37	FF&E-DONOR ROOM PLAQUES	12/01/12	SL	3.00		16	1,877.				1,877.	1,87
38	FF&E-30 SECOND TV SPOT	12/01/12	SL	3.00		16	1,550.				1,550.	1,55
39	FF&E-DONATED HP COMPUTERS (3)	06/01/13	SL	3.00		16	3,546.				3,546.	3,54
40	FF&E-DONATED HP LAPTOP	06/01/13	SL	3.00		16	829.				829.	82
41	FF&E-DONATED HP PRINTER	06/01/13	SL	3.00		16	997.				997.	99
42	FF&E-FREEZER ENLARGEMENT	01/01/00	SL	10.00		16	1,458.				1,458.	1,45
43	FF&E-FREEZER ENLARGEMENT	06/01/00	SL	10.00		16	1,459.				1,459.	1,45
44	FF&E-AMANA RC27S/MICROWAVE	06/01/03	SL	10.00		16	2,685.				2,685.	2,68
48	FF&E-WALK-IN COOLER ENLARGEMENT	12/20/06	SL	10.00		16	3,005.				3,005.	3,00
49	FF&E-MOVE/INSTALL WALK-IN COOLER @HOME	09/01/11	SL	5.00		16	8,326.				8,326.	8,32
51	FF&E-AUTOMATIC FOOD SLICER	04/15/08	SL	5.00		16	4,286.				4,286.	4,28
54	FF&E-FREEZER	12/19/08	SL	7.00		16	2,759.				2,759.	2,75
55	FF&E-KITCHEN TABLES	06/12/09	SL	7.00		16	884.				884.	88

728111 04-01-17

(D) - Asset disposed

* ITC, Salvage, Bonus, Cc

2017 DEPRECIATION AND AMORTIZATION REPORT

Form 990 Page 10

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation
56	FF&E-VULCAN RANGES (2)	09/01/11	SL	10.00		16	15,682.				15,682.	9,14
57	FF&E-GAS KETTLE	09/01/11	SL	10.00		16	13,353.				13,353.	7,78
58	FF&E-POT & PAN WASHER	09/01/11	SL	7.00		16	19,018.				19,018.	15,84
59	FF&E-CLEAN DISH TABLE/PRE-RINSE	09/01/11	SL	7.00		16	4,889.				4,889.	4,07
60	FF&E-FLOOR TROUGH	09/01/11	SL	10.00		16	1,767.				1,767.	1,03
61	FF&E-SPEC MASTER TABLES (24)	09/01/11	SL	7.00		16	18,685.				18,685.	15,57
62	FF&E-PREP TABLE	09/01/11	SL	7.00		16	3,020.				3,020.	2,51
63	FF&E-AMANA MICROWAVE	09/01/11	SL	10.00		16	1,169.				1,169.	68
64	FF&E-REFRIGERATOR SYSTEM	09/01/11	SL	10.00		16	31,404.				31,404.	18,31
65	FF&E-WALK-IN FREEZER	09/01/11	SL	10.00		16	17,150.				17,150.	10,00
66	FF&E-WALK-IN COOLER	09/01/11	SL	10.00		16	16,251.				16,251.	9,48
67	FF&E-AIR CURTAINS	09/01/11	SL	10.00		16	1,908.				1,908.	1,11
68	FF&E-HOODS/FIRE SYSTEM	09/01/11	SL	7.00		16	32,957.				32,957.	27,46
69	FF&E-WALL CABINETS (2)	09/01/11	SL	5.00		16	1,138.				1,138.	1,13
70	FF&E-SHELVING/POT RACKS	09/01/11	SL	5.00		16	1,865.				1,865.	1,86
71	FF&E-WIRE SHELVING	11/28/11	SL	5.00		16	2,338.				2,338.	2,33
72	FF&E-PANTRY REFRIGERATOR & FREEZER	03/19/12	SL	5.00		16	3,868.				3,868.	3,86
73	FF&E-WORK TABLES	05/03/12	SL	7.00		16	2,169.				2,169.	1,57

728111 04-01-17

(D) - Asset disposed

* ITC, Salvage, Bonus, Cost

2017 DEPRECIATION AND AMORTIZATION REPORT

Form 990 Page 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation
74	FF&E-BLODGET DBL OVEN	08/12/14	SL	8.00		16	8,346.				8,346.	2,95
80	FF&E - HOT BOXES	01/19/15	SL	5.00		16	17,799.				17,799.	8,60
81	FF&E - ELECTRIC DRYER	06/03/15	SL	7.00		16	1,003.				1,003.	28
82	FF&E - SURFACE PRO NOTEBOOK	07/23/15	SL	2.00		16	1,109.				1,109.	1,06
83	FF&E - TWO LAPTOPS	11/09/15	SL	2.00		16	1,556.				1,556.	1,29
88	DELL SERVER	09/22/16	SL	4.00		16	1,000.				1,000.	72
89	STANDUP DESK	02/13/17	SL	1.00		16	547.				547.	23
90	STANDUP DESKS	03/31/17	SL	1.00		16	2,981.				2,981.	99
91	REACH IN FRIDGE-FREEZER	08/07/16	SL	7.00		16	7,872.				7,872.	1,03
92	AUTOMATIC FOOD SLICER	03/19/18	SL	5.00		16	6,167.				6,167.	
93	NUTRITION SOFTWARE	10/13/17	SL	1.00		16	1,071.				1,071.	
94	MACBOOK PRO LAPTOP	04/04/18	SL	2.00		16	1,364.				1,364.	
95	NUTRTION SOFTWARE LICENSE	05/31/18	SL	1.00		16	1,285.				1,285.	
	* 990 Page 10 Total Furniture & Fixtures						431,055.				431,055.	333,61
	Transportation Equipment											
84	VEHICLE-2016 FORD T-150 VAN & TOMMY LIFT	06/28/16	SL	5.00		16	39,735.				39,735.	7,99
	* 990 Page 10 Total Transportation Equipment						39,735.				39,735.	7,99
	Land											

728111 04-01-17

(D) - Asset disposed

* ITC, Salvage, Bonus, Cc

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2017 DEPRECIATION AND AMORTIZATION REPORT

Form 990 Page 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation
79	LAND	09/01/11	L				176,700.				176,700.	
	* 990 Page 10 Total Land						176,700.				176,700.	
	Other											
76	INTANGIBLES-MAMASKITCHEN.ORG	01/22/07	197	60M	HY	43	13,761.				13,761.	13,76
77	INTANGIBLES-MAMASPIES.ORG	12/01/10	197	60M	HY	43	10,000.				10,000.	10,00
78	LOAN FEES	02/28/11	461	120M	HY	43	13,530.				13,530.	8,56
85	INTANGIBLES-MAMASKITCHEN.ORG REDESIGN	03/31/16	197	60M	HY	43	8,415.				8,415.	2,24
	* 990 Page 10 Total Other						45,706.				45,706.	34,57
	* Grand Total 990 Page 10 Depr & Amort						2,914,510.				2,914,510.	950,76
	Current Year Activity											
	Beginning balance						2,904,623.			0.	2,904,623.	950,76
	Acquisitions						9,887.			0.	9,887.	
	Dispositions						0.			0.	0.	
	Ending balance						2,914,510.			0.	2,914,510.	950,76
	Ending accum depr											1,093,33
	Ending book value											1,821,17

728111 04-01-17

(D) - Asset disposed

* ITC, Salvage, Bonus, Cr

35.6

Form **4562****Depreciation and Amortization**
(Including Information on Listed Property)

990

OMB No. 1545-0172

2017Attachment
Sequence No. 179Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

MAMA'S KITCHEN**Form 990 Page 10****** - ***4246****Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	510,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,030,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2016 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	139,538.

Part III MACRS Depreciation (Don't include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2017	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2017 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	139,538.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No		24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis
		(e) Basis for depreciation (business/investment use only)	(f) Recovery period
		(g) Method/ Convention	(h) Depreciation deduction
		(i) Elected section 179 cost	
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use			25
26 Property used more than 50% in a qualified business use:			
	:	%	
	:	%	
	:	%	
27 Property used 50% or less in a qualified business use:			
	:	%	S/L -
	:	%	S/L -
	:	%	S/L -
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1			28
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1			29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle
30 Total business/investment miles driven during the year (don't include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2017 tax year:					
	:				
	:				
43 Amortization of costs that began before your 2017 tax year				43	3,036.
44 Total. Add amounts in column (f). See the instructions for where to report				44	3,036.

Department of the Treasury
Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

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.

		Enter filer's identifying number
Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. MAMA'S KITCHEN	Employer identification number (EIN) or **-***4246
	Number, street, and room or suite no. If a P.O. box, see instructions. 3960 HOME AVENUE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAN DIEGO, CA 92105	

Enter the Return Code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

ALBERTO CORTES

• The books are in the care of ► **3960 HOME AVENUE - SAN DIEGO, CA 92105**
Telephone No. ► **619-233-6262** 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 box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **May 15, 2019**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☐ calendar year _____ or
► ☒ tax year beginning **JUL 1, 2017**, and ending **JUN 30, 2018**

2 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-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b 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.	3b	\$	0.
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.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2017)

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - MAMA'S KITCHEN

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Ac De
	Buildings									
1	BUILDING	090111	SL	30.00	16	656,824.			656,824.	12
2	BLDG-GENERAL	090111	SL	30.00	16	1224134.			1224134.	23
3	BLDG-HVAC	090111	SL	10.00	16	110,860.			110,860.	6
4	BLDG-FIRE ALARM/SPRINKLER	090111	SL	10.00	16	62,177.			62,177.	3
5	BLDG-ELEVATOR	090111	SL	15.00	16	41,064.			41,064.	1
6	BLDG-FLOOR COVERING	090111	SL	5.00	16	30,313.			30,313.	3
7	BLDG-FENCING/GATES	090111	SL	7.00	16	19,892.			19,892.	1
8	BLDG-INTRUSION SYSTEM	090111	SL	7.00	16	12,632.			12,632.	1
9	BLDG-PHONE SYSTEM	090111	SL	5.00	16	11,301.			11,301.	1
10	BLDG-LANDSCAPING	090111	SL	7.00	16	8,988.			8,988.	
11	BLDG-SIGNAGE	090111	SL	5.00	16	4,320.			4,320.	
12	BLDG-INTERIOR WINDOW TREATMENT	090111	SL	7.00	16	2,313.			2,313.	
13	BLDG-ROLL UP DOOR	090111	SL	5.00	16	1,995.			1,995.	
14	BLDG-FIRE EXTINGUISHERS (5)	090111	SL	7.00	16	1,500.			1,500.	
15	BLDG-BLINDS	060112	SL	7.00	16	1,274.			1,274.	
16	BLDG-LOADING DOCK COVER	110113	SL	15.00	16	16,333.			16,333.	
86	AUTOMATIC GATE	090616	SL	5.00	16	7,900.			7,900.	

728102 04-01-17

(D) - Asset disposed

* ITC, Section 179, Salvage,

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - MAMA'S KITCHEN

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Ac De
87	FRONT DOOR	063017	SL	5.00	16	7,494.			7,494.	
	* 990 Page 10 Total Buildings					2221314.		0.	2221314.	57
	Furniture & Fixtures									
	FF&E-MINOLTA COPIER									
17	D351	050703	SL	5.00	16	8,243.			8,243.	
	FF&E-RAISERS EDGE									
18	SOFTWARE	061203	SL	3.00	16	15,420.			15,420.	1
	FF&E-HP LASER JET									
19	PRINTER	062403	SL	5.00	16	1,077.			1,077.	
	FF&E-MEALSERVICE									
20	SOFTWARE	092803	SL	3.00	16	6,250.			6,250.	
	FF&E-BLACKBAUD									
21	SOFTWARE	010105	SL	3.00	16	8,740.			8,740.	
	FF&E-DELL									
22	COMPUTERS-OPTIPLEX	120405	SL	3.00	16	2,441.			2,441.	
	FF&E-DONATED									
23	MICROSOFT SOFTWARE	022807	SL	3.00	16	20,943.			20,943.	2
	FF&E-DELL COMPUTERS									
24	(3)	030807	SL	3.00	16	2,046.			2,046.	
	FF&E-TECHSOUP									
25	COMPUTER SOFTWARE	031307	SL	3.00	16	1,104.			1,104.	
	FF&E-DONATED COPIER									
26	- BIZHUB	093007	SL	3.00	16	6,500.			6,500.	
	FF&E-DELL LAPTOP									
27	COMPUTERS (3)	041008	SL	3.00	16	5,460.			5,460.	
	FF&E-SMALL BIZ									
28	COMPUTER SERVER	010110	SL	5.00	16	6,682.			6,682.	
	FF&E-OFFICE									
29	FURNITURE BMS	090111	SL	7.00	16	42,445.			42,445.	3
	FF&E-FILE CABNIETS									
30	(12)	090211	SL	5.00	16	3,029.			3,029.	
	FF&E-PROJECTION									
31	SCREEN-CONF ROOM	090111	SL	5.00	16	2,300.			2,300.	

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - MAMA'S KITCHEN

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Ac De
32	FF&E-REFRIGERATOR/WATER COOLER-VOLUNTE	090111	SL	5.00	16	2,047.			2,047.	
33	FF&E-REFRIGERATOR-S	090111	SL	5.00	16	1,453.			1,453.	
34	FF&E-DONATED HP COMPUTERS (5)	060112	SL	3.00	16	5,195.			5,195.	
35	FF&E-CAPITAL CAMPAIGN VIDEO	070112	SL	3.00	16	3,400.			3,400.	
36	FF&E-DONOR WALL	070112	SL	5.00	16	11,888.			11,888.	1
37	FF&E-DONOR ROOM PLAQUES	120112	SL	3.00	16	1,877.			1,877.	
38	FF&E-30 SECOND TV SPOT	120112	SL	3.00	16	1,550.			1,550.	
39	FF&E-DONATED HP COMPUTERS (3)	060113	SL	3.00	16	3,546.			3,546.	
40	FF&E-DONATED HP LAPTOP	060113	SL	3.00	16	829.			829.	
41	FF&E-DONATED HP PRINTER	060113	SL	3.00	16	997.			997.	
42	FF&E-FREEZER ENLARGEMENT	010100	SL	10.00	16	1,458.			1,458.	
43	FF&E-FREEZER ENLARGEMENT	060100	SL	10.00	16	1,459.			1,459.	
44	FF&E-AMANA RC27S/MICROWAVE	060103	SL	10.00	16	2,685.			2,685.	
48	FF&E-WALK-IN COOLER ENLARGEMENT	122006	SL	10.00	16	3,005.			3,005.	
49	FF&E-MOVE/INSTALL WALK-IN COOLER @HOM	090111	SL	5.00	16	8,326.			8,326.	
51	FF&E-AUTOMATIC FOOD SLICER	041508	SL	5.00	16	4,286.			4,286.	
54	FF&E-FREEZER	121908	SL	7.00	16	2,759.			2,759.	
55	FF&E-KITCHEN TABLES	061209	SL	7.00	16	884.			884.	

728102 04-01-17

(D) - Asset disposed

* ITC, Section 179, Salvage,

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - MAMA'S KITCHEN

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Ac De
56	FF&E-VULCAN RANGES (2)	090111	SL	10.00	16	15,682.			15,682.	
57	FF&E-GAS KETTLE	090111	SL	10.00	16	13,353.			13,353.	
58	FF&E-POT & PAN WASHER	090111	SL	7.00	16	19,018.			19,018.	1
59	FF&E-CLEAN DISH TABLE/PRE-RINSE	090111	SL	7.00	16	4,889.			4,889.	
60	FF&E-FLOOR TROUGH	090111	SL	10.00	16	1,767.			1,767.	
61	FF&E-SPEC MASTER TABLES (24)	090111	SL	7.00	16	18,685.			18,685.	1
62	FF&E-PREP TABLE	090111	SL	7.00	16	3,020.			3,020.	
63	FF&E-AMANA MICROWAVE	090111	SL	10.00	16	1,169.			1,169.	
64	FF&E-REFRIGERATOR SYSTEM	090111	SL	10.00	16	31,404.			31,404.	1
65	FF&E-WALK-IN FREEZER	090111	SL	10.00	16	17,150.			17,150.	1
66	FF&E-WALK-IN COOLER	090111	SL	10.00	16	16,251.			16,251.	
67	FF&E-AIR CURTAINS	090111	SL	10.00	16	1,908.			1,908.	
68	FF&E-HOODS/FIRE SYSTEM	090111	SL	7.00	16	32,957.			32,957.	2
69	FF&E-WALL CABINETS (2)	090111	SL	5.00	16	1,138.			1,138.	
70	FF&E-SHELVING/POT RACKS	090111	SL	5.00	16	1,865.			1,865.	
71	FF&E-WIRE SHELVING	112811	SL	5.00	16	2,338.			2,338.	
72	FF&E-PANTRY REFRIGERATOR & FREE	031912	SL	5.00	16	3,868.			3,868.	
73	FF&E-WORK TABLES	050312	SL	7.00	16	2,169.			2,169.	

728102 04-01-17

(D) - Asset disposed

* ITC, Section 179, Salvage,

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - MAMA'S KITCHEN

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Ac De
74	FF&E-BLODGET DBL OVEN	081214	SL	8.00	16	8,346.			8,346.	
80	FF&E - HOT BOXES	011915	SL	5.00	16	17,799.			17,799.	
81	FF&E - ELECTRIC DRYER	060315	SL	7.00	16	1,003.			1,003.	
82	FF&E - SURFACE PRO NOTEBOOK	072315	SL	2.00	16	1,109.			1,109.	
83	FF&E - TWO LAPTOPS	110915	SL	2.00	16	1,556.			1,556.	
88	DELL SERVER	092216	SL	4.00	16	1,000.			1,000.	
89	STANDUP DESK	021317	SL	1.00	16	547.			547.	
90	STANDUP DESKS	033117	SL	1.00	16	2,981.			2,981.	
91	FRIDGE-FREEZER	080716	SL	7.00	16	7,872.			7,872.	
92	AUTOMATIC FOOD SLICER	031918	SL	5.00	16	6,167.			6,167.	
93	NUTRITION SOFTWARE	101317	SL	1.00	16	1,071.			1,071.	
94	MACBOOK PRO LAPTOP	040418	SL	2.00	16	1,364.			1,364.	
95	NUTRTION SOFTWARE LICENSE	053118	SL	1.00	16	1,285.			1,285.	
	* 990 Page 10 Total Furniture & Fixtur					431,055.		0.	431,055.	33
	Transportation Equipment									
84	VEHICLE-2016 FORD T-150 VAN &TOMMY LI	062816	SL	5.00	16	39,735.			39,735.	
	* 990 Page 10 Total Transportation Equ					39,735.		0.	39,735.	
	Land									

2017 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - MAMA'S KITCHEN

Asset No.	Description	Date Acquired			Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Ac De
79	LAND	09	01	11	L			176,700.			176,700.	
	* 990 Page 10 Total Land							176,700.		0.	176,700.	
	Other											
76	INTANGIBLES-MAMASKITCHEN.ORG	01	22	07	197	60M	43	13,761.			13,761.	1
77	INTANGIBLES-MAMASPIES.ORG	12	01	10	197	60M	43	10,000.			10,000.	1
78	LOAN FEES	02	28	11	461	120M	43	13,530.			13,530.	
85	INTANGIBLES-MAMASKITCHEN.ORG REDESIGN	03	31	16	197	60M	43	8,415.			8,415.	
	* 990 Page 10 Total Other							45,706.		0.	45,706.	3
	* Grand Total 990 Page 10 Depr & Amor							2914510.		0.	2914510.	95
	Current Year Activity											
	Beginning balance							2904623.		0.	2904623.	95
	Acquisitions							9,887.		0.	9,887.	
	Dispositions							0.		0.	0.	
	Ending balance							2914510.		0.	2914510.	95

- NEXT YEAR FEDERAL -

MAMA'S KITCHEN

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis Deprec
	Buildings						
1	BUILDING	090111	SL	30.00	656,824.		656,
2	BLDG-GENERAL	090111	SL	30.00	1224134.		1224
3	BLDG-HVAC	090111	SL	10.00	110,860.		110,
4	BLDG-FIRE ALARM/SPRINKLER	090111	SL	10.00	62,177.		62,
5	BLDG-ELEVATOR	090111	SL	15.00	41,064.		41,
6	BLDG-FLOOR COVERING	090111	SL	5.00	30,313.		30,
7	BLDG-FENCING/GATES	090111	SL	7.00	19,892.		19,
8	BLDG-INTRUSION SYSTEM	090111	SL	7.00	12,632.		12,
9	BLDG-PHONE SYSTEM	090111	SL	5.00	11,301.		11,
10	BLDG-LANDSCAPING	090111	SL	7.00	8,988.		8,
11	BLDG-SIGNAGE	090111	SL	5.00	4,320.		4,
12	BLDG-INTERIOR WINDOW TREATMENT	090111	SL	7.00	2,313.		2,
13	BLDG-ROLL UP DOOR	090111	SL	5.00	1,995.		1,
14	BLDG-FIRE EXTINGUISHERS (5)	090111	SL	7.00	1,500.		1,
15	BLDG-BLINDS	060112	SL	7.00	1,274.		1,
16	BLDG-LOADING DOCK COVER	110113	SL	15.00	16,333.		16,
86	AUTOMATIC GATE	090616	SL	5.00	7,900.		7,
87	FRONT DOOR	063017	SL	5.00	7,494.		7,
	* 990 Page 10 Total Buildings				2221314.		2221
	Furniture & Fixtures						
17	FF&E-MINOLTA COPIER D351	050703	SL	5.00	8,243.		8,
18	FF&E-RAISERS EDGE SOFTWARE	061203	SL	3.00	15,420.		15,
19	FF&E-HP LASER JET PRINTER	062403	SL	5.00	1,077.		1,
20	FF&E-MEALSERVICE SOFTWARE	092803	SL	3.00	6,250.		6,
21	FF&E-BLACKBAUD SOFTWARE	010105	SL	3.00	8,740.		8,
22	FF&E-DELL COMPUTERS-OPTIPLEX 170L (5)	120405	SL	3.00	2,441.		2,
23	FF&E-DONATED MICROSOFT SOFTWARE	022807	SL	3.00	20,943.		20,
24	FF&E-DELL COMPUTERS (3)	030807	SL	3.00	2,046.		2,
25	FF&E-TECHSOUP COMPUTER SOFTWARE	031307	SL	3.00	1,104.		1,
26	FF&E-DONATED COPIER - BIZHUB	093007	SL	3.00	6,500.		6,
27	FF&E-DELL LAPTOP COMPUTERS (3)	041008	SL	3.00	5,460.		5,
28	FF&E-SMALL BIZ COMPUTER SERVER	010110	SL	5.00	6,682.		6,

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Cx

- NEXT YEAR FEDERAL -

MAMA'S KITCHEN

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis Deprec
29	FF&E-OFFICE FURNITURE BMS	090111	SL	7.00	42,445.		42,
30	FF&E-FILE CABINETS (12)	090211	SL	5.00	3,029.		3,
31	FF&E-PROJECTION SCREEN-CONF ROOM	090111	SL	5.00	2,300.		2,
	FF&E-REFRIGERATOR/WATER						
32	COOLER-VOLUNTEER	090111	SL	5.00	2,047.		2,
33	FF&E-REFRIGERATOR-STAFF KITCHEN	090111	SL	5.00	1,453.		1,
34	FF&E-DONATED HP COMPUTERS (5)	060112	SL	3.00	5,195.		5,
35	FF&E-CAPITAL CAMPAIGN VIDEO	070112	SL	3.00	3,400.		3,
36	FF&E-DONOR WALL	070112	SL	5.00	11,888.		11,
37	FF&E-DONOR ROOM PLAQUES	120112	SL	3.00	1,877.		1,
38	FF&E-30 SECOND TV SPOT	120112	SL	3.00	1,550.		1,
39	FF&E-DONATED HP COMPUTERS (3)	060113	SL	3.00	3,546.		3,
40	FF&E-DONATED HP LAPTOP	060113	SL	3.00	829.		
41	FF&E-DONATED HP PRINTER	060113	SL	3.00	997.		
42	FF&E-FREEZER ENLARGEMENT	010100	SL	10.00	1,458.		1,
43	FF&E-FREEZER ENLARGEMENT	060100	SL	10.00	1,459.		1,
44	FF&E-AMANA RC27S/MICROWAVE	060103	SL	10.00	2,685.		2,
48	FF&E-WALK-IN COOLER ENLARGEMENT	122006	SL	10.00	3,005.		3,
	FF&E-MOVE/INSTALL WALK-IN COOLER						
49	HOME	090111	SL	5.00	8,326.		8,
51	FF&E-AUTOMATIC FOOD SLICER	041508	SL	5.00	4,286.		4,
54	FF&E-FREEZER	121908	SL	7.00	2,759.		2,
55	FF&E-KITCHEN TABLES	061209	SL	7.00	884.		
56	FF&E-VULCAN RANGES (2)	090111	SL	10.00	15,682.		15,
57	FF&E-GAS KETTLE	090111	SL	10.00	13,353.		13,
58	FF&E-POT & PAN WASHER	090111	SL	7.00	19,018.		19,
59	FF&E-CLEAN DISH TABLE/PRE-RINSE	090111	SL	7.00	4,889.		4,
60	FF&E-FLOOR TROUGH	090111	SL	10.00	1,767.		1,
61	FF&E-SPEC MASTER TABLES (24)	090111	SL	7.00	18,685.		18,
62	FF&E-PREP TABLE	090111	SL	7.00	3,020.		3,
63	FF&E-AMANA MICROWAVE	090111	SL	10.00	1,169.		1,
64	FF&E-REFRIGERATOR SYSTEM	090111	SL	10.00	31,404.		31,
65	FF&E-WALK-IN FREEZER	090111	SL	10.00	17,150.		17,
66	FF&E-WALK-IN COOLER	090111	SL	10.00	16,251.		16,

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Cx

- NEXT YEAR FEDERAL -

MAMA'S KITCHEN

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis Deprec
67	FF&E-AIR CURTAINS	090111	SL	10.00	1,908.		1,
68	FF&E-HOODS/FIRE SYSTEM	090111	SL	7.00	32,957.		32,
69	FF&E-WALL CABINETS (2)	090111	SL	5.00	1,138.		1,
70	FF&E-SHELVING/POT RACKS	090111	SL	5.00	1,865.		1,
71	FF&E-WIRE SHELVING	112811	SL	5.00	2,338.		2,
72	FF&E-PANTRY REFRIGERATOR & FREEZER	031912	SL	5.00	3,868.		3,
73	FF&E-WORK TABLES	050312	SL	7.00	2,169.		2,
74	FF&E-BLODGET DBL OVEN	081214	SL	8.00	8,346.		8,
80	FF&E - HOT BOXES	011915	SL	5.00	17,799.		17,
81	FF&E - ELECTRIC DRYER	060315	SL	7.00	1,003.		1,
82	FF&E - SURFACE PRO NOTEBOOK	072315	SL	2.00	1,109.		1,
83	FF&E - TWO LAPTOPS	110915	SL	2.00	1,556.		1,
88	DELL SERVER	092216	SL	4.00	1,000.		1,
89	STANDUP DESK	021317	SL	1.00	547.		
90	STANDUP DESKS	033117	SL	1.00	2,981.		2,
91	REACH IN FRIDGE-FREEZER	080716	SL	7.00	7,872.		7,
92	AUTOMATIC FOOD SLICER	031918	SL	5.00	6,167.		6,
93	NUTRITION SOFTWARE	101317	SL	1.00	1,071.		1,
94	MACBOOK PRO LAPTOP	040418	SL	2.00	1,364.		1,
95	NUTRTION SOFTWARE LICENSE	053118	SL	1.00	1,285.		1,
	* 990 Page 10 Total Furniture & Fixtures				431,055.		431,
	Transportation Equipment						
	VEHICLE-2016 FORD T-150 VAN &TOMMY						
84	LIFT	062816	SL	5.00	39,735.		39,
	* 990 Page 10 Total Transportation Equipment				39,735.		39,
	Land						
79	LAND	090111	L		176,700.		176,
	* 990 Page 10 Total Land				176,700.		176,
	Other						
76	INTANGIBLES-MAMASKITCHEN.ORG	012207	197	60M	13,761.		13,
77	INTANGIBLES-MAMASPIES.ORG	120110	197	60M	10,000.		10,
78	LOAN FEES	022811	461	120M	13,530.		13,

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Cx

* ITC, Section 179, Salvage, HR 3090, Cx

2017

California Exempt Organization Annual Information Return

199

Calendar Year 2017 or fiscal year beginning (mm/dd/yyyy) 07/01/2017, and ending (mm/dd/yyyy) 06/30/2018

Corporation/Organization name

MAMA'S KITCHEN

California corporation number

1570256

Additional information. See instructions.

FEIN

-*4246

Street address (suite or room)

3960 HOME AVENUE

PMB no.

City

SAN DIEGO

State

CA

ZIP code

92105

Foreign country name

Foreign province/state/county

Foreign postal code

A First Return ☐ Yes ☒ No

B Amended Return ☐ Yes ☒ No

C IRC Section 4947(a)(1) trust ☐ Yes ☒ No

D Final Information Return?

☐ Dissolved ☐ Surrendered (Withdrawn) ☐ Merged/Reorganized

Enter date: (mm/dd/yyyy) ☐

E Check accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other

F Federal return filed? (1) ☐ 990T (2) ☐ 990PF (3) ☐ Sch H (990) (4) ☒ Other 990 series

G Is this a group filing? See instructions ☐ Yes ☒ No

H Is this organization in a group exemption ☐ Yes ☒ No
If "Yes," what is the parent's name?

I Did the organization have any changes to its guidelines not reported to the FTB? See instructions ☐ Yes ☒ No

J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. ☐ Yes ☒ No

K Is the organization exempt under R&TC Section 23701g? ☐ Yes ☒ No
If "Yes," enter the gross receipts from nonmember sources \$

L If organization is exempt under R&TC Section 23701d and meets the filing fee exception, check box. No filing fee is required. ☐

M Is the organization a Limited Liability Company? ☐ Yes ☒ No

N Did the organization file Form 100 or Form 109 to report taxable income? ☒ Yes ☐ No

O Is the organization under audit by the IRS or has the IRS audited in a prior year? ☐ Yes ☒ No

P Is federal Form 1023/1024 pending? ☐ Yes ☒ No
Date filed with IRS

Part I Complete Part I unless not required to file this form. See General Information B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	414,747.00
	2	Gross dues and assessments from members and affiliates	2	00
	3	Gross contributions, gifts, grants, and similar amounts received	3	2,469,734.00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Information B	4	2,884,481.00
	5	Cost of goods sold	5	00
Expenses	6	Cost or other basis, and sales expenses of assets sold	6	264,886.00
	7	Total costs. Add line 5 and line 6	7	264,886.00
	8	Total gross income. Subtract line 7 from line 4	8	2,619,595.00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	2,550,327.00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	69,268.00
Filing Fee	11	Total payments	11	00
	12	Use tax. See General Information K	12	00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13	00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14	00
	15	Filing fee \$10 or \$25. See General Information F	15	10.00
	16	Penalties and Interest. See General Information J	16	00
	17	Balance due. Add line 12, line 15, and line 16. Then subtract line 11 from the result	17	10.00
Sign Here	Under penalties or 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 taxpayer) is based on all information of which preparer has any knowledge.			
Paid Preparer's Use Only	Signature of officer	Title EXECUTIVE DIRE	Date	Telephone
	Preparer's signature	JASON C. GUTZMER	Date 12/21/18	Check if self-employed <input type="checkbox"/> PTIN P01204162
	Firm's name (or yours, if self-employed) and address	LING & BOUMAN CPA'S, LLP 4669 MURPHY CANYON ROAD, STE 130 SAN DIEGO, CA 92123-1833		
	FEIN	**-***0836 Telephone (858)467-4770		
May the FTB discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

728951 12-08-17

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	•	1	45,200.00
	2	Interest	•	2	00
	3	Dividends	•	3	40,443.00
	4	Gross rents	•	4	00
	5	Gross royalties	•	5	00
	6	Gross amount received from sale of assets (See instructions) STATEMENT 2	•	6	329,104.00
	7	Other income	•	7	00
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	•	8	414,747.00
	9	Contributions, gifts, grants, and similar amounts paid	•	9	00
	10	Disbursements to or for members	•	10	00
	11	Compensation of officers, directors, and trustees SEE STATEMENT 3	•	11	129,479.00
	12	Other salaries and wages	•	12	559,266.00
	13	Interest	•	13	43,729.00
	14	Taxes	•	14	58,182.00
	15	Rents	•	15	111,228.00
	16	Depreciation and depletion (See instructions)	•	16	142,574.00
	17	Other Expenses and Disbursements SEE STATEMENT 4	•	17	1,505,869.00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	•	18	2,550,327.00

Schedule L Balance Sheet

Beginning of taxable year

End of taxable year

Assets	(a)	(b)	(c)	(d)
1 Cash		217,474.		• 143,722.
2 Net accounts receivable				•
3 Net notes receivable				•
4 Inventories		40,429.		• 31,129.
5 Federal and state government obligations		1,600,331.		• 1,666,127.
6 Investments in other bonds				•
7 Investments in stock				•
8 Mortgage loans				•
9 Other investments STMT 5		12,287.		• 14,591.
10 a Depreciable assets	2,682,217.		2,692,104.	
b Less accumulated depreciation	(916,188.)	1,766,029.	(1,055,729.)	1,636,375.
11 Land		176,700.		• 176,700.
12 Other assets STMT 6		333,443.		• 203,683.
13 Total assets		4,146,693.		3,872,327.
Liabilities and net worth				
14 Accounts payable		104,825.		• 108,189.
15 Contributions, gifts, or grants payable				•
16 Bonds and notes payable				•
17 Mortgages payable		1,094,214.		• 721,768.
18 Other liabilities				
19 Capital stock or principal fund				•
20 Paid-in or capital surplus. Attach reconciliation				•
21 Retained earnings or income fund		2,947,654.		• 3,042,370.
22 Total liabilities and net worth		4,146,693.		3,872,327.

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1 Net income per books	• 69,268.	7 Income recorded on books this year not included in this return	•
2 Federal income tax	•	8 Deductions in this return not charged against book income this year	•
3 Excess of capital losses over capital gains	•	9 Total. Add line 7 and line 8	
4 Income not recorded on books this year	•	10 Net income per return.	
5 Expenses recorded on books this year not deducted in this return	•	Subtract line 9 from line 6	69,268.
6 Total. Add line 1 through line 5	69,268.		

CA 199	Cash Contributions Included on Part I, Line 3	Statement	1
--------	--	-----------	---

Contributor's Name	Contributor's Address	Date of Gift	Amount
KENNETH R. SPOTTS TRUST	7373 UNIVERSITY AVE., SUITE 115 LA MESA, CA 91942	02/12/18	279,462.
WALTER HENN	3359 CAMINITO GANDARA LA JOLLA, CA 92037	07/05/17	95,262.
Total included on line 3			374,724.

CA 199	Gross Amount from Sale of Assets			Statement	2
Description	Date Acquired	Date Sold	Method Acquired		
			Purchased		
	Cost or Other Basis	Deprec.	Expense of Sale	Gross Sales Price	
	264,886.	0.	0.	329,104.	
Total to Form 199, Page 2, ln 6	264,886.	0.	0.	329,104.	

CA 199	Compensation of Officers, Directors and Trustees		Statement	3
Name and Address	Title and Average Hrs Worked/Wk		Compensation	
MIKE HORN 3960 HOME AVENUE SAN DIEGO, CA 92105	PRESIDENT 2.00		0.	
TIM ROURKE 3960 HOME AVENUE SAN DIEGO, CA 92105	PRESIDENT ELECT/VICE PRESI 2.00		0.	
MICHELLE BURKART 3960 HOME AVENUE SAN DIEGO, CA 92105	TREASURER 2.00		0.	
JENNIFER KEARNS 3960 HOME AVENUE SAN DIEGO, CA 92105	SECRETARY 2.00		0.	
JIM BLEVINS 3960 HOME AVENUE SAN DIEGO, CA 92105	DIRECTOR 2.00		0.	
JILL ABASTO 3960 HOME AVENUE SAN DIEGO, CA 92105	DIRECTOR 2.00		0.	
KIM FRITZ 3960 HOME AVENUE SAN DIEGO, CA 92105	DIRECTOR 2.00		0.	

MAMA'S KITCHEN

-*4246

DORA GUILLEN
3960 HOME AVENUE
SAN DIEGO, CA 92105

DIRECTOR
2.00

0.

SCOTT WALLS
3960 HOME AVENUE
SAN DIEGO, CA 92105

DIRECTOR
2.00

0.

MARK JAMES
3960 HOME AVENUE
SAN DIEGO, CA 92105

DIRECTOR
2.00

0.

SCOTT LAWRY
3960 HOME AVENUE
SAN DIEGO, CA 92105

DIRECTOR
2.00

0.

MICHELLE JAHN
3960 HOME AVENUE
SAN DIEGO, CA 92105

DIRECTOR
2.00

0.

ANDREW ROSENBERG
3960 HOME AVENUE
SAN DIEGO, CA 92105

DIRECTOR
2.00

0.

GARY WEITZMAN
3960 HOME AVENUE
SAN DIEGO, CA 92105

DIRECTOR
2.00

0.

ADAM ZWEIG
3960 HOME AVENUE
SAN DIEGO, CA 92105

DIRECTOR
2.00

0.

KEVIN ATTO
3960 HOME AVENUE
SAN DIEGO, CA 92105

MEMBER AT LARGE
2.00

0.

ALBERTO CORTES
3960 HOME AVENUE
SAN DIEGO, CA 92105

EXECUTIVE DIRECTOR
40.00

129,479.

Total to Form 199, Part II, line 11

129,479.

CA 199	Other Expenses	Statement	4
Description		Amount	
FOOD COSTS		1,060,366.	
SUPPLIES		53,260.	
PROFESIONAL DEVELOPMENT		22,259.	
BANK FEES		16,890.	
Direct expenses of fundraising events		71,271.	
Pension plan contributions		12,395.	
Other employee benefits		33,057.	
Legal fees		43,797.	
Investment management fees		14,714.	
Advertising and promotion		64,249.	
Office expenses		20,071.	
Information technology		25,893.	
Insurance		39,532.	
All other expenses		28,115.	
Total to Form 199, Part II, line 17		1,505,869.	

CA 199	Other Investments	Statement	5
Description	Beg. of Year	End of Year	
SAN DIEGO FOUNDATION ENDOWMENT FUND	12,287.	14,591.	
Total to Form 199, Schedule L, line 9	12,287.	14,591.	

CA 199	Other Assets	Statement	6
Description	Beg. of Year	End of Year	
PREPAID EXPENSES	0.	0.	
INTANGIBLE ASSETS	0.	0.	
ACCUMULATED AMORTIZATION	0.	0.	
Pledges and Grants Receivable	287,830.	154,513.	
Prepaid Expenses and Deferred Charges	39,438.	44,675.	
Intangible Assets	6,175.	4,495.	
Total to Form 199, Schedule L, line 12	333,443.	203,683.	

2017

Corporation Depreciation
and Amortization

3885

Attach to Form 100 or Form 100W.

FORM 199

FEIN ** - ***4246

Corporation name

California corporation number

MAMA'S KITCHEN

1570256

Part I Election To Expense Certain Property Under IRC Section 179

1 Maximum deduction under IRC Section 179 for California	1	\$25,000
2 Total cost of IRC Section 179 property placed in service	2	
3 Threshold cost of IRC Section 179 property before reduction in limitation	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7 Listed property (elected IRC Section 179 cost)	7	
8 Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from prior taxable years	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12 IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2018. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

(a) Description property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation Method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
14							
SEE STATEMENT 7		2,868,804.	916,191.				
15 Add the amounts in column (g) and column (h). The total of column (h) may not exceed \$2,000. See instructions for line 14, column (h)					15	139,538.	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g); or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h), or Depreciation (if no election is made), enter the amount from line 15, column (g)	16	139,538.
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	139,538.
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	0.

Part IV Amortization

(a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instructions)	(f) Period or percentage	(g) Amortization for this year
19						
SEE STATEMENT 8		45,706.	34,573.			
20 Total. Add the amounts in column (g)					20	3,036.
21 Total amortization claimed for federal purposes from federal Form 4562, line 44					21	3,036.
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12					22	0.

CA 3885		Depreciation				Statement		7
Asset No./ Description	Date in Service	Cost or Basis	Prior Depr	Method	Life	Depre- ciation	Bonus	
1 BUILDING	09/01/11	656,824.	127,733.	SL	30.00	21,900.		
2 BLDG-GENERAL	09/01/11	1,224,134.	238,026.	SL	30.00	40,804.		
3 BLDG-HVAC	09/01/11	110,860.	64,668.	SL	10.00	11,086.		
4 BLDG-FIRE ALARM/SPRINKLER	09/01/11	62,177.	36,270.	SL	10.00	6,218.		
5 BLDG-ELEVATOR	09/01/11	41,064.	15,970.	SL	15.00	2,738.		
6 BLDG-FLOOR COVERING	09/01/11	30,313.	30,313.	SL	5.00	0.		
7 BLDG-FENCING/GATES	09/01/11	19,892.	16,577.	SL	7.00	2,842.		
8 BLDG-INTRUSION SYSTEM	09/01/11	12,632.	10,527.	SL	7.00	1,805.		
9 BLDG-PHONE SYSTEM	09/01/11	11,301.	11,301.	SL	5.00	0.		
10 BLDG-LANDSCAPING	09/01/11	8,988.	7,490.	SL	7.00	1,284.		
11 BLDG-SIGNAGE	09/01/11	4,320.	4,320.	SL	5.00	0.		
12 BLDG-INTERIOR WINDOW TREATMENT	09/01/11	2,313.	1,927.	SL	7.00	330.		
13 BLDG-ROLL UP DOOR	09/01/11	1,995.	1,995.	SL	5.00	0.		
14 BLDG-FIRE EXTINGUISHERS (5)	09/01/11	1,500.	1,250.	SL	7.00	214.		
15 BLDG-BLINDS	06/01/12	1,274.	910.	SL	7.00	182.		
16 BLDG-LOADING DOCK COVER	11/01/13	16,333.	3,993.	SL	15.00	1,089.		
17 FF&E-MINOLTA COPIER D351	05/07/03	8,243.	8,243.	SL	5.00	0.		
18 FF&E-RAISERS EDGE SOFTWARE	06/12/03	15,420.	15,420.	SL	3.00	0.		
19 FF&E-HP LASER JET PRINTER	06/24/03	1,077.	1,077.	SL	5.00	0.		
20 FF&E-MEALSERVICE SOFTWARE	09/28/03	6,250.	6,250.	SL	3.00	0.		
21 FF&E-BLACKBAUD SOFTWARE	01/01/05	8,740.	8,740.	SL	3.00	0.		
22 FF&E-DELL COMPUTERS-OPTIPLEX 170L (5)	12/04/05	2,441.	2,441.	SL	3.00	0.		
23 FF&E-DONATED MICROSOFT SOFTWARE	02/28/07	20,943.	20,943.	SL	3.00	0.		

24	FF&E-DELL COMPUTERS (3)					
	03/08/07	2,046.	2,046.	SL	3.00	0.
25	FF&E-TECHSOUP COMPUTER SOFTWARE					
	03/13/07	1,104.	1,104.	SL	3.00	0.
26	FF&E-DONATED COPIER - BIZHUB					
	09/30/07	6,500.	6,500.	SL	3.00	0.
27	FF&E-DELL LAPTOP COMPUTERS (3)					
	04/10/08	5,460.	5,460.	SL	3.00	0.
28	FF&E-SMALL BIZ COMPUTER SERVER					
	01/01/10	6,682.	6,682.	SL	5.00	0.
29	FF&E-OFFICE FURNITURE BMS					
	09/01/11	42,445.	34,868.	SL	7.00	6,116.
30	FF&E-FILE CABNIETS (12)					
	09/02/11	3,029.	3,029.	SL	5.00	0.
31	FF&E-PROJECTION SCREEN-CONF ROOM					
	09/01/11	2,300.	2,300.	SL	5.00	0.
32	FF&E-REFRIGERATOR/WATER COOLER-VOLUNTEER					
	09/01/11	2,047.	2,047.	SL	5.00	0.
33	FF&E-REFRIGERATOR-STAFF KITCHEN					
	09/01/11	1,453.	1,453.	SL	5.00	0.
34	FF&E-DONATED HP COMPUTERS (5)					
	06/01/12	5,195.	5,195.	SL	3.00	0.
35	FF&E-CAPITAL CAMPAIGN VIDEO					
	07/01/12	3,400.	3,400.	SL	3.00	0.
36	FF&E-DONOR WALL					
	07/01/12	11,888.	11,746.	SL	5.00	142.
37	FF&E-DONOR ROOM PLAQUES					
	12/01/12	1,877.	1,877.	SL	3.00	0.
38	FF&E-30 SECOND TV SPOT					
	12/01/12	1,550.	1,550.	SL	3.00	0.
39	FF&E-DONATED HP COMPUTERS (3)					
	06/01/13	3,546.	3,546.	SL	3.00	0.
40	FF&E-DONATED HP LAPTOP					
	06/01/13	829.	829.	SL	3.00	0.
41	FF&E-DONATED HP PRINTER					
	06/01/13	997.	997.	SL	3.00	0.
42	FF&E-FREEZER ENLARGEMENT					
	01/01/00	1,458.	1,458.	SL	10.00	0.
43	FF&E-FREEZER ENLARGEMENT					
	06/01/00	1,459.	1,459.	SL	10.00	0.
44	FF&E-AMANA RC27S/MICROWAVE					
	06/01/03	2,685.	2,685.	SL	10.00	0.
48	FF&E-WALK-IN COOLER ENLARGEMENT					
	12/20/06	3,005.	3,005.	SL	10.00	0.
49	FF&E-MOVE/INSTALL WALK-IN COOLER @HOME					
	09/01/11	8,326.	8,326.	SL	5.00	0.
51	FF&E-AUTOMATIC FOOD SLICER					
	04/15/08	4,286.	4,286.	SL	5.00	0.
54	FF&E-FREEZER					
	12/19/08	2,759.	2,759.	SL	7.00	0.
55	FF&E-KITCHEN TABLES					
	06/12/09	884.	884.	SL	7.00	0.
56	FF&E-VULCAN RANGES (2)					
	09/01/11	15,682.	9,148.	SL	10.00	1,568.

57	FF&E-GAS KETTLE	09/01/11	13,353.	7,789.	SL	10.00	1,335.
58	FF&E-POT & PAN WASHER	09/01/11	19,018.	15,848.	SL	7.00	2,717.
59	FF&E-CLEAN DISH TABLE/PRE-RINSE	09/01/11	4,889.	4,074.	SL	7.00	698.
60	FF&E-FLOOR TROUGH	09/01/11	1,767.	1,031.	SL	10.00	177.
61	FF&E-SPEC MASTER TABLES (24)	09/01/11	18,685.	15,571.	SL	7.00	2,669.
62	FF&E-PREP TABLE	09/01/11	3,020.	2,516.	SL	7.00	431.
63	FF&E-AMANA MICROWAVE	09/01/11	1,169.	682.	SL	10.00	117.
64	FF&E-REFRIGERATOR SYSTEM	09/01/11	31,404.	18,319.	SL	10.00	3,140.
65	FF&E-WALK-IN FREEZER	09/01/11	17,150.	10,004.	SL	10.00	1,715.
66	FF&E-WALK-IN COOLER	09/01/11	16,251.	9,480.	SL	10.00	1,625.
67	FF&E-AIR CURTAINS	09/01/11	1,908.	1,113.	SL	10.00	191.
68	FF&E-HOODS/FIRE SYSTEM	09/01/11	32,957.	27,464.	SL	7.00	4,708.
69	FF&E-WALL CABINETS (2)	09/01/11	1,138.	1,138.	SL	5.00	0.
70	FF&E-SHELVING/POT RACKS	09/01/11	1,865.	1,865.	SL	5.00	0.
71	FF&E-WIRE SHELVING	11/28/11	2,338.	2,338.	SL	5.00	0.
72	FF&E-PANTRY REFRIGERATOR & FREEZER	03/19/12	3,868.	3,868.	SL	5.00	0.
73	FF&E-WORK TABLES	05/03/12	2,169.	1,575.	SL	7.00	310.
74	FF&E-BLODGET DBL OVEN	08/12/14	8,346.	2,956.	SL	8.00	1,043.
79	LAND	09/01/11	176,700.		L		0.
80	FF&E - HOT BOXES	01/19/15	17,799.	8,603.	SL	5.00	3,560.
81	FF&E - ELECTRIC DRYER	06/03/15	1,003.	286.	SL	7.00	143.
82	FF&E - SURFACE PRO NOTEBOOK	07/23/15	1,109.	1,061.	SL	2.00	47.
83	FF&E - TWO LAPTOPS	11/09/15	1,556.	1,297.	SL	2.00	259.
84	VEHICLE-2016 FORD T-150 VAN & TOMMY LIFT	06/28/16	39,735.	7,991.	SL	5.00	7,947.
86	AUTOMATIC GATE	09/06/16	7,900.	1,320.	SL	5.00	1,580.
87	FRONT DOOR	06/30/17	7,494.		SL	5.00	1,500.
88	DELL SERVER	09/22/16	1,000.	723.	SL	4.00	277.

MAMA'S KITCHEN

-*4246

89 STANDUP DESK	02/13/17	547.	230.	SL	1.00	317.
90 STANDUP DESKS	03/31/17	2,981.	992.	SL	1.00	1,990.
91 REACH IN FRIDGE-FREEZER	08/07/16	7,872.	1,034.	SL	7.00	1,125.
92 AUTOMATIC FOOD SLICER	03/19/18	6,167.		SL	5.00	411.
93 NUTRITION SOFTWARE	10/13/17	1,071.		SL	1.00	803.
94 MACBOOK PRO LAPTOP	04/04/18	1,364.		SL	2.00	171.
95 NUTRTION SOFTWARE LICENSE	05/31/18	1,285.		SL	1.00	214.
Total to Form 3885		2,868,804.	916,191.			139,538.

CA 3885	Amortization				Statement		8
Asset No./ Description	Date in Service	Cost or Basis	Prior Amort	Code Sec	Life	Amor- tization	
76 INTANGIBLES-MAMASKITCHEN.ORG	01/22/07	13,761.	13,761.	197	60M	0.	
77 INTANGIBLES-MAMASPIES.ORG	12/01/10	10,000.	10,000.	197	60M	0.	
78 LOAN FEES	02/28/11	13,530.	8,569.	461	120M	1,353.	
85 INTANGIBLES-MAMASKITCHEN.ORG REDESIGN	03/31/16	8,415.	2,243.	197	60M	1,683.	
Total to Form 3885		45,706.	34,573.			3,036.	