Form **990-PF**

EXTENDED TO NOVEMBER 15, 2024 Return of Private Foundation

Form 990-PF Department of the Treasury nternal Revenue Service	2023 Open to Public Inspection			
For calendar year 2023 o	or tax year beginning , and	ending		
Name of foundation MARTHA'S V ASSOCIATIO	INEYARD CAMP MEETING N		A Employer identification no 04–2103815	umber
	ox number if mail is not delivered to street address) PARK , PO BOX 1685	Room/suite	B Telephone number (508) 693–0	525
.			-	

80 TRINITY PARK, PO BOX 1685			(508) 693-0525					
	City or town, state or province, country, and ZIP or foreign postal code OAK BLUFFS, MA 02557				C If exemption application is pending, check here			
G Check all that apply: Initial return Final return			Initial return of a fo	rmer public charity	D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation			
		Address change	Name change					
H C	_	type of organization: X Section 501(c)(3) ex			E If private foundation stat			
			Other taxable private founda	X Accrual	under section 507(b)(1)			
		arket value of all assets at end of year J Accountin	-		F If the foundation is in a under costion 507(b)(1)			
(11	om i \$	Part II, col. (c), line 16)	ner (specify) un (d)must be on cash basi	<u>e)</u>	under section 507(b)(1)	(B), check here X		
Pa	nrt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes		
		necessarily equal the amounts in column (a).)		income	income	(cash basis only)		
	1	Contributions, gifts, grants, etc., received	2,178,056.					
	2	Check if the foundation is not required to attach Sch. B Interest on savings and temporary	2,118.	2,118.	2 110	STATEMENT 1		
	3	cash investments	88,722.	88,722.		STATEMENT 2		
	4	Dividends and interest from securities	289,804.	289,804.		STATEMENT 3		
	Da h	Gross rents	209,004.	209,004.	209,004.	STATEMENT 5		
			227,151.			STATEMENT 4		
ne	Ua h	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a	227,191.					
Revenue	7	Capital gain net income (from Part IV, line 2)		223,651.				
Be	8	Net short-term capital gain			223,651.			
	9	Income modifications						
	10a	Gross sales less returns 37,842.				STATEMENT 5		
	b	Gross sales less returns and allowances 37,842. Less: Cost of goods sold 17,118.						
		Gross profit or (loss)	20,724.		20,724.			
	11	Other income	997,334.	0.	997,334.	STATEMENT 6		
	12	Total. Add lines 1 through 11	3,803,909.	604,295.	1,622,353.			
	13	Compensation of officers, directors, trustees, etc.	152,800.	0.	0.	152,800.		
	14	Other employee salaries and wages	231,189.	0.	0.	244,940.		
	15	Pension plans, employee benefits	58,844.	0.	0.	59,134.		
ses	16a	Legal fees STMT 7	7,745.	0.	7,745.	0.		
Expenses	b	Accounting fees STMT 8	65,189.	0.	0.	64,524.		
	C	Other professional fees STMT 9	53,047.	28,771.	53,047.	0.		
trative	17	Interest	53,763.	0.	53,763.	0.		
tral		Taxes STMT 10	107,470.	0.	107,470.	0.		
Administ	19	Depreciation and depletion	131,731.	0.	131,731.			
ц	20	Occupancy						
۲ P	21	Travel, conferences, and meetings Printing and publications	2,199.	0.	2,199.	0.		
l an	22	Other expenses STMT 11	507,119.	0.	5,260.	515,448.		
Operating and	23	Total operating and administrative	507,115.	0.	5,200.	515,110.		
era	24	expenses. Add lines 13 through 23	1,371,096.	28,771.	361,215.	1,036,846.		
ő	25	Contributions, gifts, grants paid	14,000.			14,000.		
	26	Total expenses and disbursements.						
_		Add lines 24 and 25	1,385,096.	28,771.	361,215.	1,050,846.		
	27	Subtract line 26 from line 12:	-		-			
	a	Excess of revenue over expenses and disbursements	2,418,813.					
	b	Net investment income (if negative, enter -0-)		575,524.				
	c	Adjusted net income (if negative, enter -0-)			1,261,138.			

OMB No. 1545-0047

990-PF (Beginning of year	End of	2103815 Pa
rt II E	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
d Orah	· · ·	74,241.	709,623.	709,620
	- non-interest-bearing	340,150.	119,914.	119,91
	igs and temporary cash investments	340,150.	119,914.	119,91
	unts receivable2,761.	01 405	0.7.1	0
	allowance for doubtful accounts	21,425.	2,761.	2,76
-	jes receivable			
	allowance for doubtful accounts		1 000 440	1 0 0 0 1 1
5 Grant	ts receivable		1,839,449.	1,839,44
6 Recei	ivables due from officers, directors, trustees, and other			
	ialified persons			
7 Other no	otes and loans receivable			
Less:	allowance for doubtful accounts			
8 Inven	itories for sale or use	9,176.	18,192.	18,19
	aid expenses and deferred charges	31,416.	42,493.	42,49
	tments - U.S. and state government obligations $$ STMT $$ 1.2 $$	1,666,056.	426,416.	426,41
b Invest	tments - corporate stock			
	tments - corporate bonds			
	nents - land, buildings, and equipment: basis			
	ccumulated depreciation			2,870,00
	tments - mortgage loans			
13 Invest	tments - other STMT 13	1,521,907.	547,983.	547,98
14 Land.	, buildings, and equipment: basis 3, 388, 218.			
Less: ac	ccumulated depreciation 1,084,335.	2,308,662.	2,303,883.	30,415,66
15 Other	assets (describe STATEMENT 14)	670,062.	6,228,438.	6,228,43
	assets (to be completed by all filers - see the	,		- , ,
	uctions. Also, see page 1, item I)	6,643,095.	12,239,152.	43,220,93
	unts payable and accrued expenses	103,943.	2,249,990.	
	ts payable			
	red revenue	1,446,184.	1,402,317.	
	from officers, directors, trustees, and other disqualified persons			
	gages and other notes payable	681,750.	1,689,256.	
		001,750.	1,005,250.	
	r liabilities (describe))			
00 Tetel	liabilities (add lines 17 through 20)	2,231,877.	5,341,563.	
	liabilities (add lines 17 through 22) dations that follow FASB ASC 958, check here	2,2J1,0//•	J, JII, JUJ.	
	complete lines 24, 25, 29, and 30.	3,987,181.	4,836,316.	
	ssets without donor restrictions	424,037.	2,061,273.	
	ssets with donor restrictions	424,03/•	2,001,2/3.	
	dations that do not follow FASB ASC 958, check here			
	complete lines 26 through 30.			
	al stock, trust principal, or current funds			
	in or capital surplus, or land, bldg., and equipment fund			
	ned earnings, accumulated income, endowment, or other funds	4 411 010		
29 Total	net assets or fund balances	4,411,218.	6,897,589.	
		c c c c c c c c c c c c c c c c c c c	10 000 1-0	
30 Total	liabilities and net assets/fund balances	6,643,095.	12,239,152.	

_			
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29		
	(must agree with end-of-year figure reported on prior year's return)	1	4,411,218.
2	Enter amount from Part I, line 27a	2	2,418,813.
3	Other increases not included in line 2 (itemize) CHANGE IN VALUE BENEFICIAL TRUST	3	101,465.
4	Add lines 1, 2, and 3	4	6,931,496.
5	Decreases not included in line 2 (itemize) UNREALIZED LOSS	5	33,907.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	6,897,589.
			- 000 DE

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	THA'S VINEYARD CA	AMP MEETING			04 010	
	OCIATION and Losses for Tax on Inv	vostmont Incomo			04-210	3815 Page 3
(a) List and describe	the kind(s) of property sold (for exar arehouse; or common stock, 200 shs.	nple, real estate,	(b) How ac P - Purch D - Dona	quired ((c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SALE OF SECURI	· · · · · · · · · · · · · · · · · · ·	,		P		
b						
<u> </u>						
d						
 e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	3		(h) Gain or (loss ((e) plus (f) minus	
a 223,651.						223,651.
b						
C						
d						
e						
Complete only for assets showin	ng gain in column (h) and owned by t	he foundation on 12/31/69.			Gains (Col. (h) gain	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			(k), but not less that Losses (from col. (
a						223,651.
b						
C						
d						
е						
2 Capital gain net income or (net ca	apital loss) { If gain, also enter If (loss), enter -0:	in Part I, line 7 · in Part I, line 7	} 2			223,651.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8, Part I, line 8	ss) as defined in sections 1222(5) an column (c). See instructions. If (loss		}			223,651.
	sed on Investment Incom	e (Section 4940(a), 4	1940(b), or	4948 - s	see instructio	
	described in section 4940(d)(2), chec					•
	letter: $10/13/47$ (att				1	N/A
•	enter 1.39% (0.0139) of line 27b. Ex		•	·····, }		•
	. (b)					
2 Tax under section 511 (domest	tic section 4947(a)(1) trusts and taxa	ble foundations only: others.	enter -0-)	·····)	2	
			,		3	
4 Subtitle A (income) tax (domes	stic section 4947(a)(1) trusts and taxa	able foundations only: others.	enter -0-)		4	
	me. Subtract line 4 from line 3. If zer		,		5	0.
6 Credits/Payments:		,				
•	and 2022 overpayment credited to 20	23 6a		Ο.		
	tax withheld at source			0.		
	tension of time to file (Form 8868)			0.		
	ly withheld			0.		
	d lines 6a through 6d				7	0.
8 Enter any penalty for underpay	ment of estimated tax. Check here	if Form 2220 is attached	d		8	0.
	and 8 is more than line 7, enter amo u				9	0.
10 Overpayment. If line 7 is more	than the total of lines 5 and 8, enter				10	
11 Enter the amount of line 10 to b	be: Credited to 2024 estimated tax			Refunded	11	

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	1 990-PF (2023) ASSOCIATION 04-210	3815		Page 4
Pa	rt VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers. \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			X
	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	• By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. NONE			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b		X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII	9	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address WWW.MVCMA.ORG			
14	The books are in care of ELIZA CURTIS Telephone no. (508)		-05	25
	Located at 80 TRINITY PARK, PO BOX 1685, OAK BLUFFS, MA	2557		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year 15	N	[/A	
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
	F	orm 99	0-PF	(2023)

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Part VI-B Statements Regarding Activities for Which Form 4720 May Be Requ	uired		
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the year, did the foundation (either directly or indirectly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		X	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?	1a(2)		X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	Х	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<u>1a(4)</u>		X
(5) Transfer any income or assets to a disqualified person (or make any of either available			
for the benefit or use of a disqualified person)?	<u>1a(5)</u>		X
(6) Agree to pay money or property to a government official? (Exception. Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days.)	<u>1a(6)</u>		X
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation	ns		
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	<u>1b</u>		X
c Organizations relying on a current notice regarding disaster assistance, check here			
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were no			
before the first day of the tax year beginning in 2023?			X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operat defined in section 4942(j)(3) or 4942(j)(5)):	ting foundation		
a At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines			
6d and 6e) for tax year(s) beginning before 2023?	2a		х
If "Yes," list the years , , , , ,			
 b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relation of the section 4942(a)(2)) (relation of the section 4942(a)(2)) (relation of the section of the section 4942(a)(2)) (relation of the section of the section 4942(a)(2)) (relation of the section of the	ating to incorrect		
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answe	-		
statement - see instructions.)			
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	_		
during the year?	3a		Х
b If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqual	lified persons after		
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4			
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Us			
Schedule C, to determine if the foundation had excess business holdings in 2023.)			
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			Х
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its ch			
had not been removed from jeopardy before the first day of the tax year beginning in 2023?			Х
			(0000)

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	2103815	F	⁵ age 6
Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)			
5a During the year, did the foundation pay or incur any amount to:		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	5a(1)		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,			
any voter registration drive?	5a(2)		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?	5a(3)		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section			
4945(d)(4)(A)? See instructions			X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for			
the prevention of cruelty to children or animals?	5a(5)		X
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations			
section 53.4945 or in a current notice regarding disaster assistance? See instructions N	/A 5b		
c Organizations relying on a current notice regarding disaster assistance, check here			
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained			
expenditure responsibility for the grant?N	/A 5d		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on			
a personal benefit contract?	6a		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		X
If "Yes" to 6b, file Form 8870.			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?			X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N	<u>/A.</u> 7b		
8 Is the foundation 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?	8		Х

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors Part VII

1 List all officers, directors, trustees, and foundation managers and their compensation.					
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances	
SEE STATEMENT 15		130,000.	22,780.	40,000.	

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
RAYMOND FARLAND JR	GROUNDSKEEPER			
P.O. BOX 593, OAK BLUFFS, MA 02557	40.00	58,032.	18,082.	0.
FRANCIS P CAPELLO JR - 11 WESLEYAN	GROUNDSKEEPER	SUPERVIS	DR	
GROVE, OAK BLUFFS, MA 02557	25.00	74,923.	0.	0.
Total number of other employees paid over \$50,000				0

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Part VII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
LISA BOWMAN DBVW ARCHITECTS		
111 CHESTNUT STREET, PROVIDENCE , RI 02903	ARCHITECT SERVICES	120,327.
Total number of others receiving over \$50,000 for professional services		
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta number of organizations and other beneficiaries served, conferences convened, research papers pr	atistical information such as the	Expenses
I		
SEE STATEMENT 16		928,776.
2		•
3		
L		
Part VIII-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
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MARTHA'S VINEYARD CAMP MEETING ASSOCIATION

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Ρ	art IX Minimum Investment Return (All domestic foundations must con	nplete this part. Foreign for	undations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purg	ooses:		
a			1a	2,915,288.
b			1b	656,467.
C	Fair market value of all other assets (see instructions)		1c	
d	Total (add lines 1a, b, and c)		1d	3,571,755.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)1e	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	3,571,755.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see i	nstructions)	4	53,576.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3		5	3,518,179.
6	Minimum investment return. Enter 5% (0.05) of line 5		6	175,909.
P	art X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5)	private operating foundations	and certain	
	foreign organizations, check here 🛛 🗙 and do not complete this part.)			
1	Minimum investment return from Part IX, line 6		1	
2a	,			
b	Income tax for 2023. (This does not include the tax from Part V.)			
			2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	
6	Deduction from distributable amount (see instructions)		6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1		7	
Ρ	art XI Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	1,050,846.
b	Program-related investments - total from Part VIII-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., pur		2	
3	Amounts set aside for specific charitable projects that satisfy the:			
a	· · · · · · · · · · · · · · · · · · ·		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4		4	1,050,846.
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Part XII Undistributed Income (see instructions)

	ee instructions)	N/A		
	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X, line 7				
2 Undistributed income, if any, as of the end of 2023:				
a Enter amount for 2022 only				
b Total for prior years:				
, ,				
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 e				
4 Qualifying distributions for 2023 from				
Part XI, line 4: \$				
a Applied to 2022, but not more than line 2a \dots				
b Applied to undistributed income of prior				
years (Election required - see instructions) \dots				
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2023 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable				
amount - see instructions				
e Undistributed income for 2022. Subtract line				
4a from line 2a. Taxable amount - see instr				
f Undistributed income for 2023. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2024				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)				
8 Excess distributions carryover from 2018				
not applied on line 5 or line 7				
9 Excess distributions carryover to 2024.				
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2019				
b Excess from 2020				
c Excess from 2021				
d Excess from 2022				
e Excess from 2023				

ASSOCIATION

Form 990-PF (2023)

Part XIII Private Operating F	oundations (see ins	tructions and Part VI-A	, question 9)						
1 a If the foundation has received a ruling o	or determination letter that i	it is a private operating							
foundation, and the ruling is effective fo	or 2023, enter the date of th	ie ruling		13/47					
b Check box to indicate whether the found	d <u>ation is a private operating</u>	g foundation described in	sectionX	4942(j)(3) or 🗌 49	42(j)(5)				
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	ars					
income from Part I or the minimum	(a) 2023	(b) 2022	(c) 2021	(d) 2020	(e) Total				
investment return from Part IX for									
each year listed	175,909.	201,753.	213,692.	180,384.	771,738.				
b 85% (0.85) of line 2a	149,523.	171,490.	181,638.	153,326.	655,977.				
c Qualifying distributions from Part XI,									
line 4, for each year listed	1,050,846.	819,943.	976,493.	756,030.	3,603,312.				
d Amounts included in line 2c not									
used directly for active conduct of									
exempt activities	0.	0.	Ο.	0.	0.				
e Qualifying distributions made directly									
for active conduct of exempt activities.									
Subtract line 2d from line 2c	1,050,846.	819,943.	976,493.	756,030.	3,603,312.				
3 Complete 3a, b, or c for the									
alternative test relied upon: a "Assets" alternative test - enter:									
(1) Value of all assets	45,236,833.	40,173,873.	39,264,873.	18,451,974.	143127553.				
(2) Value of assets qualifying									
under section 4942(j)(3)(B)(i)	32,476,558.	32,986,829.	32,077,829.	15,073,362.	112614578.				
b "Endowment" alternative test - enter									
2/3 of minimum investment return shown in Part IX, line 6, for each year									
listed					0.				
c "Support" alternative test - enter:									
(1) Total support other than gross									
investment income (interest, dividends, rents, payments on									
securities loans (section									
512(a)(5)), or royalties)					0.				
(2) Support from general public									
and 5 or more exempt organizations as provided in									
section 4942(j)(3)(B)(iii)					0.				
(3) Largest amount of support from					-				
an exempt organization					0.				
(4) Gross investment income			the fact of the fa		0.				
Part XIV Supplementary Info at any time during t			the foundation h	ad \$5,000 or mor	e in assets				
at any time during t	ne year-see instru	icuons.)							

Information Regarding Foundation Managers: 1

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If Check here | X | the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2023) ASSOCIATION
Part XIV Supplementary Information (continu

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	. .
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
^a Paid during the year				
CAPE COD COMMUNITY COLLEGE 2240 LYANNOUGH ROAD WEST BARNSTABLE, MA 02668	NONE	PC	GENERAL OPERATING SUPPORT	1,00
FLORIDA SOUTHWESTERN UNIVERSITY 8099 COLLEGE PARKWAY FORT MYERS, FL 33919	NONE	PC	GENERAL OPERATING SUPPORT	1,00
ISLAND FOOD PANTRY P.O. BOX 1874 VINEYARD HAVEN, MA 02568	NONE	PC	GENERAL OPERATING SUPPORT	2,50
MONTSERRAT COLLEGE ART AND DESIGN 23 ESSEX STREET BEVERLY, MA 01915	NONE	PC	GENERAL OPERATING SUPPORT	1,00
PENN STATE UNIVERSITY 201 OLD MAIN UNIVERSITY PARK, PA 16802	NONE	₽C	GENERAL OPERATING SUPPORT	1,00
	ONTINUATION SHEE	<u>T(S)</u>		14,00
b Approved for future payment NONE				
Total				

Form 990-PF (2023)

MARTHA'S VINEYARD CAMP MEETING ASSOCIATION

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		Unrel	ated business income		ded by section 512, 513, or 514	(e)		
				(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program	n service revenue:			Business	Amount	sion code	Amount	function income
0	HER PROGRAM I	NCOM	ſE					56,111.
	TTAGE LAND LE							
	COME							729,895.
	BERNACLE HOUS	E TN	ICOME					88,011.
	SESSMENTS							119,019.
f 5	DEDDMENTD							119,019.
	and contracts from governm	oont ogon				_		
	rship dues and assessments					_		
	on savings and temporary ca					14	2 118	
Investin Dividen	ents ds and interest from securitie					14	2,118. 88,722.	
	al income or (loss) from real					114	00,722.	
	t-financed property					16	289,804.	
	debt-financed property					- 10	209,004.	
	al income or (loss) from pers							
	/							·
	vestment income							
	(loss) from sales of assets of					18	227 151	
than inv	rentory					10	227,151.	
	ome or (loss) from special ev							20 724
	rofit or (loss) from sales of ir	nventory						20,724.
11 Other re								1 200
	HER REVENUE							4,298.
d								
e		()			0	•	607 705	1 010 050
	I. Add columns (b), (d), and (607,795.	
								1,625,853.
	heet in line 13 instructions to							
Part X	I-B Relationshi	p of A	ctivities to	the Acc	omplishment of E	xempt	Purposes	
Line No.	Evolain balow bow aaab	ootivity f	or which incon	an in ranarta	d in column (c) of Dart VV	A contrib	uted importantly to the accom	nlichmont of
LINE NU.					funds for such purposes).		uleu importantiy to the accom	
1A	PRESERVATION					ES TC		
	PRESERVATION							
	PRESERVATION							
	PRESERVATION							
	PRESERVATION							
<u> </u>		71110	прости					

Jorn 399-12 (2023) A SSOCTATION 0.4 – 210.3815 Page 12 Part XVI Information Regarding Transfers to and Transactions and Relationships With Non-Charitable Exempt Organizations Information Regarding Transfers to and Transactions and Relationships With Non-Charitable I bit the organization incity or inforder engage in any other organizations? Image 1 I content interport of information Regarding Transfers to and Transaction described in accion 501(c) (other series) Image 1 (1) Oscin Image 1 Image 1 (2) Other series Image 1 Image 1 (3) Other series Image 1 Image 1 (4) Other series Image 1 Image 1 (3) Decision a monchalifiable eventy organization ot transaction series Image 1 (4) Perchases of assets to a nonchalifiable eventy organization Image 1 (5) Performation Regarding Transfer to and the series Image 1 (6) Performation Regarding Transfer to and the series Image 1 (7) Perchases of assets to anochalifiable eventy organization Image 1 (6) Performation Regarding Transfer to anothalifiable eventy organization Image 2 (7) Perchases of assets to anochalifiable eventy organization Image 2 (6) Perchases of assets of anochalifiable eventy organization Image 2 (7) Perchases of assets of anochalifiable eventy or mandels anochalifiable eventy organ	Form 00	0 DE (0			ARD CAI	MP MEETING		0.4	2102015	Daga 10
Exempt Organizations 1 Diff the organization directly without on each of \$27, relating to political organizations? If the organization of action without on the noncharitable exempt organization of. 1 Other assets If the organization of action without on the noncharitable exempt organization of. If the organization of action without on the noncharitable exempt organization of. 10 Data exacts If the organization of action without on the noncharitable exempt organization of. If the organization of action without on the noncharitable exempt organization of. (1) Data exacts If the organization of action without on the organization of action without on the noncharitable exempt organization of the organization of action without on the organization of the organization of action without on the organization of action prevent the organization of action without on the organization		, ·			sfors to a	nd Transactions ar	nd Relationsh			Paye 13
1 Define organization directly engine may of the following with any other organization described in section 50 I(c) (other than section 50 I(c)) (organization is a noncharitable exempt organization of: Vest No 1 Distribution of the recenting function is a noncharitable exempt organization of: Int IIII X 2 Other assits Int 2 3 Barbitor form or an oncharitable exempt organization Int IIIII X 4 INIC assit Int 2 5 Barbitor form an oncharitable exempt organization Int 2 1 Statistic form or an oncharitable exempt organization Int 2 2 Particles, equipment, Intights, other assits Int 2 3 Barbitor form apprentize Int 2 4 If the answer to any of the above is "vs." complete the following schedule. Column (b) butual always show the firm market value of the goods, other assets, or services raceived. 4 If the answer to any of the above is "vs." complete the following schedule. Column (b) butual always always throatening arrangements. 3 Int 2 NA 4 If the answer to any of the above is "vs." complete the following schedule. Column (b) butual always alway throatening arrangements. Int 6 4 If the answer to any of the above is "vs." complete the following schedule. Int market form of									onuntubic	
(other than section 501 (x)) organizations or in section 527, relating to political organizations? Imaging for the reporting foundation to a noncharitable exempt organization ot: 1 Transfers from the reporting foundation to a noncharitable exempt organization ot: Imaging for the reporting foundation to a noncharitable exempt organization ot: (2) Other assets: Imaging for the reporting foundation to a noncharitable exempt organization Imaging for the reporting foundation to a noncharitable exempt organization (3) Exercise of assets to a noncharitable exempt organization Imaging for the reporting foundation is of the resets: Imaging for the reporting foundation is of the resets: (4) For formations of services or numbership or futuritable graph optical exempt organization Imaging for the reporting foundation is often assets, or paid employees Imaging for the reporting foundation is the reporting foundation is the reporting foundation is the reporting foundation is the reporting foundation. The foundation received is than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or paid employees Imaging foundation is the reporting foundation is the report of foundation is the report of foundation is the report is the report of foundation is the report of foundation is the re	1 Dic	the or			of the followin	ig with any other organizatio	on described in secti	on 501(c)		Yes No
a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets (3) Other assets (4) Initial (2) X (5) Users or to an oncharitable exempt organization (5) Users or to an parameter (6) Rental of failings, equipment, maining lists, other assets (6) Performance of services or membership or fundiation solutions (6) Performance of services or membership or fundiation global (2) X (6) Performance of services or membership or fundiation solutions (6) Performance of services or membership or fundiation solutions (7) Cash (7										
(2) Other assets 1at2 X (3) Other standardions: 1bt2 X (3) Step of assets to a noncharitable ecempt organization 1bt2 X (3) Rental of facilities, equipment, managements 1bt2 X (4) Reinbursement arrangements 1bt2 X (5) Loss of transparations, or plane analysis, or plane, or				,						
(2) Other assets is 1/2 (1) Soles of assets to a nuchariable exempt organization is 1/2 (2) Purchased stassets from anochariable exempt organization is 1/2 (3) Rental of facilities, equipment, or other assets is 1/2 (4) Reinfoursement at angements is 1/2 (5) Long to read guarantee is 1/2 (6) Purchase of assets to a nuchariable exempt organization is 1/2 (7) He answer to any of the above is 7/es; "complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services proceeded. (6) Use voice (b) Amount involved (c) Name of nonchariable exempt organization (b) base or shuring arrangement, show in column (a) the value of the goods, other assets, or services proceeded. (a) Use voice (b) Amount involved (c) Name of nonchariable exempt organization (d) Use voice or transfer, transfer, and avering arrangements. (a) Use voice (b) Amount involved (c) Name of nonchariable exempt organization (d) Use voice or transfer, transfer, and avering arrangements. (a) Use voice (b) Amount involved (c) Name of nonchariable exempt organization (d) Use voice or transfer, transfer, and avering arrangements. (a) Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization is sector 501(c) (other than sectors 501									1a(1)	X
b Other transactions: 11 Seles of assets to an anocharitable exempt organization 12 (1) Seles of assets to an anocharitable exempt organization 13 (2) Purchases of assets to an anocharitable exempt organization 14 (1) X 14 (2) X 15 (2) Purchases of assets to an anocharitable exempt organization 15 (2) Loans of leag sparsets 16 (1) X 16 (2) X 17 (2) X 1	(2)	Other	assets						1a(2)	Х
(2) Purchases of asset from a nonchartable exempt organization Ib(2) X (3) Rent of callisites, explorements Ib(3) X (4) Reinbursement arrangements Ib(4) X (5) Dectomatives Ib(6) X (6) Dectomatives Ib(6) X (7) Performance of services on membership or fundraking solicitations Ib(6) X (6) Dectomative of services on membership or fundraking solicitations Ib(6) X (1) If earnee or any of the above transfer secretice. Ib(6) X (1) If earnee or any of the above transfer secretice. Ib(6) X (1) If earnee or any of the above transfer secretice. Ib(6) X (2) If earnee of (0) Amount involved (c) Name of noncharitable exempt organization (d) Descretion of transfer. Nameschose, and sharing arrangements (a) If the fundration directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 50 f0(:(3)) or in section 52? Ves X (a) If arree of organization (b) Type of organization (c) Description of relationship Ves X (b) If arree of organization (b) Type of organization (c) Description of relationship Ves X No										
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(3) Rental of facilities, equipments [163] X (4) Reinhousement arrangements [164] X (5) Loans or loan guarantees [163] X (6) Performance of services or membership or fundraising solicitations [163] X (7) Beinhousement arrangements [164] X (8) Performance of services or membership or fundraising solicitations [166] X (9) Ream of the answer to any of the above is Yes; complete the following schedule. Column (b) should aways show the fair market value of the goods, other assets, or services received. (d) Description of transfers, transactions, and shoring arrangements in originalization (a) Use no (b) Amount involved (c) Name of moncharitable exempt organization (d) Description of transfers, transactions, and shoring arrangements (a) Live no (b) Amount involved (c) Name of moncharitable exempt organization (d) Description of transfers, transactions, and shoring arrangements (a) Live no (b) Amount involved (c) Name of moncharitable exempt organizations (d) Description of relationship (a) Rame of organization (d) Complexity affiliated vith, or related to, one or more tax-exempt organizations described (e) Rame of organization (f) Description of relationship (a) Rame of organization (b) Type of organization (e) Description	(2)	Purch	ases of assets from a no	ncharitable exempt o	rganization				1b(2)	X
(4) Reimbursement arrangements [16(4)] X (5) Loars to loan purarises [16(4)] X (6) Performance of services or membership or fundraising solicitations [16(4)] X (7) Loars to loan purarises [16(4)] X (8) Performance of services or membership or fundraising solicitations [16(4)] X (9) Performance of services convex in y of the above or training arrangement, show in coolumn ((1) the value of the goods, other assets, or services given by the reporting foundation. If the fundration received less than fair market value in any transaction or sharing arrangement, show in coolumn ((1) the value of the goods, other assets, or services received. (a) Line on (1) Amount involved (c) Name of noncharltable exempt organization (d) Description of newders, transactions, and sharing arrangements (a) Line on (b) Amount involved (c) Name of noncharltable exempt organization (d) Description of newders, transactions, and sharing arrangements (a) Line on (b) Amount involved (c) Name of noncharltable exempt organization (d) Description of newders, transactions, and sharing arrangements (a) Line on outparticities of new local stating account of the stating arrangement in the stating arrangement in the stating arrangement in the good of the stating arrangement in the stating arrangement	(3)	Renta	I of facilities, equipment,	or other assets					1b(3)	
(5) Lears or lean guarantees [16] N (6) Performance of services or membership or fundralising solicitations [16] N (7) Performance of services or membership or fundralising solicitations [16] N (8) Performance of services or membership or fundralising solicitations [16] N (9) He answer to any of the above is Yes, "complete the following schedule. Column (a) should always show the fair market value in any measurement, show in column (b) the value of the goods, other assets, or services received. (9) Line value of the goods, other assets, or services received. (a) NAM (a) Line value of the goods, other assets, or services received. (b) Amount involved (b) Amount involved (b) Name of noncharitable exempt organization (c) Description of transfers, hornactions, and starting arrangements (a) Line value of the goods, other assets, or services received. (c) Description of relationship Ves (a) Line value of the goods, other assets, or services received. (c) Description of relationship Ves (b) Here value of the down asset on Sol (c) (3) or in section SOI (c) (3) or in sect										
(6) Performance of services or membership or fundrasing solicitations 10(6) X 6) Sharing of fallings, equipment, making kits, or bandling, equipment, making kits, or bandling, equipment, making kits, or bandling, equipment, show in cohum (d) he value of the goods, other assets, or services calculation received. (a) Line results, equipment, show in cohum (d) he value of the goods, other assets, or services calculation received. (b) Line results, equipment, and bits, or bandling arrangement, show in cohum (d) he value of the goods, other asset, or services calculation or distributed in any transaction or sharing arrangement, show in cohum (d) he value of the goods, other asset, or services calculation of transfers, transactions, and sharing arrangements. (d) Line results, equipment (d) Antime of noncharitable exception of ganization (d) Description of transfers, transactions, and sharing arrangements. (e) Antime of regarding the above is 'Yes,' complete the following schedule. (e) Antime of noncharitable exception of transfers, transactions, and sharing arrangements. (f) Line results. (f) Antime of noncharitable exception of ganization (f) Description of transfers, transactions, and sharing arrangements. (a) Name of regarding the above is 'yes,' complete the following schedule. (h) Type of organization described in a section 52(?) (g) Line results of organization (g) Type of organization described in an intervention. (h) N/A (h) Type of organization of the present of the transmitter of the organization of present of the tras examined this returu, including accompanying calculate and talt	(5)	Loans	s or loan guarantees						1b(5)	
If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services request. (a) Live receives (b) Amount involved (c) Name of noncharitable exampt organization (d) Description of transfers, transactions, and energy arrangements in the foundation for the value of the goods, other assets, or services request. (a) Live receives (b) Amount involved (c) Name of noncharitable exampt organization (d) Description of transfers, transactions, and energy arrangements in the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? 2 Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? 2 If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A	(6)	Perfo	rmance of services or me	mbership or fundrais	ing solicitatio				11.00	
e services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line rec. (b) Amount involved (c) Name of nonecharitable exempt organization (d) Description of twanters, twanaccions, and abaring arrangements (c) Name of none or more tax-exempt organization described in section 501(c) (other than section 527? (a) Line rec. (b) No define the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 507(c)(3) or in section 527? (b) H*Yes; complete the following schedule. (c) Name of organization (d) Name of organization (e) Description of relationship N/A Under penalties of parjury. Identars that have examined that return, including accompanying schedules and takenemis, and to the best of my knowledge in and bester, it is two, correct, and complete. (b) Type of organization (c) Date (c) Part (c) (c) Chart that have examined that return, including accompanying schedules and takenemis, and to the best of my knowledge (c) Description of relationship N/A Print/Type preparer's name SANDRA M. BROWN, PCA Firm's name SMITH, SULLIVAN & BROWN, P.C. Firm's address 80 FLANDERS ROAD, SUITE 302	c Sh	aring of	f facilities, equipment, ma	iling lists, other asse	ts, or paid em	ployees			1c	X
column (d) the value of the goods, other assets, or services received. (a) Live no. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing amagements N/A (d) Description of transfers, transactions, and sharing amagements (e) Amount involved (f) Amount inv					-	• •			-	ets,
(a) Amount involved (c) Name of noncharitable exempt organization (d) Description of banders, baneactions, and sharing arrangementa N/A N/A Image: state of the						ed less than fair market valu	ie in any transaction	or sharing arranger	ment, show in	
Sign Under penalities of perjury, I doctare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge. Image: Sign in the section 501(c)(3)) or in section 52?? b If Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A N/A If Yes," complete the following schedule. Image: Sign intervent of organization (c) Description of relationship N/A N/A Image: Sign intervent of organization (c) Description of relationship N/A Image: Sign intervent of organization (c) Description of relationship N/A Image: Sign intervent of organization Image: Sign intervent of organization (c) Description of relationship N/A Image: Sign intervent of organization Image: Sign intervent of organization (c) Description of relationship Sign intervent of officer or trustee Image: Sign intervent of organization Image: Sign intervent of organization Image: Sign intervent of organization Signature of officer or trustee Date Image: Sign intervent of organization Image: Sign intervent of organization Print/Type preparer's name SanDRA M. BROWN, SanD		<u>``</u>	/ * :	,			(4)			
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Image: Complete the following schedule. 2a Is the foundation directly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Image: Complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Image: Complete the following schedule. Image: Complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Image: Complete the following schedule. Image: Complete the following schedule. Sign Image: Complete. Image: Complete. Image: Complete the following schedule. Image: Complete. Sign Image: Complete. Image: Complete. Image: Complete the following schedule. Image: Complete. Image: Complete. Sign: Complete the following schedule. Image: Complete the following schedule. Image: Complete the following schedule. Sign: Complete the following schedule. Image: Complete the following schedule. Image: Complete the following schedule. Sign: Complete the following schedu	(a) Line n	0.	(D) Amount involved	(c) Name of		e exempt organization	(0) Description	of transfers, transactio	ons, and sharing arra	angements
in section 501(c) (other than section 501(c)(3)) or in section 52??		_			N/A					
in section 501(c) (other than section 501(c)(3)) or in section 52??		_								
in section 501(c) (other than section 501(c)(3)) or in section 52??		_					_			
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in section 501(c) (other than section 501(c)(3)) or in section 52??										
in section 501(c) (other than section 501(c)(3)) or in section 52??										
in section 501(c) (other than section 501(c)(3)) or in section 52??										
in section 501(c) (other than section 501(c)(3)) or in section 52??										
in section 501(c) (other than section 501(c)(3)) or in section 52??										
in section 501(c) (other than section 501(c)(3)) or in section 52??										
in section 501(c) (other than section 501(c)(3)) or in section 52??										
in section 501(c) (other than section 501(c)(3)) or in section 52??	2a Ist	he four	ndation directly or indirec	tlv affiliated with, or r	elated to, one	or more tax-exempt organi	zations described			
b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A			•	•	-				Yes	XNo
N/A N/A Image: No N/A Sign Here 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 taxpayer) is based on all information of which preparer has any knowledge. Signature of officer or trustee Date Signature of officer or trustee Date Print/Type preparer's name Preparer's signature SANDRA M. BROWN, SANDRA M. BROWN, CPA SANDRA M. BROWN, Firm's name SMITH, SULLIVAN & BROWN, P.C. Firm's address 80 FLANDERS ROAD, SUITE 302 Firm's EIN 43-1985162	b⊳lf‴	Yes," co	mplete the following sch	edule.						
Sign Here 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 taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this return with the preparer shown below? See inst. Signature of officer or trustee Date TREASURER Title May the IRS discuss this return with the preparer shown below? See inst. Paid Preparer Use Only Print/Type preparer's name Preparer's signature Date Check if self- employed PTIN Firm's name SANDRA M. BROWN, CPA SANDRA M. BROWN, Firm's address SANDRA M. BROWN, Firm's address P11/14/24 P01614103			(a) Name of org	ganization		(b) Type of organization		(c) Description of re	elationship	
Sign Here and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this return with the preparer shown below? See instr. Signature of officer or trustee Date TITLE Paid Print/Type preparer's name Preparer's signature Date Check if self- employed PTIN Sandra M. BROWN, CPA SANDRA M. BROWN, 11/14/24 P01614103 Firm's name SMITH, SULLIVAN & BROWN, Firm's EIN 43-1985162 Firm's address 80 FLANDERS ROAD, SUITE 302			N/A							
Sign Here and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the HS discuss this return with the preparer shown below? See instr. Signature of officer or trustee Date TITLE Paid Print/Type preparer's name Preparer's signature Date Check if self- employed PTIN Sandra M. BROWN, CPA SANDRA M. BROWN, 11/14/24 Po1614103 Firm's name SMITH, SULLIVAN & BROWN, P.C. Firm's EIN 43-1985162 Firm's address 80 FLANDERS ROAD, SUITE 302 Solution and belief.										
Sign Here and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the HS discuss this return with the preparer shown below? See instr. Signature of officer or trustee Date TITLE Paid Print/Type preparer's name Preparer's signature Date Check if self- employed PTIN Sandra M. BROWN, CPA SANDRA M. BROWN, 11/14/24 Po1614103 Firm's name SMITH, SULLIVAN & BROWN, P.C. Firm's EIN 43-1985162 Firm's address 80 FLANDERS ROAD, SUITE 302 Solution and belief.										
Sign Here and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the HS discuss this return with the preparer shown below? See instr. Signature of officer or trustee Date TITLE Paid Print/Type preparer's name Preparer's signature Date Check if self- employed PTIN Sandra M. BROWN, CPA SANDRA M. BROWN, 11/14/24 Po1614103 Firm's name SMITH, SULLIVAN & BROWN, P.C. Firm's EIN 43-1985162 Firm's address 80 FLANDERS ROAD, SUITE 302 Solution and belief.										
Sign Here and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the HS discuss this return with the preparer shown below? See instr. Signature of officer or trustee Date TITLE Paid Print/Type preparer's name Preparer's signature Date Check if self- employed PTIN Sandra M. BROWN, CPA SANDRA M. BROWN, 11/14/24 Po1614103 Firm's name SMITH, SULLIVAN & BROWN, P.C. Firm's EIN 43-1985162 Firm's address 80 FLANDERS ROAD, SUITE 302 Solution and belief.										
Here TREASURER Image: Constraint of the second	0:00								May the IRS d	liscuss this
Signature of officer or trustee Date Title Paid Print/Type preparer's name Preparer's signature Date Check if self- employed PTIN SANDRA M. BROWN, CPA SANDRA M. BROWN, 11/14/24 P01614103 P01614103 Firm's name SMITH, SULLIVAN & BROWN, P.C. Firm's EIN 43-1985162 Firm's EIN 43-1985162						1		-	shown below?	? See instr.
Paid Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN Paid Preparer SANDRA M. BROWN, SANDRA M. BROWN, 11/14/24 P01614103 Preparer Use Only Firm's name SMITH, SULLIVAN & BROWN, P.C. Firm's EIN 43-1985162 Firm's address 80 FLANDERS ROAD, SUITE 302 5000000000000000000000000000000000000	nere	0:00						SR	_ X Yes	└── No
Paid Preparer Use Only SANDRA M. BROWN, CPA SANDRA M. BROWN, SANDRA M. BROWN, Firm's name 11/14/24 self- employed Firm's name SMITH, SULLIVAN & BROWN, P.C. Firm's EIN 43-1985162 Firm's address 80 FLANDERS ROAD, SUITE 302 Firm's address		Sign			Dranarar'a a					
Paid Preparer Use Only CPA SANDRA M. BROWN, 11/14/24 P01614103 Firm's name SMITH, SULLIVAN & BROWN, P.C. Firm's EIN 43-1985162 Firm's address 80 FLANDERS ROAD, SUITE 302 Firm's address					rieparer's s	iyiialure	Date			
Preparer Firm's name SMITH, SULLIVAN & BROWN, P.C. Use Only Firm's address 80 FLANDERS ROAD, SUITE 302	Paid			-			11/14/24	sen- empioyeu	D01614	102
Use Only Firm's address 80 FLANDERS ROAD, SUITE 302		arer					<u> + </u>			
Firm's address 80 FLANDERS ROAD, SUITE 302	-		FILL S NAME SMITT.	11, JULIV	מ אויט	NOWIN, F.C.		FITTISEIN 43	-190010	4
	200	,	Firm's address QO		RUZD	ፍጠተጥፑ 302				
					-			Phone no. 50	8-871-7	178

Phone no.	508-871-7178
	Form 990-PF (2023)

MARTHA'S VINEYARD CAMP MEETING ASSOCIATION

04-2103815

3 Grants and Contributions Paid During the Y	-			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
THE GOOD SHEPHERD PARISH	NONE	PC	GENERAL OPERATING	
P.O. BOX 1058			SUPPORT	
VINEYARD HAVEN, MA 02568				2,50
UNIVERSITY OF MIAMI	NONE	PC	GENERAL OPERATING	
OFFICE OF STUDENT ACCOUNT SERVICES;	NONE	FC	SUPPORT	
P.O. BOX 025551 MIAMI, FL 33102-5551			DOTTORT	1,00
VIRGINIA COMMONWEALTH UNIVERSITY	NONE	PC	GENERAL OPERATING	
1015 FLOYD AVE., FIRST FLOOR			SUPPORT	
RICHMOND, VA 23284-2506				1,00
CURRY COLLEGE	NONE	PC	GENERAL OPERATING	
1071 BLUE HILL AVE			SUPPORT	
MILTON , MA 02186				1,00
		D.C.		
UNIVERSITY OF SOUTH CAROLINA UNIVERSITY OF SOUTH CAROLINA	NONE	PC	GENERAL OPERATING SUPPORT	
COLUMBIA, SC 29208			DOTTORT	1,00
· · · ·				,
COLUMBIA UNIVERSTITY	NONE	PC	GENERAL OPERATING	
116TH AND BROADWAY			SUPPORT	
NEW YORK, NY 10027				1,00
Total from continuation sheets				7,50

FORM 990-PF	INTEREST	ON	SAVING	S AN	D TEMPOR	ARY C	CASH	INVESTMENTS	STATE	MENT 1
SOURCE					(A) REVENUE PER BOOK;		NET	(B) INVESTMENT INCOME	ADJI	C) JSTED INCOME
BANK INTERES	т				2,1	18.		2,118.		2,118
TOTAL TO PAR	T I, LINE	3			2,1	18.		2,118.		2,118
FORM 990-PF					TNMEDECM	FROM				
FORM 990-PF	· · · · · · · · · · · · · · · · · · ·				INTEREST	FROM			STATE.	MENT 2
				~~	ртшат	,	א ((P)		(\mathbf{C})

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
INVESTMENTS	88,722.	0.	88,722.	88,722.	88,722.		
TO PART I, LINE 4	88,722.	0.	88,722.	88,722.	88,722.		

FORM 990-PF	RENTAL INCOME		STATEMENT 3
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROSS RENTAL INCOME
		1	289,804.
TOTAL TO FORM 990-PF, PART I,	LINE 5A		289,804.

FORM 99	0-PF	GAIN	OR	(LOSS)	FR	OM SAI	LE	OF	ASSETS	SI	ATEMEN	т 4
DESCRIP	(A) TION OF PROPERI	Ϋ́							MANNER ACQUIRED	DATE ACQUIRE	D DATE	SOL
SALE OF	SECURITIES								PURCHASED			
	(B) GROSS	c	(C COST			(D EXPENS			(E)		(F)	
	SALES PRICE			BASIS		SA		Or	DEPREC	. GAI	N OR L	oss
	223,651.	,		0	•			0.	,	0.	223	,651
DESCRIP	(A) TION OF PROPERI	Y							MANNER ACQUIRED	DATE ACQUIRE	D DATE	SOLI
SALE OF	OLD EQUIPMENT								PURCHASED			
	(B)		(C			(D			(E)		(F)	
	GROSS SALES PRICE		COST IER	BASIS		EXPEN: SAI		OF	DEPREC	. GAI	N OR L	oss
	3,500.			0	•			0.		0.	3	,500

NET GAIN OR LOSS FROM SALE OF ASSETS CAPITAL GAINS DIVIDENDS FROM PART IV TOTAL TO FORM 990-PF, PART I, LINE 6A 227,151.

Ο.

227,151.

MARTHA'S VINEYARD CAMP MEETING ASSOCIATI

04 - 2103815

FORM 990-PF INCOME AND COST OF GOODS S INCLUDED ON PART I, LINE	
INCOME	
1. GROSS RECEIPTS	37,842 37,842
4. COST OF GOODS SOLD (LINE 15)	17,118 20,724
6. OTHER INCOME	
7. GROSS INCOME (ADD LINES 5 AND 6)	20,724
COST OF GOODS SOLD	
8. INVENTORY AT BEGINNING OF YEAR	17,118
12. OTHER COSTS	17,118
14. INVENTORY AT END OF YEAR	17,118

TOTAL TO FORM 990-PF, PART I, LINE 11

997,334.

0.

FORM 990-PF	OTHER INCOME		STATEMENT 6
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
OTHER PROGRAM INCOME COTTAGE LAND LEASE INCOME TABERNACLE HOUSE INCOME ASSESSMENTS OTHER REVENUE	56,111. 729,895. 88,011. 119,019. 4,298.	0. 0. 0.	729,895. 88,011. 119,019.

FORM 990-PF	LEGAL FEES STATEMENT			FATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	7,745.	0.	7,745.	0.
TO FM 990-PF, PG 1, LN 16A	7,745.	0.	7,745.	0.

997,334.

FORM 990-PF	ACCOUNTI	FATEMENT 8		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING AND BOOKKEEPING FEES	65,189.	0.	0.	64,524.
	65,189.	0.	0.	64,524.

FORM 990-PF	OTHER PROFES	ESSIONAL FEES STATEMENT 9		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES PAYROLL PROCESSING FEES AUDIO AND LIGHTING TECH	28,771. 3,376.	28,771.	28,771. 3,376.	0.0.
FEES OTHER PROFESSIONAL FEES	20,900. 0.	0. 0.	20,900. 0.	0. 0.
TO FORM 990-PF, PG 1, LN 160	53,047.	28,771.	53,047.	0.

FORM 990-PF	ТАХ	TAXES STAT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
REAL ESTATE TAXES	107,470.	0.	107,470.	0.
TO FORM 990-PF, PG 1, LN 18	107,470.	0.	107,470.	0.

FORM 990-PF

OTHER EXPENSES

STATEMENT 11

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EQUIPMENT EXPENSE	9,678.	0.	0.	9,500.
HISTORIC PRESERVATION	8,940.	0.	0.	8,940.
UTILITIES	77,009.	0.	0.	68,560.
LANDSCAPING AND GROUNDS				
EXPENSES	95,609.	0.	0.	117,770.
REPAIRS AND MAINTENANCE	44,449.	0.	0.	45,793.
PROGRAM ACTIVITIES	20,702.	0.	0.	22,278.
SPIRITUAL LIFE	14,637.	0.	0.	13,911.
ADVERTISING	19,705.	0.	0.	19,705.
OFFICE SUPPLIES AND EXPENSES	38,843.	0.	0.	28,757.
DUES, FEES AND SUBSCRIPTIONS	21,818.	0.	0.	20,078.
INFORMATION TECHNOLOGY	41,798.	0.	0.	41,798.
INSURANCE	89,030.	0.	0.	98,754.
MISCELLANEOUS	18,227.	0.	0.	18,190.
BAD DEBT LOSS	5,260.	0.	5,260.	0.
UNIFORMS	907.	0.	0.	907.
MEALS	507.	0.	0.	507.
TO FORM 990-PF, PG 1, LN 23	507,119.	0.	5,260.	515,448.

MARTHA'S VINEYARD CAMP MEETING ASSOCIATI

04-2103815

FORM 990-PF U.S. AND STATE/	CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT 12
DESCRIPTION	U.S. GOV'T	OTHER GOV ' T	BOOK VALUE	FAIR MARKET VALUE
UNITED STATES TREAS BILLS ZERO CPN	X			
CUSIP 912796CX5			9,846.	9,846.
UNITED STATES TREAS BILLS ZERO CPN	Х			
CUSIP 912797GB7			48,744.	48,744.
UNITED STATES TREAS BILLS ZERO CPN CUSIP 912797CD3	Х		40 000	10 000
UNITED STATES TREAS BILLS ZERO CPN	x		49,883.	49,883.
CUSIP 912797LL9	А		64,260.	64,260.
UNITED STATES TREAS BILLS ZERO CPN	X		04,200.	04,200.
CUSIP 912797HF7			29,568.	29,568.
UNITED STATES TREAS BILLS ZERO CPN	х			
CUSIP 912797HP5			71,850.	71,850.
UNITED STATES TREAS BILLS ZERO CPN	х			
CUSIP 912797LL9			4,943.	4,943.
UNITED STATES TREAS BILLS ZERO CPN	Х			
CUSIP 912797HF7			4,928.	4,928.
UNITED STATES TREAS BILLS ZERO CPN	X		4	4
CUSIP 912797CW1			4,820.	4,820.
UNITED STATES TREAS BILLS ZERO CPN CUSIP#912797HH3	Х		137,574.	137,574.
COSTE#912/9/NH3			157,574.	137,374.
TOTAL U.S. GOVERNMENT OBLIGATIONS		-	426,416.	426,416.
TOTAL STATE AND MUNICIPAL GOVERNME	NT OBLIG	ATIONS		
TOTAL TO FORM 990-PF, PART II, LIN	E 10A	-	426,416.	426,416

HER INVESTMENTS		STATEMENT 13
VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
FMV	5,955.	5,955.
FMV	5,767.	5,767.
FMV		
	60,086.	60,086.
FMV	88,009.	88,009.
f FMV	19,243.	19,243.
FMV	14,548.	14,548.
) FMV		
	38,272.	38,272.
FMV	311,707.	311,707.
) FMV		
	4,396.	4,396.
INE 13	547,983.	547,983.
	METHOD FMV FMV FMV FMV FMV FMV FMV FMV FMV	VALUATION METHOD BOOK VALUE FMV 5,955. FMV 5,767. FMV 60,086. FMV 88,009. FMV 19,243. FMV 14,548. FMV 38,272. FMV 311,707. FMV 4,396.

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FORM 990-PF	OTHER ASSETS	STATEMENT 14	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
BENEFICAL INTEREST IN CHARITABLE UNITRUST PRE-DEVELOPMENT COSTS	232,782. 437,280.	334,247. 5,894,191.	334,247. 5,894,191.
TO FORM 990-PF, PART II, LINE 15	670,062.	6,228,438.	6,228,438.

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MARTHA'S VINEYARD CAMP MEETING ASSOCIATI

04-2103815

FORM 990-PF		r OF OFFICERS, DIE D FOUNDATION MANAC		STAT	EMENT 15
NAME AND ADDRESS		TITLE AND AVRG HRS/WK			EXPENSE
KELLY FEIRTAG 80 TRINITY PARK; 1 OAK BLUFFS, MA 02		EXECUTIVE DIREC 40.00		22,780.	40,000.
TRISH HAHN 80 TRINITY PARK; 1 OAK BLUFFS, MA 02		PRESIDENT 2.00	0.	0.	0.
WENDY HASKELL 80 TRINITY PARK; 1 OAK BLUFFS, MA 02		VICE PRESIDENT 2.00	0.	0.	0.
ELIZA CURTIS 80 TRINITY PARK; 1 OAK BLUFFS, MA 02		TREASURER 2.00	0.	0.	0.
ANASTACIA AWAD 80 TRINITY PARK; 1 OAK BLUFFS, MA 02		SECRETARY 2.00	0.	0.	0.
DAVID MILLER 80 TRINITY PARK; 1 OAK BLUFFS, MA 02		TRUSTEE 2.00	0.	0.	0.
ROBERT LAMMEY 80 TRINITY PARK; 1 OAK BLUFFS, MA 02		TRUSTEE 2.00	0.	0.	0.
SHERRIE SAINT-AMA 80 TRINITY PARK; 1 OAK BLUFFS, MA 02	P.O. BOX 1685	TRUSTEE 2.00	0.	0.	0.
TRISH HAHN 80 TRINITY PARK; 1 OAK BLUFFS, MA 02		TRUSTEE 2.00	0.	0.	0.
TED GAVIN 80 TRINITY PARK; 1 OAK BLUFFS, MA 02		TRUSTEE 2.00	0.	0.	0.

MARTHA'S VINEYARD CAM	P MEETING	ASSOCIATI		04-2103815	5
STEVEN HIGHT 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 5 2.00	0.	0. 0.	•
AUDREY GROSSBERG 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 2.00	0.	0. 0	•
KIM JONES 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 5 2.00	0.	0. 0	•
JOANNE BERGEN 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 2.00	0.	0. 0	•
JAMES DUFFY 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 5 2.00	0.	0. 0	•
SARAH LEAMAN 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 2.00	0.	0. 0	•
MAUREEN MCDONALD 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 2.00	0.	0. 0	•
CRAIG LOWE 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 2.00	0.	0. 0	•
WENDY HASKELL 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 2.00	0.	0. 0	•
SCOTT SLARSKY 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 5 2.00	0.	0. 0	•
NATE BERNARD 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 5 2.00	0.	0. 0	•
JANINE DA SILVA 80 TRINITY PARK; P.O. OAK BLUFFS, MA 02557	BOX 1685	TRUSTEE 2.00	0.	0. 0	•

MARTHA'S VINEYARD CAMP MEETING ASSOCIATI		04	-2103815
MICHAEL HOTALING TRUSTEE 80 TRINITY PARK; P.O. BOX 1685 2.00 OAK BLUFFS, MA 02557	0.	0.	0.
ANDREW PATCH TRUSTEE 80 TRINITY PARK; P.O. BOX 1685 2.00 OAK BLUFFS, MA 02557	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII	130,000.	22,780.	40,000.

FORM 990-PF	SUMMARY OF	F DIRECT	CHARITABLE ACTIVITIES	STATEMENT 16
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ACTIVITY ONE

THE LAND AND BUILDINGS OWNED AND OPERATED BY MVCMA ARE KNOWN AS THE "MARTHA'S VINEYARD CAMPGROUND." IT IS AN EXTENSIVE GROUP OF NINETEENTH CENTURY COTTAGES AND RELIGIOUS BUILDINGS LOCATED IN THE CENTER OF THE TOWN OF OAK BLUFFS (FORMERLY COTTAGE CITY), MASSACHUSETTS. THE CAMPGROUND IS LAID OUT ON 34 OAK-SHADED ACRES. MVCMA TODAY GOVERNS THE ACTIVITIES OF THE CAMPGROUND, TO ENSURE THE CONTINUING PRESERVATION AND EDUCATIONAL OPPORTUNITIES TO THE PUBLIC OF THIS HISTORICALLY SIGNIFICANT AREA. THE LAND AND BUILDINGS OWNED BY MVCMA ARE LISTED IN THE RECORDS OF THE MASSACHUSETTS HISTORICAL COMMISSION.

EXPENSES

TO FORM 990-PF, PART VIII-A, LINE 1

928,776.

(Rev. January 2024)

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

Department of the Treasury Internal Revenue Service

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

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

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts

All corporations required to file an income tax return other			ips, REMICs	s, and trusts	
must use Form 7004 to request an extension of time to f	ile income tax retur	ns.			
Part I - Identification				identification i	
	MARTHA'S VINEYARD CAMP MEETING				
File by the	ASSOCIATION				
due date for filing your 80 TRINITY PARK, PO BO		tions.			
return. See OO IIKIINIII IAKK, IO DO.					
instructions. City, town or post office, state, and ZIP code OAK BLUFFS, MA 02557	e. For a foreign add	ress, see instructions.			
Enter the Return Code for the return that this application	is for (file a separa	te application for each return)			04
Application Is For	Return	Application Is For	<u></u>		Return
Application is For	Code	Application is For			Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)			09
Form 4720 (individual)	03	Form 4720 (other than individual)			10
Form 990-PF	04	Form 5227 Form 6069			11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870			12
Form 990-T (trust other than above)	06				13
Form 990-T (corporation)	07	Form 5330 (individual) Form 5330 (other than individual)			13
Form 1041-A	08				17
• After you enter your Return Code, complete either Par	t II or Part III. Part II	I, including signature, is applicable	only for an	extension of	
Plan Number Plan Year Ending (MM/DD/YYYY)					
Part II - Automatic Extension of Time To File for Exem	pt Organizations (s	see instructions)			
The books are in the care of ELIZA CURTIS					
80 TRINITY P	ARK, PO BO	DX 1685 - OAK BLUF	'FS, MA	02557	
Telephone No. (508) 693–0525		Fax No.			
 If the organization does not have an office or place of 	business in the Un	ited States, check this box			
 If this is for a Group Return, enter the organization's f 	our-digit Group Exe	mption Number (GEN)	. If this is fo	r the whole gro	up, check this
box If it is for part of the group, check this bo					
1 I request an automatic 6-month extension of time	until <u>NOVEMB</u>	ER 15 , 20 24 , to t	file the exem	pt organization	n return for
the organization named above. The extension is fo	or the organization's	return for:			
X calendar year 20 23 or					
tax year beginning	, 20	, and ending			, 20
2 If the tax year entered in line 1 is for less than 12 n	nonths, check reaso	on: Initial return	Final retur	n	
Change in accounting period				[
3a If this application is for Forms 990-PF, 990-T, 4720), or 6069, enter the	e tentative tax, less		^	0
any nonrefundable credits. See instructions.	0 or 6060		<u>3a</u>	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720	01	¢	0.		
estimated tax payments made. Include any prior y c Balance due. Subtract line 3b from line 3a. Includ	3b	\$	0.		
	20	\$	0.		
using EFTPS (Electronic Federal Tax Payment Sys	30	Ψ	U •		

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