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

2023

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning , and ending

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
MARTHA'S VILLAGE AND KITCHEN, INC.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
83-791 DATE AVENUE

City or town, state or province, country, and ZIP or foreign postal code
INDIO CA 92201

D Employer identification number
33-0777892

E Telephone number
760-347-4741

G Gross receipts$ 9,226,196

F Name and address of principal officer:
SAM HOLLENBECK
83-791 DATE AVE.
INDIO CA 92201

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions

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

J Website: MARTHASVILLAGE.ORG

H(c) Group exemption number

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

L Year of formation: 1997

M State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
TRANSFORMING THE LIVES OF THE IMPOVERISHED AND HOMELESS.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

Activities & Governance	**3** Number of voting members of the governing body (Part VI, line 1a)	3	9
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	9
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	165
	6 Total number of volunteers (estimate if necessary)	6	2443
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

		Prior Year	Current Year
Revenue	**8** Contributions and grants (Part VIII, line 1h)	7,480,154	8,537,437
	9 Program service revenue (Part VIII, line 2g)		0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	106,306	168,754
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	267,831	432,650
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,854,291	9,138,841
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
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	4,005,099	4,434,544
	16a Professional fundraising fees (Part IX, column (A), line 11e)	45,631	0
	b Total fundraising expenses (Part IX, column (D), line 25) 654,754		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	3,814,431	4,849,664
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	7,865,161	9,284,208
	19 Revenue less expenses. Subtract line 18 from line 12	-10,870	-145,367

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20** Total assets (Part X, line 16)	14,127,121	14,428,493
	21 Total liabilities (Part X, line 26)	5,802,194	6,022,127
	22 Net assets or fund balances. Subtract line 21 from line 20	8,324,927	8,406,366

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

SAM HOLLENBECK PRES. & CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check	PTIN
SHANNON C. MAIDMENT	COURTESY COPY ORIGINAL FILED ELECTRONICALLY	05/20/24	☐ if self-employed	P01426554

Firm's name: COACHELLA VALLEY ACCOUNTING & AUDITING — Firm's EIN:

Firm's address: 43675 ALBA CT LA QUINTA, CA 92253 — Phone no. 442-325-0089

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

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2023)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

TRANSFORMING THE LIVES OF THE IMPOVERISHED AND HOMELESS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [X] 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 [X] 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 $ 4,274,118 including grants of $) (Revenue $)

RESIDENT HOUSING-
PROVIDED 628 WITH HOMELESS HOUSING SERVICES WITH FULL WRAP AROUND SERVICES. APROXIMATELY 295,294 MEALS WERE PROVIDED TO RESIDENTS AS WELL AS NON-RESIDENTS IN NEED OF NUTRITIONAL MEALS. WHEN THESE MOST BASIC NEEDS ARE MET, INDIVIDUALS AND FAMILES ARE ABLE TO FOCUS ON LEARNING LIFE SKILLS NECESSARY TO ACCESS AND MAINTAIN STABLE HOUSING. OF THE CLIENTS WHO MOVED OUT OF THE EMERGENCY HOUSING PROGRAM, 78% MOVED INTO STABLE, SECURE AND SAFE HOUSING. THESE SERVICES ARE PROVIDED TO SINGLE MEN, SINGLE WOMEN, AND FAMILIES.

4b (Code:) (Expenses $ 1,418,085 including grants of $) (Revenue $)

CHILDREN'S SERVICES-
THE CHILDREN'S SERVICE CENTER WAS AVAILABLE FOR 250 DAYS OF CHILD DEVELOPMENT SCHOOL CARE, PROVIDING ENRICHMENT AND DEVELOPMENT OPPORTUNITIES FOR CHILDREN.

4c (Code:) (Expenses $ 1,399,591 including grants of $) (Revenue $)

CASE MANAGEMENT-
THE ORGANIZATION PROVIDES PRODESSIONAL CASE MANAGEMENT, CAREER & EDUCATION AND CHILD DEVELOPMENT SERVICES TO ALL OF OUR RESIDENTS. WE PRODIVDED 3,382 LIFE SKILLS CLASS SESSIONS, 557 COMPUTER CLASS SESSIONS, 102 EMPLOYMENT SERVICES SESSIONS, 521 SESSIONS OF JOB SEEKING SKILLS, AND 64 SESSIONS OF ADULT EDUCATION/GED PREPARATION CLASS.

4d Other program services (Describe on Schedule O.)
(Expenses $ 497,535 including grants of $) (Revenue $)

4e Total program service expenses 7,589,329

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)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		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? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	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? *If "Yes," complete Schedule D, Part VII*	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? *If "Yes," complete Schedule D, Part VIII*	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? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	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)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	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? *If "Yes," complete Schedule F, Parts I and IV*	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? *If "Yes," complete Schedule F, Parts II and IV*	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? *If "Yes," complete Schedule F, Parts III and IV*	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? *If "Yes," complete Schedule G, Part I.* See instructions	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? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
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*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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*	25a		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*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a	X	
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b	X	
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		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*	32		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*	33		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*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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*	35b		
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*	36		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*	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O.	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	11		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X	

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 165			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	**Organizations that may receive deductible contributions under section 170(c).**			
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?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X	
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?	8		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
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.	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
c	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X
17	**Section 501(c)(21) organizations.** Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.*

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	9		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	9		
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, 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 on 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?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	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	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

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 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

X Own website ☐ Another's website X Upon request ☐ Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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.

SAM HOLLENBECK **83-791 DATE AVE.**

INDIO **CA 92201** **760-347-4741**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization 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 dotted 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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) SAM HOLLENBECK	40.00									
PRES.& CEO	0.00	X		X				120,000	0	11,213
(2) ROSA E. VERDUZCO RUIZ	40.00									
COO	0.00	X		X				105,000	0	4,442
(3) VANESSA WALKER	40.00									
V.P. OF FINANCE	0.00	X		X				84,616	0	7,284
(4) MIKE LEONHEART	40.00									
FRMR DIR. OF FINANCE	0.00	X		X				31,196	0	88
(5) HENRY BURDICK	1.00									
CHAIRMAN EMERITUS	0.00	X		X				0	0	0
(6) JONATHAN ESPY	1.00									
CHAIRMAN	0.00	X		X				0	0	0
(7) MICHAEL BELL	1.00									
TREASURER	0.00	X		X				0	0	0
(8) HOWARD LINCOLN	1.00									
SECRETARY	0.00	X		X				0	0	0
(9) LANCE BARNEY	1.00									
DIRECTOR	0.00	X						0	0	0
(10) KATE FAUNTLEROY	1.00									
DIRECTOR	0.00	X						0	0	0
(11) THOMAS PARK	1.00									
DIRECTOR	0.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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			
(12) ELIZABETH SEALEY										
(12)	1.00									
DIRECTOR	0.00	X						0	0	0
(13) SCOTT SWEENEY										
(13)	1.00									
DIRECTOR	0.00	X						0	0	0
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal								340,812		23,027
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								340,812		23,027

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 2

		Yes	No
3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		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? *If "Yes," complete Schedule J for such individual*	4		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? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
LINDA BARRACK 3100 PALM ROYALE #1015 LA QUINTA CA 92253	CONSULTING	168,806
CORD MEDIA COMPANY 43645 MONTEREY AVENUE PALM DESERT CA 92260	MARKETING	123,595
PATINO PROTECTIVE SECURITY SERVICE 42215 WASHINGTON ST A323 PALM DESERT CA 92211	SECURITY	107,813

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 3

Part VIII Statement of Revenue

Check 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	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	293,396				
	d Related organizations	1d					
	e Government grants (contributions)	1e	3,588,991				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	4,655,050				
	g Noncash contributions included in lines 1a-1f	1g	$ 1,613,875				
	h **Total.** Add lines 1a–1f			8,537,437			
Program Service Revenue		Business Code					
	2a						
	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)			168,754	1,228		167,526
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
		(i) Real	(ii) Personal				
	6a Gross rents 6a	7,623					
	b Less: rental expenses 6b						
	c Rental inc. or (loss) 6c	7,623					
	d Net rental income or (loss)			7,623	7,623		
	7a Gross amount from sales of assets other than inventory 7a	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales exps. 7b						
	c Gain or (loss) 7c						
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including $ 293,396 of contributions reported on line 1c). See Part IV, line 18	8a	101,843				
	b Less: direct expenses	8b	77,795				
	c Net income or (loss) from fundraising events			24,048			
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	10a	397,963				
	b Less: cost of goods sold	10b	9,560				
	c Net income or (loss) from sales of inventory			388,403	388,403		
Miscellaneous Revenue		Business Code					
	11a MISC REVENUE		623990	12,576	12,576		
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a–11d			12,576			
	12 **Total revenue.** See instructions			9,138,841	409,830	0	167,526

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	340,813	288,846	23,030	28,937
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	3,500,330	3,022,197	216,618	261,515
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	306,123	259,446	20,686	25,991
10 Payroll taxes	287,278	243,475	19,412	24,391
11 Fees for services (nonemployees):				
a Management				
b Legal	29,956		29,956	
c Accounting	27,700		27,700	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	58,237			58,237
13 Office expenses	434,759	431,978	376	2,405
14 Information technology				
15 Royalties				
16 Occupancy	91,763	86,166		5,597
17 Travel	23,138	8,876	7,444	6,818
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	102,349	39,264	32,927	30,158
20 Interest	183,735	125,990	55,800	1,945
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	424,852	378,058	37,755	9,039
23 Insurance	80,174	65,146	11,082	3,946
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOOD	1,503,928	1,500,036	3,892	
b UTILITIES AND TELEPHONE	500,273	479,639	15,259	5,375
c CONTRACT SERVICES	418,191	71,296	203,282	143,613
d OTHER INCENTIVE EXPENSES	355,821	234,097	112,973	8,751
e All other expenses	614,788	354,819	221,933	38,036
25 **Total functional expenses.** Add lines 1 through 24e	9,284,208	7,589,329	1,040,125	654,754
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 Sheet

Check 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	3,617,670	1	2,491,641
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	704,214	3	1,136,758
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	219,803	9	93,029
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 8,637,913			
	b	Less: accumulated depreciation — 10b: 2,162,189	6,599,194	10c	6,475,724
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11	2,727,334	12	4,143,509
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets	109,778	14	87,832
	15	Other assets. See Part IV, line 11	149,128	15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	14,127,121	16	14,428,493
Liabilities	17	Accounts payable and accrued expenses	426,441	17	595,136
	18	Grants payable		18	
	19	Deferred revenue	132,591	19	255,883
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties	5,122,276	23	5,072,256
	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	120,886	25	98,852
	26	**Total liabilities.** Add lines 17 through 25	5,802,194	26	6,022,127
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	5,418,461	27	5,229,779
	28	Net assets with donor restrictions	2,906,466	28	3,176,587
		Organizations that do not follow FASB ASC 958, check her ☐ and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	8,324,927	32	8,406,366
	33	Total liabilities and net assets/fund balances	14,127,121	33	14,428,493

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,138,841
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,284,208
3	Revenue less expenses. Subtract line 2 from line 1	3	-145,367
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,324,927
5	Net unrealized gains (losses) on investments	5	228,034
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-1,228
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	8,406,366

Part XII Financial Statements and Reporting

Check 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: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a		X
b	Were the organization's financial statements audited by an independent accountant? 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. ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	X	
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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b	X	

SCHEDULE A (Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization

MARTHA'S VILLAGE AND KITCHEN, INC.

Employer identification number

33-0777892

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....

10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations .....

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5,440,924	8,256,743	10,031,981	7,480,154	8,537,437	39,747,239
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	5,440,924	8,256,743	10,031,981	7,480,154	8,537,437	39,747,239
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)						1,459,884
6 **Public support.** Subtract line 5 from line 4						38,287,355

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	5,440,924	8,256,743	10,031,981	7,480,154	8,537,437	39,747,239
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	7,151	864	26,800	107,332	167,526	309,673
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	7,350	4,842			12,576	24,768
11 **Total support.** Add lines 7 through 10						40,081,680
12 Gross receipts from related activities, etc. (see instructions)					12	3,797,314

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))	14	95.52 %
15	Public support percentage from 2022 Schedule A, Part II, line 14	15	94.71 %

16a **33 1/3% support test — 2023.** 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 ☒

b **33 1/3% support test — 2022.** 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 ☐

17a **10%-facts-and-circumstances test — 2023.** 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 ☐

b **10%-facts-and-circumstances test — 2022.** 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 ☐

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 ☐

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or 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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b 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 on 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 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16	Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2023** (line 10c, column (f), divided by line 13, column (f))	17	%
18	Investment income percentage from **2022** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests — 2023.** 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 — 2022.** 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 on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
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.*	1		
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).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
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.*	3b		
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.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
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.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***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.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in* ***Part VI,*** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
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.***	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
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.)*	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 on lines 11b and 11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in* ***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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	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 on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (***see instructions***).*

- a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*
- b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*
- c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a governmental entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer lines 2a and 2b 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 on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***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 lines 3a and 3b 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? *If "Yes" or "No," 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 0.015 of line 3 (for greater amount, see instructions).	**4**		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6 Multiply line 5 by 0.035.	**6**		
7 Recoveries of prior-year distributions	**7**		
8 **Minimum Asset Amount** (add line 7 to line 6)	**8**		

Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	**1**		
2 Enter 0.85 of line 1.	**2**		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	**3**		
4 Enter greater of line 2 or line 3.	**4**		
5 Income tax imposed in prior year	**5**		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	**6**		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required—*provide details in* ***Part VI***)	5	
6	Other distributions (*describe in* ***Part VI***). See instructions.	6	
7	**Total annual distributions.** Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (*provide details in* ***Part VI***). See instructions.	8	
9	Distributable amount for 2022 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E – Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required–*explain in* ***Part VI***). See instructions.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018			
b	From 2019			
c	From 2020			
d	From 2021			
e	From 2022			
f	**Total** of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* ***Part VI.*** See instructions.			
7	**Excess distributions carryover to 2024.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2019			
b	Excess from 2020			
c	Excess from 2021			
d	Excess from 2022			
e	Excess from 2023			

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.)

PART II, LINE 10 - OTHER INCOME DETAIL

MISCELLANEOUS INCOME $ 24,768

SUPPLEMENTAL INFORMATION

MISC INCOME DETAIL:

TOTAL	2023	2022	2021	2020	2019
$24,768	$12,576	$0	$0	$4,842	$7,350

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

2023

Open to Public Inspection

Name of the organization

MARTHA'S VILLAGE AND KITCHEN, INC.

Employer identification number

33-0777892

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? ☐ Yes ☐ 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? ☐ Yes ☐ No

Part II Conservation Easements

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

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

☐ Preservation of land for public use (for example, recreation or education)
☐ Preservation of a historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

		Held at the End of the Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included on line 2a	2c	
d Number of conservation easements included on line 2c acquired after July 25, 2006, 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 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

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

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

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

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

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

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

b Assets included in Form 990, Part X $

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

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

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange program
- 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a Board designated or quasi-endowment ____ %
- b Permanent endowment ____ %
- c Term endowment ____ %

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

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

		Yes	No
(i) Unrelated organizations?	3a(i)		
(ii) Related organizations?	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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		380,434		380,434
b Buildings		6,025,135	581,700	5,443,435
c Leasehold improvements		384,764	307,894	76,870
d Equipment		1,528,534	1,119,908	408,626
e Other		319,046	152,687	166,359
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				6,475,724

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 INVESTMENTS	4,143,509	MARKET
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, line 12, col. (B))*	4,143,509	

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. *(Column (b) must equal Form 990, Part X, line 13, col. (B))*		

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, line 15, col. (B))*	

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CURRENT - LEASE LIABILITY PAYABLE	87,833
(3) ACCRUED INTEREST	11,019
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	98,852

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

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	9,563,737
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	228,034		
b	Donated services and use of facilities	2b	120,295		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	77,795		
e	Add lines **2a** through **2d**			2e	426,124
3	Subtract line **2e** from line **1**			3	9,137,613
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	1,228		
c	Add lines **4a** and **4b**			4c	1,228
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	9,138,841

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	9,482,298
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	120,295		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	77,795		
e	Add lines **2a** through **2d**			2e	198,090
3	Subtract line **2e** from line **1**			3	9,284,208
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	
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	9,284,208

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 XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER

SPECIAL EVENTS EXPENSES IN REVENUE $ 77,795

PART XI, LINE 4B - REVENUE AMOUNTS INCLUDED ON RETURN - OTHER

K-1 DIVIDEND INCOME $ 1,228

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER

SPECIAL EVENTS IN REVENUE $ 77,795

Part XIII Supplemental Information *(continued)*

SCHEDULE G (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization

MARTHA'S VILLAGE AND KITCHEN, INC.

Employer identification number

33-0777892

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

2a 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 fund-raiser have custody or control of contributions? Yes	No	**(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
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
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 5K EVENT (event type)	(b) Event #2 OTHER EVENT (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	345,239	50,000		395,239
	2 Less: Contributions	243,396	50,000		293,396
	3 Gross income (line 1 minus line 2)	101,843			101,843
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	77,795			77,795
	10 Direct expense summary. Add lines 4 through 9 in column (d)				77,795
	11 Net income summary. Subtract line 10 from line 3, column (d)				24,048

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	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

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

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

b If "No," explain:

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

b If "Yes," explain:

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	**13a**	%
b	An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name

Address

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

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

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

Name

Address

16 Gaming manager information:

Name

Gaming manager compensation $

Description of services provided

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

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

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

Part IV Supplemental Information.

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

SCHEDULE L
(Form 990)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.
Attach to Form 990 or Form 990-EZ.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization

MARTHA'S VILLAGE AND KITCHEN, INC.

Employer identification number

33-0777892

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	(d) Corrected? No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 . . . . . $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . $

Part II Loans to and/or From Interested Persons

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org.? To	(d) Loan to or from the org.? From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	(g) In default? No	(h) Approved by board or committee? Yes	(h) Approved by board or committee? No	(i) Written agreement? Yes	(i) Written agreement? No
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total						$							

Part III Grants or Assistance Benefiting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part IV Business Transactions Involving Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org. revenues? Yes	(e) Sharing of org. revenues? No
(1)	BRIAN AMIDEI	VICE-CHAIRMAN		EVENT TITLE SPONSOR		X
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L. See instructions.

SCHEDULE L, PART V - ADDITIONAL INFORMATION

BOARD MEMBER – 5K TITLE SPONSOR

IN 2018, THE BOARD OF DIRECTORS MADE A RESOLUTION TO NAME THE ANNUAL 5K EVENT THE "FORTEM FINANCIAL THANKSGIVING DAY 5K BENEFITING MARTHA'S VILLAGE AND KITCHEN" FOR SIX YEARS COMMENCING IN 2018, IN HONOR OF ONE OF THE LONG-TERM BOARD MEMBERS. FORTEM FINANCIAL IS A COMPANY OWNED BY THIS BOARD MEMBER.

THE BOARD OF DIRECTORS MADE THIS DECISION AS A SYMBOL OF APPRECIATION FOR ALL THE EFFORTS THE BOARD MEMBER HAS DONE TO HELP THE ORGANIZATION GROW AND PROSPER OVER THE YEARS. FORTEM FINANCIAL IS ALSO THE BROKER FOR ONE OF THE ORGANIZATION'S INVESTMENT ACCOUNTS AND THERE WERE APPROXIMATELY $24,000 IN FEES PAID TO FORTEM FINANCIAL. DURING 2024, THE ORGANIZATION WILL NO LONGER UTILIZE FORTEM FINANCIAL.

BOARD MEMBER – MARKETING, WEBSITE, AND SOCIAL MEDIA SERVICES

THE ORGANIZATION CONTRACTED WITH CORD MEDIA COMPANY, TO PROVIDE MARKETING, WEBSITE AND SOCIAL MEDIA SERVICES. CORD MEDIA COMPANY IS OWNED BY A BOARD MEMBER. PAYMENTS TO CORD MEDIA COMPANY TOTALED $123,595 AND $12,850 FOR THE

Part IV Business Transactions Involving Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org. revenues? Yes	(e) Sharing of org. revenues? No
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L. See instructions.

YEARS ENDED DECEMBER 31, 2023 AND 2022, RESPECTIVELY. DURING 2024, THE ORGANIZATION WILL NO LONGER UTILIZE CORD MEDIA.

BRIAN AMIDEI AND BLAINE AMIDEI ARE FATHER AND DAUGHTER; BRIAN AMIDEI OWNS FORTEM FINANCIAL, HANDLES OUR INVESTMENTS; JONAS UDCOFF OWNS CORD MEDIA, OUR ADVERTISING VENDOR; HOWARD LINCOLN PERFORMED FUNDRAISING SERVICES.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2023

Open To Public Inspection

Name of the organization

MARTHA'S VILLAGE AND KITCHEN, INC.

Employer identification number

33-0777892

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	X		776,842	THRIFT SHOP VALUE
6	Cars and other vehicles	X	1	9,560	FMV
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	3	1,020,990	FMV
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (GIFT CARDS)	X	2	21,750	FMV
26	Other (ADVERTISING)	X	2	120,295	FMV
27	Other (INFANT SUPPLIES)	X	1	55,956	FMV
28	Other ( )				

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

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		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?	31		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		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.			

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)	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to *www.irs.gov/Form990* for the latest information.	2023 Open to Public Inspection

Name of the organization	Employer identification number
MARTHA'S VILLAGE AND KITCHEN, INC.	33-0777892

FORM 990, PART III, LINE 2

NEW HOMELESS SHELTER AND ADDITIONAL SERVICES-

THE ORGANIZATION OPENED A NEW DESERT HOT SPRINGS HOMELESS SHELTER. ALSO, STARTED TO PROVIDE ADDITIONAL SERVICES IN PALM SPRINGS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

RETAIL EXPENSES $497,535 -

THE ORGANIZATION OPERATES A RETAIL THRIFT STORE AS A COMPONENT OF FUNDRAISING. PROCEEDS FROM SALES OF DONATED USED FURNITURE, CLOTHING, AND OTHER ITEMS ARE USED TO SUPPORT THE ORGANIZATION'S HOMELESS HOUSING, FOOD AND CHARITY PROGRAMS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

A DRAFT OF THE FULL FORM IS REVIEWED BY THE FINANCE AND AUDIT COMMITTEES AND ANY CHANGES ARE MADE AS NECESSARY. THE UPDATES PUBLIC DISCLOSURE COPY OF THE FORM 990 IS CIRCULATED TO ALL BOARD MEMBERS PRIOR TO THE FINAL SUBMISSION.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THROUGHOUT THE YEAR ANY MEMEBER WHO HAS A POTENTIAL FOR ANY TANGENTIAL CONFLICTS IS EXCLUDED FROM VOTES THAT ARE RELATED TO THE CONFLICT. IN SOME SITUATIONS THEY ARE ALSO ASKED TO LEAVE THE ROOM DURING DISCUSSION AND MAY BE EXCLUDED FROM DISTRIBUTED COMMUNUCATION. ADDITIONALLY, WHILE IT IS JUST A SMALL PART OF ANY POTENTIAL CONFLICT, BOARD ROSTERS THAT ARE DISTRIBUTED TO THE

Name of the organization: MARTHA'S VILLAGE AND KITCHEN, INC.

Employer identification number: 33-0777892

BOARD AND KEY STAFF INCLUDE THE WORK AFFILIATION OF THE MEMBER TO IDENTIFY ANY INSTANCES WHERE THE POTENTIAL FOR CONFLICT MAY BE PRESENT.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

ON AN ANNUAL BASIS THE BOARD PERFORMS A REVIEW PROCESS AND MAKES RECOMMENDATIONS REGARDING THE COMPENSATION OF THE CEO. THE HUMAN RESOURCE DEPARTMENT COLLECTS INFORMATION TO DETERMINE THE SALARY RANGES OF COMPARABLE POSITIONS AND PROVIDES THAT RESEARCH WHEN SALARY DELIBERATIONS ARE MADE.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

COMPENSATION PROCESS FOR THE ORGANIZATION HAS AN ANNUAL REVIEW PROCESS FOR EACH INDIVIDUAL. THE HUMAN RESOURCE DEPARTMENT COLLECTS INFORMATION TO DETERMINE THE SALARY RANGES OF COMPARABLE POSITIONS WITHIN THE ORGANIZATION AND PROVIDES THAT RESEARCH WHEN SALARY DELIBERATIONS ARE MADE.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

THE ORGANIZATION'S GOVERNING DOCS, POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

SPECIAL EVENTS EXPENSES IN REVENUE	$	77,795
K-1 DIVIDEND INCOME	$	-1,228
SPECIAL EVENTS IN REVENUE	$	-77,795
TOTAL	$	-1,228

ORGANIZATION RECEIVED K-1 DIVIDEND INCOME - TAX EXEMPT.

Form **990**

Two Year Comparison Report

For calendar year 2023, or tax year beginning , ending

2022 & 2023

Name

MARTHA'S VILLAGE AND KITCHEN, INC.

Taxpayer Identification Number

33-0777892

			2022	2023	Differences
Revenue	1. Contributions, gifts, grants	1.	4,484,563	4,948,446	463,883
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.	2,995,591	3,588,991	593,400
	4. Program service revenue	4.			
	5. Investment income	5.	107,332	168,754	61,422
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.	-1,026		1,026
	8. Net income or (loss) from fundraising events	8.	-105,186	24,048	129,234
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.	360,943	388,403	27,460
	11. Other revenue	11.	12,074	20,199	8,125
	12. **Total revenue.** Add lines 1 through 11	12.	7,854,291	9,138,841	1,284,550
Expenses	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15.	181,146	340,813	159,667
	16. Salaries, other compensation, and employee benefits	16.	3,823,953	4,093,731	269,778
	17. Professional fundraising fees	17.	45,631		-45,631
	18. Other professional fees	18.	61,757	57,656	-4,101
	19. Occupancy, rent, utilities, and maintenance	19.	145,139	91,763	-53,376
	20. Depreciation and Depletion	20.	395,235	424,852	29,617
	21. Other expenses	21.	3,212,300	4,275,393	1,063,093
	22. **Total expenses.** Add lines 13 through 21	22.	7,865,161	9,284,208	1,419,047
	23. **Excess or (Deficit).** Subtract line 22 from line 12	23.	-10,870	-145,367	-134,497
Other Information	24. Total exempt revenue	24.	7,854,291	9,138,841	1,284,550
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26.	479,323	577,356	98,033
	27. Total assets	27.	14,127,121	14,428,493	301,372
	28. Total liabilities	28.	5,802,194	6,022,127	219,933
	29. Retained earnings	29.	8,324,927	8,406,366	81,439
	30. Number of voting members of governing body	30.	13	9	
	31. Number of independent voting members of governing body	31.	13	9	
	32. Number of employees	32.	152	165	
	33. Number of volunteers	33.	303	2443	

Form **990**

Tax Return History

2023

Name

MARTHA'S VILLAGE AND KITCHEN, INC.

Employer Identification Number

33-0777892

	2019	2020	2021	2022	2023	2024
Contributions, gifts, grants			10,031,981	7,480,154	8,537,437	
Membership dues						
Program service revenue			2,765			
Capital gain or loss			-4,075	-1,026		
Investment income			26,800	107,332	168,754	
Fundraising revenue (income/loss)			-690	-105,186	24,048	
Gaming revenue (income/loss)						
Other revenue			408,548	373,017	408,602	
Total revenue			10,465,329	7,854,291	9,138,841	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.			313,487	181,146	340,813	
Other compensation			3,559,555	3,823,953	4,093,731	
Professional fees			91,699	107,388	57,656	
Occupancy costs			118,437	145,139	91,763	
Depreciation and depletion			358,093	395,235	424,852	
Other expenses			2,630,329	3,212,300	4,275,393	
Total expenses			7,071,600	7,865,161	9,284,208	
Excess or (Deficit)			3,393,729	-10,870	-145,367	
Total exempt revenue			10,465,329	7,854,291	9,138,841	
Total unrelated revenue						
Total excludable revenue			434,038	479,323	577,356	
Total Assets			14,149,986	14,127,121	14,428,493	
Total Liabilities			5,669,520	5,802,194	6,022,127	
Net Fund Balances			8,480,466	8,324,927	8,406,366	

Taxable Interest on Investments

Description	Amount	Unrelated Business	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs ($ or %)
TAXABLE INTEREST						
	$ 167,526		14			
TOTAL	$ 167,526					

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
REPAIRS AND MAINTENANCE	$ 169,958	$ 169,589	$ 248	$ 121
PROGRAM - SETTLEMENT	150,000		150,000	
EQUIPMENT/MINOR PURCHASES	119,756	117,146	1,515	1,095
CREDIT CARDS/MERCHANT EXP	103,481	39,699	48,291	15,491
MISC EXPENSES	68,032	26,096	21,879	20,057
POSTAGE	3,561	2,289		1,272
TOTAL	$ 614,788	$ 354,819	$ 221,933	$ 38,036

Schedule A, Part II, Line 1(e)

Description	Amount
VARIOUS DONATIONS AND ITEMS	$ 352,884
VARIOUS DONATIONS AND ITEMS	620,355
FOOD DONATIONS	394,416
VARIOUS DONORS	55,956
VARIOUS CONTRIBUTIONS	519,486
IEHP - RECUPERATIVE	
CASH CONTRIBUTION	759,202
JOAN E HAMILTON LIVING TRUST	
CASH CONTRIBUTION	22,180
PIERRE MENARD LIVING TRUST	
CASH CONTRIBUTION	50,000
HOUSTON FAMILY FOUNDATION	
CASH CONTRIBUTION	100,000
PETER HENRY BAKER	
CASH CONTRIBUTION	45,000
HENRY BURDICK - CHARLES SCHWAB BN	
CASH CONTRIBUTION	40,000
INLAND EMPIRE COMMUNITY FOUNDATION	
CASH CONTRIBUTION	97,491
THE DJM & CMJR CHARITABLE FOUNDATION	
CASH CONTRIBUTION	25,000
DUNLAP FOUNDATION	
CASH CONTRIBUTION	40,000
HOEHN FAMILY CHARITABLE TRUST	
CASH CONTRIBUTION	40,000
MR. JONATHAN ESPY	
CASH CONTRIBUTION	35,000
WALMART/SAM'S CLUB	
CASH CONTRIBUTION	15,000
ANITA & ANTON GARNIER FAMILY TRUST	
CASH CONTRIBUTION	25,487
BIGHORN GOLF CLUB CHARITIES	
CASH CONTRIBUTION	10,000
EVANS FAMILY CHARITABLE TRUST	
CASH CONTRIBUTION	20,000
MARION PARK FOUNDATION GRANT	
CASH CONTRIBUTION	15,000
TOYOTA OF THE DESERT	
CASH CONTRIBUTION	22,000
EVERI PAYMENTS, INC.	

Schedule A, Part II, Line 1(e) (continued)

Description	Amount
CASH CONTRIBUTION	$ 27,285
MARTIN & ANN GOLDSTEIN FAMILY FOUNDA	
CASH CONTRIBUTION	7,945
PACIFIC PREMIER BANK	
CASH CONTRIBUTION	10,000
THE KILROY FAMILY FUND	
CASH CONTRIBUTION	10,000
TWENTY-NINE PALMS BAND	
CASH CONTRIBUTION	43,197
ALFRED & ANN VAN DOMELEN	
CASH CONTRIBUTION	10,000
CULLEN FAMILY FOUNDATION	
CASH CONTRIBUTION	10,000
CHANDI GROUP USA	
CASH CONTRIBUTION	32,382
LYNDALE MANOR	
CASH CONTRIBUTION	10,000
HIGHLAND STREET FOUNDATION	
CASH CONTRIBUTION	27,500
STEPHANIE R. WERNIG	
CASH CONTRIBUTION	6,000
PAUL & CAROL HILL FOUNDATION	
CASH CONTRIBUTION	5,000
FRED AND PATTY HOPP FOUNDATION	
CASH CONTRIBUTION	5,000
AGUA CALIENTE BAND OF CAHUILLA INDIA	
CASH CONTRIBUTION	7,504
DESERT HEALTHCARE FOUNDATION	
CASH CONTRIBUTION	128,123
STATE OF CALIFORNIA DEPT OF SOC SVC	
CASH CONTRIBUTION	321,849
CITY OF INDIO	
CASH CONTRIBUTION	78,690
CITY OF RANCHO MIRAGE	
CASH CONTRIBUTION	5,000
BOMBAS SOCKS	
BOMBAS SOCKS	42,000
RALPHS	
GIFT CARDS	11,700
CORD MEDIA LLC	

Schedule A, Part II, Line 1(e) (continued)

Description	Amount
ADVERTISING	$ 6,500
ALBERTSONS	
GIFT CARDS	10,050
INTERNAL REVENUE SERVICE - ERC	
CASH CONTRIBUTION	434,505
FRANZISKA A PERLMAN REV TRUST	
CASH CONTRIBUTION	5,000
JIM & CAROLYN MILGARD	
CASH CONTRIBUTION	5,000
JOHN G SCHREIBER	
CASH CONTRIBUTION	5,000
KIRWAN FAMILY FOUNDATION/ ROGER T KI	
CASH CONTRIBUTION	5,000
RAYMON R. AND MARTHA G. WERNIG FOUND	
CASH CONTRIBUTION	5,000
ROBERT A UHLENHOP	
CASH CONTRIBUTION	5,000
ROSEMARY ORTEGA	
CASH CONTRIBUTION	5,000
SAN MANUEL BAND OF MISSION INDIANS	
CASH CONTRIBUTION	5,000
SEAN & LESLIE MCGRATH	
CASH CONTRIBUTION	5,000
TED MILLER AND DAISY HOUSEL-MILLER C	
CASH CONTRIBUTION	5,000
THE ZANTMAN RESIDUAL TRUST	
CASH CONTRIBUTION	5,000
WALTER CLARK LEGAL GROUP/ JOSEPH PRI	
CASH CONTRIBUTION	5,000
WILLIAM M LANE -TORRAY LLC	
CASH CONTRIBUTION	5,000
JD WILLIAMSONII CHARITABLE FUND OF T	
CASH CONTRIBUTION	5,500
EDWARD MCCULLOUGH	
CASH CONTRIBUTION	6,451
ROBERT W KEITH / MORGAN STANLEY	
CASH CONTRIBUTION	6,898
ALPHA GAMMA DELTA FOUNDATION, INC	
CASH CONTRIBUTION	7,500
GARRY ALBERT POWELL	

Schedule A, Part II, Line 1(e) (continued)

Description	Amount
CASH CONTRIBUTION	$ 7,875
ERICA L HEDLUND - LPL FINANCIAL	
CASH CONTRIBUTION	8,261
ARTHUR RAUCH	
CASH CONTRIBUTION	8,525
BRUCE & REGAN DENNIS	
CASH CONTRIBUTION	10,000
DANIEL J O'DONAVAN & DIANNE O'DONAVA	
CASH CONTRIBUTION	10,000
ELIZABETH SEALY	
CASH CONTRIBUTION	10,000
MICHAEL J NAPOLI JR	
CASH CONTRIBUTION	10,000
MV LESTER	
CASH CONTRIBUTION	10,000
PAUL AND JOANN ELO CHARITABLE FUND	
CASH CONTRIBUTION	10,000
ROGER SNELLENBERGER REVOCABLE TRUST	
CASH CONTRIBUTION	10,000
ROSENBERG FOUNDATION	
CASH CONTRIBUTION	10,000
US BANK	
CASH CONTRIBUTION	10,000
JANICE PARKER	
CASH CONTRIBUTION	12,500
THE CHAMPIONS VOLUNTEER FOUNDATION	
CASH CONTRIBUTION	15,000
STATE OF CALIFORNIA EMPLOYMENT DEVEL	
CASH CONTRIBUTION	16,100
ROBERT G ACKER / PACIFIC LIFE ANNUIT	
CASH CONTRIBUTION	19,485
LIVING TRUST OF JOHN PATRICK MULCAH	
CASH CONTRIBUTION	20,000
THE COETA AND DONALD BARKER FOUNDATI	
CASH CONTRIBUTION	20,000
THE MILAS FOUNDATION	
CASH CONTRIBUTION	20,000
THE MANILOW FUND	
CASH CONTRIBUTION	20,555
EISENHOWER HEALTH FOUNDATION	

Schedule A, Part II, Line 1(e) (continued)

Description	Amount
CASH CONTRIBUTION	$ 25,000
TENET HEALTH	
CASH CONTRIBUTION	25,000
DESERT COMMUNITY FOUNDATION/ CV GIVI	
CASH CONTRIBUTION	25,721
DODY JERNSTEDT FUND - INLAND EMPIRE	
CASH CONTRIBUTION	27,960
JONATHAN AND AMY POORVU	
CASH CONTRIBUTION	30,000
THE KLUNGNESS FAMILY FOUNDATION, INC	
CASH CONTRIBUTION	30,000
WG CHRISTIANSON FOUNDATION	
CASH CONTRIBUTION	40,000
THEODORE J ROBLES REVOCABLE TRUST	
CASH CONTRIBUTION	47,500
NANCY PEROT	
CASH CONTRIBUTION	50,000
REGIONAL ACCESS PROJECT FOUNDATION,	
CASH CONTRIBUTION	50,000
CALIFORNIA COMMUNITY FOUNDATION	
CASH CONTRIBUTION	75,000
CITY OF DESERT HOT SPRINGS	
CASH CONTRIBUTION	130,315
IMPACT THROUGH GOLF FOUNDATION C/O S	
CASH CONTRIBUTION	150,000
DEAN L AND ROSEMARIE BUNTROCK FOUNDA	
CASH CONTRIBUTION	250,000
CITY OF PALM SPRINGS	
CASH CONTRIBUTION	381,560
RIVERSIDE COUNTY OFFICE OF EDUCATION	
CASH CONTRIBUTION	1,390,331
RIVERSIDE COUNTY TREASURER	
CASH CONTRIBUTION	611,317
5K EVENT	
CASH CONTRIBUTION	123,382
INKIND	6,219
INKIND SERVICES	113,795
OTHER EVENT	
CASH CONTRIBUTION	50,000

Schedule A, Part II, Line 1(e) (continued)

Description	Amount
TOTAL	$ 8,537,437

Schedule A, Part II, Line 5 - Excess Gifts

Donor Name	Total	Excess
IEHP - RECUPERATIVE	$ 1,672,821	$ 871,187
JOAN E HAMILTON LIVING TRUST	327,850	
PIERRE MENARD LIVING TRUST	200,000	
HOUSTON FAMILY FOUNDATION	200,000	
PETER HENRY BAKER	145,000	
HENRY BURDICK - CHARLES SCHWAB BN	130,000	
INLAND EMPIRE COMMUNITY FOUNDATION	153,171	
THE DJM & CMJR CHARITABLE FOUNDATION	75,000	
DUNLAP FOUNDATION	90,000	
HOEHN FAMILY CHARITABLE TRUST	80,000	
MR. JONATHAN ESPY	71,800	
WALMART/SAM'S CLUB	47,500	
ANITA & ANTON GARNIER FAMILY TRUST	49,987	
BIGHORN GOLF CLUB CHARITIES	30,000	
EVANS FAMILY CHARITABLE TRUST	35,000	
MARION PARK FOUNDATION GRANT	28,000	
TOYOTA OF THE DESERT	33,000	
EVERI PAYMENTS, INC.	38,192	
MARTIN & ANN GOLDSTEIN FAMILY FOUNDA	18,445	
PACIFIC PREMIER BANK	20,000	
THE KILROY FAMILY FUND	20,000	
TWENTY-NINE PALMS BAND	53,197	
ALFRED & ANN VAN DOMELEN	20,000	
CULLEN FAMILY FOUNDATION	20,000	
CHANDI GROUP USA	42,382	
LYNDALE MANOR	19,000	
HIGHLAND STREET FOUNDATION	35,000	
STEPHANIE R. WERNIG	11,000	
PAUL & CAROL HILL FOUNDATION	10,000	
FRED AND PATTY HOPP FOUNDATION	10,000	
AGUA CALIENTE BAND OF CAHUILLA INDIA	12,504	
DESERT HEALTHCARE FOUNDATION	203,625	
STATE OF CALIFORNIA DEPT OF SOC SVC	540,509	
CITY OF INDIO	122,857	
CITY OF RANCHO MIRAGE	5,000	
CATALYST STRENGTH FITNESS	5,800	
KESQ	213,845	
BOMBAS SOCKS	107,000	
RALPHS	11,700	
CORD MEDIA LLC	15,130	
ALBERTSONS	10,050	
TOYOTA OF THE DESERT	11,871	
INTERNAL REVENUE SERVICE - ERC	441,376	
FRANZISKA A PERLMAN REV TRUST	5,000	
JIM & CAROLYN MILGARD	5,000	
JOHN G SCHREIBER	5,000	
KIRWAN FAMILY FOUNDATION/ ROGER T KI	5,000	
RAYMON R. AND MARTHA G. WERNIG FOUND	5,000	
ROBERT A UHLENHOP	5,000	
ROSEMARY ORTEGA	5,000	
SAN MANUEL BAND OF MISSION INDIANS	5,000	
SEAN & LESLIE MCGRATH	5,000	
TED MILLER AND DAISY HOUSEL-MILLER C	5,000	
THE ZANTMAN RESIDUAL TRUST	5,000	
WALTER CLARK LEGAL GROUP/ JOSEPH PRI	5,000	
WILLIAM M LANE -TORRAY LLC	5,000	
JD WILLIAMSONII CHARITABLE FUND OF T	5,500	

Schedule A, Part II, Line 5 - Excess Gifts (continued)

Donor Name	Total	Excess
EDWARD MCCULLOUGH	$ 6,451	$
ROBERT W KEITH / MORGAN STANLEY	6,898	
ALPHA GAMMA DELTA FOUNDATION, INC	7,500	
GARRY ALBERT POWELL	7,875	
ERICA L HEDLUND - LPL FINANCIAL	8,261	
ARTHUR RAUCH	8,525	
BRUCE & REGAN DENNIS	10,000	
DANIEL J O'DONAVAN & DIANNE O'DONAVA	10,000	
ELIZABETH SEALY	10,000	
MICHAEL J NAPOLI JR	10,000	
MV LESTER	10,000	
PAUL AND JOANN ELO CHARITABLE FUND	10,000	
ROGER SNELLENBERGER REVOCABLE TRUST	10,000	
ROSENBERG FOUNDATION	10,000	
US BANK	10,000	
JANICE PARKER	12,500	
THE CHAMPIONS VOLUNTEER FOUNDATION	15,000	
STATE OF CALIFORNIA EMPLOYMENT DEVEL	16,100	
ROBERT G ACKER / PACIFIC LIFE ANNUIT	19,485	
LIVING TRUST OF JOHN PATRICK MULCAH	20,000	
THE COETA AND DONALD BARKER FOUNDATI	20,000	
THE MILAS FOUNDATION	20,000	
THE MANILOW FUND	20,555	
EISENHOWER HEALTH FOUNDATION	25,000	
TENET HEALTH	25,000	
DESERT COMMUNITY FOUNDATION/ CV GIVI	25,721	
DODY JERNSTEDT FUND - INLAND EMPIRE	27,960	
JONATHAN AND AMY POORVU	30,000	
THE KLUNGNESS FAMILY FOUNDATION, INC	30,000	
WG CHRISTIANSON FOUNDATION	40,000	
THEODORE J ROBLES REVOCABLE TRUST	47,500	
NANCY PEROT	50,000	
REGIONAL ACCESS PROJECT FOUNDATION,	50,000	
CALIFORNIA COMMUNITY FOUNDATION	75,000	
CITY OF DESERT HOT SPRINGS	130,315	
IMPACT THROUGH GOLF FOUNDATION C/O S	150,000	
DEAN L AND ROSEMARIE BUNTROCK FOUNDA	250,000	
CITY OF PALM SPRINGS	606,827	
RIVERSIDE COUNTY OFFICE OF EDUCATION	1,390,331	588,697
RIVERSIDE COUNTY TREASURER	611,317	
TOTAL	$ 9,302,233	$ 1,459,884

Schedule A, Part II, Line 8(e)

Description	Amount
TAXABLE INTEREST	$ 167,526
TOTAL	$ 167,526

5K EVENT

Other Direct Fundraising or Gaming Expenses

Description	Amount
DIRECT EVENT EXPENSES	$ 15,065
PROMOTION ITEMS	19,605
ADVERTISING	4,400
INSURANCE	2,288
CONTRACT SERVICES	34,361
PRINTING	1,032
POSTAGE	27
OFFICE	94
TRAVEL	188
MEALS AND ENTERTAINMENT	344
DONOR RELATIONS	391
TOTAL	$ 77,795