** PUBLIC DISCLOSURE COPY **

(Rev. January 2020)

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

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public

A F	or the	e 2019 calendar year, or tax year beginning Ju	JL 1, 2019 and	ending J	UN 30,	2020	
	Check if applicable	C Name of organization			D Emp	oloyer identifi	cation number
Г	Addre						
F	Name chang	B			1 :	23-7353532	
F	Initial return	Number and street (or P.O. box if mail is not de	livered to street address)	Room/suite	1	phone numbe	ır
F	Final	2831 N 31ST AVE	involva to stroot address)	Ttoom, suite		502) 242-36	
_	⊥return termir ated		7IP or foreign postal code			receipts \$	198,521,670.
	Amen return	ded PHOENTY NO 85000	Zii di lordigii podiai dodo			this a group re	
F	Applic		KERTIS		7 ' '	r subordinates	
	pendi	SAME AS C ABOVE			1		ncluded? Yes No
T 7	Гах-ех	empt status: X 501(c)(3) 501(c) ()	◀ (insert no.)	or 527	1 `´		list. (see instructions)
		te: WWW.FIRSTFOODBANK.ORG	(moore not) 10 m (a)(1)	01 021	1	oup exemption	
			ssociation Other	L Year			M State of legal domicile; AZ
		Summary					
	1	Briefly describe the organization's mission or most	significant activities: ALLEVI	ATE HUNGE	ER THRO	UGH	
Governance		GATHERING AND DISTRIBUTION OF FOOD.					
nar	2	Check this box if the organization disco	ntinued its operations or dispos	sed of more	than 25%	% of its net as:	sets.
Ve	3	Number of voting members of the governing body				I -	17
	4	Number of independent voting members of the government					16
ος O		Total number of individuals employed in calendar y					230
/itie		Total number of volunteers (estimate if necessary)					69653
Activities &		Total unrelated business revenue from Part VIII, co					0.
_<		Net unrelated business taxable income from Form					0.
					Prio	r Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)			16	7,505,484.	194,114,570.
ž	9	Program service revenue (Part VIII, line 2g)				4,074,077.	4,094,906.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4	and 7d)			16,927.	36,302.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c	, 9c, 10c, and 11e)			265,578.	129,500.
	12	Total revenue - add lines 8 through 11 (must equal	Part VIII, column (A), line 12)		17	1,862,066.	198,375,278.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		13	4,929,928.	163,537,017.
	14	Benefits paid to or for members (Part IX, column (A	.), line 4)			0.	0.
S	15	Salaries, other compensation, employee benefits (I			1	2,303,020.	13,894,481.
Expenses	16a	Professional fundraising fees (Part IX, column (A), I				48,000.	1,220,481.
xbe	b	Total fundraising expenses (Part IX, column (D), line					
Ш	''	Other expenses (Part IX, column (A), lines 11a-11d				5,448,792.	15,735,227.
	1	Total expenses. Add lines 13-17 (must equal Part I				2,729,740.	194,387,206.
_	19	Revenue less expenses. Subtract line 18 from line	12			9,132,326.	3,988,072.
Net Assets or				Ве		Current Year	End of Year
Sset	20	Total assets (Part X, line 16)				9,063,828.	43,051,551.
et A	21	Total liabilities (Part X, line 26)				3,010,751.	2,937,723.
Ž,	22 art II	Net assets or fund balances. Subtract line 21 from Signature Block	line 20		3	6,053,077.	40,113,828.
			including accompanying achadula	a and atatama	nto and t	a the heat of m	/ knowledge and helief it is
		lties of perjury, I declare that I have examined this return, et, and complete. Declaration of preparer (other than office				-	y knowledge and belief, it is
uuu	, correc	is, and complete. Decidiation of preparet (other than office	i) is based oil all illioi illation of wi	iicii pi epaiei	ilas aliy ki	nowieuge.	
Sia.	n	Signature of officer				Date	
Sig Her		TOM KERTIS, PRESIDENT & CEO					
1101	C	Type or print name and title					
		Print/Type preparer's name	Preparer's signature	1	Date	Check	PTIN
Paid	i	AMY A. O'LOUGHLIN	1 1 Sparor o orginaturo	lo:	5/07/21	l _{if} ∟	— _{ved}
	oarer	Firm's name CBIZ MHM, LLC	1			Firm's EIN	34-1884125
-	Only	Firm's address 4722 N 24TH ST, STE 300				5 = 114	
	,	PHOENIX, AZ 85016				Phone no.602	2-264-6835
May	the II	RS discuss this return with the preparer shown abo	ve? (see instructions)				X Yes No

Ра	Check if School In Constains a response or note to any line in this Bort III	X
_	Check if Schedule O contains a response or note to any line in this Part III	А
1	Briefly describe the organization's mission: TO ALLEVIATE HUNGER THROUGH THE GATHERING AND DISTRIBUTION OF FOOD	
	WHILE ENCOURAGING SELF-SUFFICIENCY THROUGH COLLABORATION, ADVOCACY AND	
	EDUCATION.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X 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 ex	penses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$172,161,380. including grants of \$157,201,550.) (Revenue \$	584,695.
	ST. MARY'S FOOD BANK ALLIANCE DISTRIBUTES EMERGENCY FOOD BOXES (EFBS)	
	AT NO COST, TO INDIVIDUALS AND FAMILIES IN NEED. EFBS ARE DESIGNED TO	
	PROVIDE TEMPORARY FOOD ASSISTANCE DURING TIMES OF CRISIS WHILE A MORE	
	PERMANENT SOLUTION IS FOUND. A MAJORITY OF THOSE RECEIVING THESE BOXES	
	INCLUDES THE ELDERLY, CHILDREN, WORKING FAMILIES, THE HOMELESS AND	
	THOSE IMPACTED BY THE COVID-19 PANDEMIC. DESIGNED FOR CLIENTS OF THE	
	FOOD BANK'S PARTNER AGENCIES WHO FIND THEMSELVES IN A SITUATION WHERE	
	FOOD IS AN EMERGENCY ESSENTIAL, EACH BOX PROVIDES A 3-DAY SUPPLY OF	
	NUTRITIOUS FOOD TO FAMILIES - OFFERING A HELPING HAND UNTIL THEY HAVE	
	MORE PERMANENT ASSISTANCE. ST. MARY'S DISTRIBUTED MORE THAN 550,000	
	EFBS DURING THE YEAR. CONTINUED ON SCHEDULE O	
41-	(Code:) (Expenses \$ 6,795,282. including grants of \$ 6,183,792.) (Revenue \$	
4b	(Code:) (Expenses \$6,795,282. including grants of \$6,183,792.) (Revenue \$ THE COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) IS A FEDERALLY FUNDED)
	PROGRAM WHICH WORKS TO IMPROVE THE HEALTH OF LOW-INCOME ELDERLY PEOPLE	
	AT LEAST 60 YEARS OF AGE BY SUPPLEMENTING THEIR DIETS WITH NUTRITIOUS	
	USDA COMMODITY FOODS.	
4c	(Code:) (Expenses \$ 5,602,133. including grants of \$ 151,675.) (Revenue \$	3,535,722.)
	"BECAUSE NO CHILD DESERVES TO GO TO BED HUNGRY," KIDS CAFE AIMS TO	
	ALLEVIATE CHILDHOOD HUNGER IN ARIZONA BY PROVIDING NUTRITIOUS MEALS TO	
	CHILDREN AT RISK OF HUNGER. PRIOR TO COVID-19, KIDS CAFE SERVED MORE	
	THAN 6,400 MEALS A DAY DURING THE SCHOOL YEAR. IN MARCH 2020, COVID-19	
	FORCED SCHOOLS TO CLOSE ALONG WITH THE AFTER-SCHOOL PROGRAMS WHERE KIDS	
	CAFE MEALS ARE SERVED. ST. MARY'S TARGETED SERVING MEALS IN EMERGENCY	
	CHILDCARE CENTERS FOR ESSENTIAL WORKERS AND WHERE LOW-INCOME KIDS	
	LIVED, SUCH AS APARTMENT COMPLEXES. DURING THE PANDEMIC, KIDS CAFE	
	CONTINUED TO SERVE MORE THAN 3,600 MEALS DAILY DURING THE SCHOOL YEAR,	
	AND MORE THAN 8,700 MEALS A DAY DURING THE SUMMER MONTHS - ALL AT A	
	SAFE, ACCESSIBLE AND NURTURING ENVIRONMENT TO BENEFIT AT-RISK CHILDREN.	
	CONTINUED ON SCHEDULE O.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ 1,031,975. including grants of \$) (Revenue \$ 44,289	•)
4e	Total program service expenses ▶ 185,590,770.	- 000
		Form 990 (2019)

Form 990 (2019) ST MARY'S FOOD BANK ALLIANCE 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		х
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			
Ŭ	similar amounts as defined in Revenue Procedure 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	٣		
U				x
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			l
	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		Х
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.			
а				
	Part VI	11a	Х	
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
٨	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	110		
u		11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX		Х	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	\vdash
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	١	v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	-
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
	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	Х	—
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		Х
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		Х
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		Х
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		Х
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	17	Х	
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."			
	,	19		x
20-	complete Schedule G, Part III	20a		x
20a	• •	20a 20b		
b O4	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	ZUD		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Х	

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Form 990 (2019) ST MARY'S FOOD BANK ALLIANG 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	Х	
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	Х	
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
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	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	05-		х
L	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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	25b		х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
20	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		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
_,	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		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
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	Х	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
07	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			х
20	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	х	
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	1 30		
	Check if Schedule O contains a response or note to any line in this Part V			
	C. Co		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		.03	.10
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c	х	
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Part V	Statements Regarding Other IRS Filings and Tax Compliano	e (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	230			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
	•			3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		-			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accour	nt)?	4a		X
b	If "Yes," enter the name of the foreign country		(FD 4 D)			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A					Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u> 5b		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			30		
ou	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributi					
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	rvices p	rovided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uired			
	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		t?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
п 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations contributions maintaining donor advised funds. Did a donor advised fund maintained			7h		
0	Proposition organization have average having an abaldings at any time described and	•		8		
9	Sponsoring organizations maintaining donor advised funds.					
	Did the approxima agree ization make any tayable distributions under section 10662			9a		
	Did the control in a control in a control of the time to a decree of the control			9b		
10	Section 501(c)(7) organizations. Enter:					
а	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:		1			
	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				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	; 	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	l			
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?			13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.			104		
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				
С	Enter the amount of reserves on hand	13c				
				14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incor	ne?	16		Х
	If "Yes," complete Form 4720, Schedule O.			F	990	(0040)

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			Х
Sec	tion 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 17			
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	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 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
_		2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	<u> </u>		
3		3		x
4	of officers, directors, trustees, or key employees to a management company or other person? 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
				x
6	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6		 ^
7a				x
	more members of the governing body?	7a		_ ^
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	l		_v
•	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:		77	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	١.		
<u>C</u>	organization's mailing address? f "Yes." provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			Γ
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Х	
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	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		77	
12a	, , , , , , , , , , , , , , , , , , ,	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶NONE			
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)	availa	ble
	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	d finan	cial	
	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			
	SARAH STUCKEY - 602-343-3110			
	2831 N 31ST AVE, PHOENIX, AZ 85009			

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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week	(do box		Pos heck	c) ition more rson i	than	one n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) TOM KERTIS	40.00	1								
PRESIDENT & CEO	2.00	Х		Х				242,347.	0.	23,430.
(2) SARAH STUCKEY	40.00	1								
CFO	2.00			Х				180,005.	0.	21,233.
(3) LISA NOTARO-GOIN	40.00	1								
CHIEF DEVELOPMENT OFFICER				Х				175,157.	0.	22,537.
(4) DUANE LAWSON	40.00	1								
CHIEF OPERATING OFFICER				Х		_		169,790.	0.	9,297.
(5) MARCOS GAUCIN	40.00	1								
CHIEF PROGRAM OFFICER						Х		142,669.	0.	19,042.
(6) LAURA BRILL	40.00	1								
SR DIR OF CULINARY & NUTRITION PROG						Х		100,442.	0.	17,317.
(7) MARC ISAACS	2.00	1								
CHAIRMAN		Х		Х		_		0.	0.	0.
(8) DOUGLAS CURRAULT	2.00	1								
SECRETARY		Х		Х		_		0.	0.	0.
(9) JOHN GINTY	2.00	1								_
TREASURER	1.00	Х		Х		_		0.	0.	0.
(10) BOB BEAKE	2.00	4							_	_
VICE CHAIR		Х		Х		_		0.	0.	0.
(11) JOHN DEMETRA	2.00	1								
PAST CHAIR (LEFT 10/19)		Х		Х		_		0.	0.	0.
(12) JACKIE ASKIN	1.00	1								_
DIRECTOR (NEW 11/19)		Х				_		0.	0.	0.
(13) TOM CLARK	1.00	4							_	_
DIRECTOR		Х				_		0.	0.	0.
(14) ARNOTT DUNCAN	1.00	1								
DIRECTOR		Х				_		0.	0.	0.
(15) SHERYL HILDEBRAND	1.00	l						_	_	_
DIRECTOR		Х	_			\vdash		0.	0.	0.
(16) STEPHAN KING	1.00	ļ_								_
DIRECTOR (LEFT 9/19)	1.00	Х				₩		0.	0.	0.
(17) PETER LARSON	1.00	l						_	_	_
DIRECTOR	<u> </u>	Х						0.	0.	0. Form 990 (2010)

Carried Name and title Average hours per week (list any hours for related organizations below line) Director R	Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	ees,	and	Hiç	ghes	t Co	ompensated Employee	s (continued)	
Name and the Name	(A)	(B)			(C	;)			(D)	(E)	(F)
Clist any hours for related organizations below line) 1,00	Name and title	hours per	box,	not cl , unles	neck r	nore son is	than o	an	compensation	compensation	amount of
1.00 X		hours for related organizations below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations	compensation from the organization and related
1.00 DIRECTOR	(18) TERRY MORRISON	1.00									
DIRECTOR	DIRECTOR		Х						0.	0.	0.
1.00 ERIK OLSSON	(19) JUDD NORRIS	1.00									
DIRECTOR	DIRECTOR		Х						0.	0.	0.
Carame Parkes	(20) ERIK OLSSON	1.00									
DIRECTOR	DIRECTOR		Х						0.	0.	0.
1.00	(21) GRAEME PARKES	1.00									
DIRECTOR	DIRECTOR		Х						0.	0.	0.
1.00	(22) GENE PETERSON	1.00									
DIRECTOR	DIRECTOR		Х						0.	0.	0.
1.00	(23) JOHN ROUSSEL	1.00									
X	DIRECTOR		Х						0.	0.	0.
1b Subtotal	(26) BECKY WINTERSCHEIDT	1.00									
c Total from continuation sheets to Part VII, Section A	DIRECTOR		Х						0.	0.	0.
c Total from continuation sheets to Part VII, Section A											
c Total from continuation sheets to Part VII, Section A	1b Subtotal	<u> </u>						•	1,010,410.	0.	112,856.
,								•		0.	0.
, ,								<u> </u>	1,010,410.	0.	112,856.

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

Yes No 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 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 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

Section B. Independent Contractors

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)	(B)	(C)
Name and business address	Description of services	Compensation
RKD ALPHA DOG MARKETING		
8001 S 13TH STREET, LINCOLN, NE 68512	MARKETING AND ADVERTISING	1,515,562.
SHAMROCK FOODS	LOGISTICS/DISTRIBUTION	
3900 E CAMELBACK RD #300, PHOENIX, AZ 85018	SERVICES	1,273,105.
MCLANE GLOBAL , 1902 CYPRESS STATION DR	LOGISTICS/DISTRIBUTION	
SUITE 100, HOUSTON, TX 77090	SERVICES	988,144.
US FOODS, INC	LOGISTICS/DISTRIBUTION	
10410 S 50TH PLACE, PHOENIX, AZ 85044	SERVICES	773,917.
RWC INTERNATIONAL		
2202 S CENTRAL AVENUE, PHOENIX, AZ 85004	TRANSPORT SERVICE	716,198.
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	19	
		F 990 (0040)

Form **990** (2019)

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Form 990 (2019) ST MARY'S 1 Part VIII Statement of Revenue

		Check if Schedule O conta	ins a response o	or note to any lin	e in this Part VIII			
					(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
						function revenue	business revenue	sections 512 - 514
S S	1 a	Federated campaigns	1a	6,775.				
Contributions, Gifts, Grants and Other Similar Amounts			4.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
جَ جَ		Membership dues Fundraising events						
ffs,		Related organizations						
ية إق				4,673,541.				
Sir		Government grants (contribution		4,073,341.				
utio	T	All other contributions, gifts, grants		189,434,254.				
		similar amounts not included above						
out	•	Noncash contributions included in lines 1a		149,511,522.	104 114 570			
O g	n	Total. Add lines 1a-1f			194,114,570.			
		KID'C CARE DEVENUE		Business Code	2 525 722	2 525 722		
ice	2 a			624210	3,535,722.	3,535,722.		
er <	b	SOURCE PROGRAM		900099	508,801.	508,801.		
n S	С	CK CATERING		624210	44,289.	44,289.		
Program Service Revenue	d	SHARED MAINTENANCE FEE		900099	6,094.	6,094.		
S T	е							
۵ ا	f	All other program service reven						
	g	Total. Add lines 2a-2f			4,094,906.			
	3	Investment income (including of						
		other similar amounts)			154,156.			154,156.
	4	Income from investment of tax-	exempt bond p	roceeds				
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents 6a	69,800.					
	b	Less: rental expenses 6b	0.					
	С	Rental income or (loss) 6c	69,800.					
	d	Net rental income or (loss)			69,800.	69,800.		
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory 7a	28,538.					
	b	Less: cost or other basis						
ne		and sales expenses 7b	140,857.	5,535.				
Revenue	С	Gain or (loss) 7c	-112,319.	-5,535.				
Be	d	Net gain or (loss)	<u></u>		-117,854.			-117,854.
her		Gross income from fundraising eve						
₹		including \$	of					
		contributions reported on line 1	Ic). See					
		Part IV, line 18	8a					
	b	Less: direct expenses	I					
	С	Net income or (loss) from fundr	aising events	>				
	9 a	Gross income from gaming act	ivities. See					
		Part IV, line 19	9a					
	b	Less: direct expenses						
	С	Net income or (loss) from gamin	ng activities					
	10 a	Gross sales of inventory, less re	eturns					
		and allowances	I					
	b	Less: cost of goods sold	I					
		Net income or (loss) from sales		>				
				Business Code				
sno	11 a	CITRUS GLEANING/OTHER		900099	46,123.			46,123.
ane Duc	b	RECYCLING INCOME		900099	13,130.			13,130.
Miscellaneous Revenue	С	INSURANCE SETTLEMENT		900099	447.			447.
lisc B	d	All other revenue						
2		Total. Add lines 11a-11d			59,700.			
	12	Total revenue. See instructions			198,375,278.	4,164,706.	0.	96,002.

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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 respons	se or note to any line in t	his Part IX(B)	(C)	L
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	105 656 000	105 656 000		
	and domestic governments. See Part IV, line 21	125,676,928.	125,676,928.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	37,860,089.	37,860,089.		
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	1,090,253.	811,519.	140,247.	138,48
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	10 105 110			
7	Other salaries and wages	10,106,449.	7,522,639.	1,300,062.	1,283,74
8	Pension plan accruals and contributions (include	254 255	070 645	10 156	
	section 401(k) and 403(b) employer contributions)	374,355.	278,648.	48,156.	47,55
9	Other employee benefits	1,573,528.	1,171,240.	202,414.	199,87
10	Payroll taxes	749,896.	558,178.	96,464.	95,25
11	Fees for services (nonemployees):				
а		22.204		22.204	
b	Legal	22,294.		22,294.	
С	5 F	56,400.		56,400.	
d	, , , , , , , , , , , , , , , , , , , ,	1 220 491			1 220 40
e	, F	1,220,481.		21,702.	1,220,48
f	Investment management fees	21,702.		21,702.	
g	,	821,890.	9,407.	37,757.	774 72
••	column (A) amount, list line 11g expenses on Sch 0.)	35,848.	5, ±07.	35,848.	774,72
12	Advertising and promotion	162,218.	42,322.	13,775.	106,12
13 14	Office expenses	563,875.	106,195.	456,717.	96
	Information technology	303,073.	100,133.	150,717.	
15 16	Royalties	1,131,846.	1,120,150.	3,905.	7,79
10 17	Occupancy	843,789.	793,147.	28,456.	22,18
ı, 18	Travel Payments of travel or entertainment expenses	010,7011	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	20,100.	22,20
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	36,126.	32,357.	2,667.	1,10
20	Interest	84,634.	, -	84,634.	,
21	Payments to affiliates	,		,	
22	Depreciation, depletion, and amortization	1,981,736.	1,952,227.	29,509.	
23	Insurance	280,284.	213,335.	60,449.	6,50
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 0.)				
а	FOOD PURCHASES	5,112,541.	4,786,787.		325,75
b	RENTAL/LEASE	883,166.	856,414.	26,752.	,
c	PACKAGING PRODUCTS	834,849.	834,849.	, 1	
d	VEHICLE EXPENSE	634,529.	634,529.		
	All other expenses	2,227,500.	329,810.	136,237.	1,761,45
25	Total functional expenses. Add lines 1 through 24e	194,387,206.	185,590,770.	2,804,445.	5,991,99
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)				

		Check if Schedule O contains a response or	note to any li	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			2,763,029.	1	4,240,838.
	2	Savings and temporary cash investments			121,023.	2	145,178.
	3	Pledges and grants receivable, net			1,452,695.	3	763,155.
	4	Accounts receivable, net			1,845,231.	4	2,260,782.
	5	Loans and other receivables from any curren					
		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 descri				6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			10,476,435.	8	10,766,333.
As	9				112,335.	9	243,153.
		Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	1 1	35,896,646.			
	b	Less: accumulated depreciation		16,420,460.	18,671,840.	10c	19,476,186.
	11	Investments - publicly traded securities		· · · · · ·	3,621,240.	11	5,155,926.
	12	Investments - other securities. See Part IV, lir			, ,	12	, ,
	13					13	
	14		Investments - program-related. See Part IV, line 11 Intangible assets				
	15	Other assets. See Part IV, line 11		14 15			
	16	Total assets. Add lines 1 through 15 (must e			39,063,828.	16	43,051,551.
	17	Accounts payable and accrued expenses	1,561,612.	17	1,767,438.		
	18	Grants payable			, , ,	18	, , .
	19	Deferred revenue				19	
	20					20	
	21	Escrow or custodial account liability. Comple		Schedule D		21	
	22	Loans and other payables to any current or formation					
Liabilities	22	trustee, key employee, creator or founder, su					
ii l		controlled entity or family member of any of t				22	
Lia	23	Secured mortgages and notes payable to un			1,213,330.	23	902,657.
	24	Unsecured notes and loans payable to unrela			=,===,===	24	
	25	Other liabilities (including federal income tax,					
	23	parties, and other liabilities not included on li					
		of Schedule D	1163 17-24). 0	omplete rait X	235,809.	25	267,628.
	26	Total liabilities. Add lines 17 through 25		·····	3,010,751.	26	2,937,723.
	20	Organizations that follow FASB ASC 958, o	hock hore	X	0,020,702.	20	2,207,720,
ဖွ		and complete lines 27, 28, 32, and 33.	THECK HELE				
2	27				35,093,338.	27	39,490,841.
ag	28				959,739.	28	622,987.
8	20	Net assets with donor restrictions Organizations that do not follow FASB ASC		hara N	333,133.	20	022,307,
.들		_	. 956, Clieck	There			
þ	20	and complete lines 29 through 33.	do			20	
şţ	29	Capital stock or trust principal, or current fun				29	
SSE	30	Paid-in or capital surplus, or land, building, o				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			36,053,077.	31	Λ Ω 113 Ω20
ž	32	Total net assets or fund balances				32	40,113,828.
	33	Total liabilities and net assets/fund balances			39,063,828.	33	43,051,551.

Form **990** (2019)

23-7353532

Pa	rt 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		,375,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		,387,	
3	Revenue less expenses. Subtract line 2 from line 1	3	3	,988,	072.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	36	,053,	077.
5	Net unrealized gains (losses) on investments	5		72,	679.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	40	,113,	828.
Pa	rt 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 X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	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				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate				
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	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?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin				
	Act and OMB Circular A-133?	-	За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	х	

932012 01-20-20

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

2019

Open to Public Inspection

Employer identification number Name of the organization ST MARY'S FOOD BANK ALLIANCE 23-7353532 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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.)

Sec	ction A. Public Support	71		,			
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	, ,	` ,	. ,	, ,	, ,	. ,
	membership fees received. (Do not						
	include any "unusual grants.")	140,085,369.	160,559,103.	165,318,611.	167,505,484.	194,114,570.	827,583,137.
2	Tax revenues levied for the organ-						
	ization'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	140,085,369.	160,559,103.	165,318,611.	167,505,484.	194,114,570.	827,583,137.
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)						40,988,844.
6	Public support. Subtract line 5 from line 4.						786,594,293.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	140,085,369.	160,559,103.	165,318,611.	167,505,484.	194,114,570.	827,583,137.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	147,600.	194,381.	193,189.	187,145.	223,956.	946,271.
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.)	181,921.	124,117.	178,209.	195,578.	59,700.	739,525.
11	Total support. Add lines 7 through 10						829,268,933.
12		etc. (see instruction	ons)			12	20,439,775.
	First five years. If the Form 990 is for	•	,			1 501(c)(3)	
	organization, check this box and stor	-					
Sec	ction C. Computation of Publi						<u> </u>
14	Public support percentage for 2019 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	94.85 %
15						15	95.31 %
16a	33 1/3% support test - 2019. If the o					ore, check this box	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2018. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test						
_	more, and if the organization meets the	-					
	organization meets the "facts-and-circ						ightharpoonup
18	Private foundation. If the organization						
		<u></u>		, ,	,		

Schedule A (Form 990 or 990-EZ) 2019

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support		1	T	1		
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First five years. If the Form 990 is for	-			•		. —
80	check this box and stop herection C. Computation of Publi						P
				I(£)\		45	0/
	Public support percentage for 2019 (I					15	<u>%</u>
	Public support percentage from 2018 ction D. Computation of Inves					16	<u>%</u>
				no 12 nolumn (fl)		17	۸۵
	Investment income percentage for 20					18	<u>%</u>
18				on line 14, and line			7 is not
198	a 33 1/3% support tests - 2019. If the						/ 12 LIOF
L	more than 33 1/3%, check this box ar						P L
r.	33 1/3% support tests - 2018. If the line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
20	Frivate iounuation. Il the organization	in did not check a	DOX OIT III IE 14, 198	a, or rob, crieck tr	no bux and see ins		

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Schedule A (Form 990 or 990-EZ) 2019

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

_		Yes	No
	1		
	2		
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	За		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5с		
	6		
	7		
ļ	8		
	9a		
	9b		
	9с		
	10a		
	10b		

Pa	rt IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion 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		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion 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)	·-		
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions,)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	n Nov. 20, 1970 (explain in F	Part VI). See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.	
Sect	ion 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		
Sect	ion 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		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
_4	Enter greater of line 2 or line 3.	4		
_5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionall	y integra	ted Type III supporting orga	anization (see
	instructions)			

Schedule A (Form 990 or 990-EZ) 2019

Par	LV	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
Secti	on D -	Distributions		Current Year	
1	Amou	nts paid to supported organizations to accomplish exer	npt purposes		
2	Amou	nts paid to perform activity that directly furthers exemp			
	organ	izations, in excess of income from activity			
3	Admir	nistrative expenses paid to accomplish exempt purpose	3		
4	Amou	nts paid to acquire exempt-use assets			
5	Qualif	ied set-aside amounts (prior IRS approval required)			
6	Other	distributions (describe in Part VI). See instructions.			
7	Total	annual distributions. Add lines 1 through 6.			
8	Distrik	outions to attentive supported organizations to which th	e organization is responsive		
	(provi	de details in Part VI). See instructions.			
9	Distrik	outable amount for 2019 from Section C, line 6			
10	Line 8	s amount divided by line 9 amount			
Secti	on E -	Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distrik	outable amount for 2019 from Section C, line 6			
2	Unde	rdistributions, if any, for years prior to 2019 (reason-			
	able c	ause required- explain in Part VI). See instructions.			
3		s distributions carryover, if any, to 2019			
а	From	2014			
b	From	2015			
С	From	2016			
	From				
е	From	2018			
f	Total	of lines 3a through e			
		ed to underdistributions of prior years			
		ed to 2019 distributable amount			
i		over from 2014 not applied (see instructions)			
i		inder. Subtract lines 3g, 3h, and 3i from 3f.			
4		outions for 2019 from Section D,			
	line 7:	. *			
а		ed to underdistributions of prior years			
		ed to 2019 distributable amount			
С	Rema	inder. Subtract lines 4a and 4b from 4.			
5		ining underdistributions for years prior to 2019, if			
		Subtract lines 3g and 4a from line 2. For result greater			
	•	ero, explain in Part VI. See instructions.			
6		ining underdistributions for 2019. Subtract lines 3h			
-		b from line 1. For result greater than zero, explain in			
		/I. See instructions.			
7		ss distributions carryover to 2020. Add lines 3			
•	and 4	- I			
8		down of line 7:			
		ss from 2015			
		ss from 2016			
		ss from 2017			
		s from 2018			
		ss from 2019			
_	-7003	5 115111 2010			

Schedule A (Form 990 or 990-EZ) 2019

Part VI	I different and the second sec				
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,				
	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.)				
	(See instructions.)				
	(See Manager 1977)				

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Employer identification number

2019

OMB No. 1545-0047

	23-7353532				
Organization type (C	heck one):				
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	ation is covered by the General Rule or a Special Rule. 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions			
•		io. God indicadiono.			
General Rule					
	nization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling many one contributor. Complete Parts I and II. See instructions for determining a contributor?	•			
Special Rules					
sections 509 any one cor	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,					

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

religious, charitable, etc., contributions totaling \$5,000 or more during the year

purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

ST MARY'S FOOD BANK ALLIANCE

23-7353532

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		- - \$\$0.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		- \$ 7,713,402. -	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 3	Name, address, and ZIP + 4	* 6,722,907.	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	Total contributions - \$ 6,259,256.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Trumo, addi 000, and En TT	\$ 5,746,683.	Person X Payroll X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6 <u>6</u>	Ivallie, audi ess, and ZIP + 4	\$ 5,358,163.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

ST MARY'S FOOD BANK ALLIANCE

23-7353532

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
	FOOD DONATIONS	_			
1					
		\$43,814,960.	06/30/20		
(a)		(c)			
No. from	(b)	FMV (or estimate)	(d)		
Part I	Description of noncash property given	(See instructions.)	Date received		
	FOOD DONATIONS				
2					
		7,713,402.	06/30/20		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
	FOOD DONATIONS	_			
3		_			
		_	06/20/00		
	-	\$6,722,907.	06/30/20		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
	FOOD DONATIONS				
4		_			
		_			
		\$6,259,256.	06/30/20		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
	FOOD DONATIONS	_			
5		_			
		\$5,746,683.	06/30/20		
(a)		(c)			
No.	(b)	FMV (or estimate)	(d)		
from Part I	Description of noncash property given	(See instructions.)	Date received		
	FOOD DONATIONS				
6		_			
		_			
		\$5,358,163.	06/30/20		

Name of or	ganization		Employer identification number
ST MARY'S	S FOOD BANK ALLIANCE		23-7353532
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional) through (e) and the following line er charitable, etc., contributions of \$1,000 or	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year atry. For organizations less for the year. (Enter this info. once.)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—		(e) Transfer of gi	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gi	ft Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gi	ft
	Transferee's name, address, a		Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	ST MARY'S FOOD BANK ALLIANCE			23-7353532
Par	t I Organizations Maintaining Donor Advised	l Funds or Other Similar Funds o	or Accour	ts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.		
		(a) Donor advised funds	(b) Fun	ds 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 w	riting that the assets held in donor advise	d funds	
	are the organization's property, subject to the organization's e	_		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or			
	• •		ū	Yes No
Par		anization answered "Yes" on Form 990. P	art IV. line 7.	
1	Purpose(s) of conservation easements held by the organization		,	
•	Preservation of land for public use (for example, recreati	`	a historically	important land area
	Protection of natural habitat	Preservation of	-	•
	Preservation of open space	Treservation or c	a cortilled the	storio di dotare
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form o	f a conserva	tion easement on the last
_	day of the tax year.	od donder varion deminisation in the form o	i a consciva	Held at the End of the Tax Year
а			2a	TICIO DE INC ENO OT INC TOX TOUT
_				
b	Number of conservation easements on a certified historic structure.	cture included in (a)		
C	Number of conservation easements included in (c) acquired af			
d	` ' '	•	I	
2	listed in the National Register			during the toy
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated by the t	organization	during the tax
4	year ▶ Number of states where property subject to conservation ease	ement is located		
4		· · · · · · · · · · · · · · · · · · ·		
5	Does the organization have a written policy regarding the period			□ vaa □ Na
_	violations, and enforcement of the conservation easements it I			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	landling of violations, and emorcing conse	ervation ease	ments during the year
-	Amount of auromous insurand in acceptance insurantian bondli			a alumina tha casa
7	Amount of expenses incurred in monitoring, inspecting, handli > \$	ing of violations, and emorcing conservation	on easemen	s during the year
		action the requirements of acetion 170/b	\(4\(D\(;\	
8	Does each conservation easement reported on line 2(d) above			□ Vaa □ Na
_				Yes No
9	In Part XIII, describe how the organization reports conservation	•		
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial statemen	nts that desc	ribes the
Par	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	Art Historical Treasures or Oth	er Simila	r Assets
· ui	Complete if the organization answered "Yes" on Form 9			Aloueto.
			-1 111	
па	If the organization elected, as permitted under FASB ASC 958			
	of art, historical treasures, or other similar assets held for publ			DUDIIC
	service, provide in Part XIII the text of the footnote to its finance			
р	If the organization elected, as permitted under FASB ASC 958	· · · · ·		
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	erance of put	olic service,
	provide the following amounts relating to these items:			_
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical trea-		gain, provide	
	the following amounts required to be reported under FASB AS	_		
а	Revenue included on Form 990, Part VIII, line 1			\$
				·
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2019

932051 10-02-19

Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, or	Other:	Similar	Assets	(continu	ed)
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the f	ollowing that	make sig	nificant us	se of its	•	,
	collection items (check all that apply):									
а	Public exhibition	c	I	Loan or exc	hange prograi	m				
b	Scholarly research	e	•	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how th	ney further th	ne organizatior	n's exemp	ot purpos	e in Part	XIII.	
5	During the year, did the organization solicit o	r receive donations of	of art, hi	storical treas	sures, or other	r similar a	ssets		_	
_	to be sold to raise funds rather than to be ma								Yes	No
Pai	t IV Escrow and Custodial Arrang		ete if the	e organizatio	n answered "\	Yes" on F	orm 990,	Part IV, I	ine 9, or	
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi		•						1	
	on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing t	table:						
									Amount	
	Beginning balance						1c			
	Additions during the year						1d			
_	Distributions during the year						1e			
t O-	Ending balance Did the organization include an amount on Fe						_ <u> 1f </u>		Yes	
	· ·					•			_	No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i									
	2 2 Complete	(a) Current year		Prior year	(c) Two years			ears hack	(e) Four y	ears hack
1a	Beginning of year balance	(a) Odirent year	(5)	noi yeai	(C) Two years	S DUCK (a) Tilloo yo	Dai S Daok	(C) I our y	bars back
b	Contributions									
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities									
Ū	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent vear end balance	e (line 1	a. column (a)) held as:					
	Board designated or quasi-endowment	•	%	3,	,					
b	Permanent endowment									
С		 %								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
За	Are there endowment funds not in the posse	ssion of the organiza	ation tha	t are held ar	nd administere	ed for the	organizat	tion		
	by:	-					-		Y	es No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on S	chedule R?					3b	
4	Describe in Part XIII the intended uses of the		wment f	funds.						
Par	t VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answered	d "Yes" on Form 990), Part I\	/, line 11a. S	ee Form 990,	Part X, lir	ne 10.			
	Description of property	(a) Cost or o		` '	or other	` '	cumulated	d	(d) Book v	/alue
		basis (investr	nent)		(other)	depr	eciation			
	Land			+	,202,865.		0.60=	200		02,865.
	Buildings			23	,170,047.	1	0,206,2	236.	12,9	63,811.
	Leasehold improvements			1.0	F00 437		C 011 0		4.0	00 010
	Equipment			10	,502,437.		6,214,2	124.		88,213.
	Other				21,297.			_		21,297.
Iota	. Add lines 1a through 1e. (Column (d) must e	<u>qual Form 990, Part</u>	X, colun	nn (B), line 1	0c.)			Pala aluda		76,186.
								scriedule	D (Form 9	2012

Part VII Investments - Other Securities.			y
Complete if the organization answered "Yes"	on Form 990, Part IV, lin	e 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 er	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, lin		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes"	on Form 990, Part IV, lin	e 11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	e 15.)		•
Complete if the organization answered "Yes"	on Form 990, Part IV, lin	e 11e or 11f. See Form 990, Part X, line 2	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) CHARITABLE GIFT ANNUITY			267,628.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25)		267,628.
 Liability for uncertain tax positions. In Part XIII, provide 	•		•
organization's liability for uncertain tax positions under		_	

932053 10-02-19

Schedule D (Form 990) 2019

Sche	dule D (Form 990) 2019 ST MARY'S FOOD BANK ALLIANCE			23-735	3532	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With F	Revenue per Re	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.				
1	Total revenue, gains, and other support per audited financial statements			1	199,8	65,209.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	72,679.			
b	Donated services and use of facilities		314,991.			
С	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)	1 1	15,123,963.			
е	Add lines 2a through 2d			2e	15,5	11,633.
3	Subtract line 2e from line 1			3	184,3	53,576.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	21,702.			
b	Other (Describe in Part XIII.)	4b	14,000,000.			
С	Add lines 4a and 4b			4c	14,0	21,702.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	198,3	75,278.
Pai	t XII Reconciliation of Expenses per Audited Financial Statem		Expenses per R	leturn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a				
1	Total expenses and losses per audited financial statements			1	180,6	86,108.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities		314,991.			
b	Prior year adjustments	2 b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d	5,613.			
е	Add lines 2a through 2d			2e		20,604.
3	Subtract line 2e from line 1			3	180,3	65,504.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	04 500			
а	Investment expenses not included on Form 990, Part VIII, line 7b		21,702.			
b	Other (Describe in Part XIII.)	4b	14,000,000.		44.0	
	Add lines 4a and 4b			4c		21,702.
5 D 21	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) † XIII Supplemental Information.			5	194,3	87,206.
				5		
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	•		; Part X, II	ne 2; Part X	I,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	ditional inform	ation.			
PART	X, LINE 2:					
IAKI	A, DINE Z.					
ST	MARY'S QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 5	501(C)(3)				
		,,,,,,				
OF T	HE INTERNAL REVENUE CODE (THE "CODE") AND, ACCORDINGLY, THERE	E IS NO				
PROV	ISION FOR INCOME TAXES FOR THIS ORGANIZATION. IN ADDITION, TH	HE				
		<u></u>				
ORGA	NIZATION QUALIFIES FOR THE CHARITABLE CONTRIBUTION DEDUCTION	UNDER				
SECT	ION 170 OF THE CODE AND HAS BEEN CLASSIFIED AS AN ORGANIZATIO	ON THAT IS				
A NO	T PRIVATE FOUNDATION. INCOME DETERMINED TO BE UNRELATED BUSIN	NESS				
TAXA	BLE INCOME WOULD BE TAXABLE.					
	,					
ST.	MARY'S EVALUATES THEIR UNCERTAIN TAX POSITION, IF ANY, ON A C	CONTINUAL				
	, ,					
BASI	S THROUGH REVIEW OF THEIR POLICIES AND PROCEDURES, REVIEW OF	THEIR				
	,					
REGU	LAR TAX FILINGS, AND DISCUSSIONS WITH OUTSIDE EXPERTS. AT JUN	NE 30,				
	·	· · · · · · · · · · · · · · · · · · ·				
2020	, MANAGEMENT BELIEVES ST. MARY'S DID NOT HAVE ANY UNCERTAIN T	ГАХ				
				Calaadud	D /Farm (200) 2040

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

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

2019

Open to Public Inspection

Employer identification number

ST MARY'S	FOOD BANK ALLIANCE				23-735353	2
Part I Fundraising Activities. required to complete this par	Complete if the organization answett.	red "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
Indicate whether the organization rais	eed funds through any of the followin e X Solicita f X Solicita g X Special or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover aising of ding of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	itrol of	(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
RKD ALPHA DOG MARKETING -		Yes	No			
8001 S 13TH ST, LINCOLN, NE	DIRECT MAIL FUNDRAISING		х	7,757,673.	1,166,481.	6,591,192.
KELLY HART AND ASSOCIATES - 2831 N 31ST AVE, PHOENIX, AZ	FUNDRAISING/GRANT WRITING		х	968,390.	54,000.	914,390.
			.:	8,726,063.	1,220,481.	7,505,582.
3 List all states in which the organization or licensing.	n is registered or licensed to solicit o	contrib	utions	or has been notified	ıt ıs exempt from re	gistration
AZ						
					<u> </u>	

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

Schedule G (Form 990 or 990-EZ) 2019

Pa	ırt I	Fundraising Events. Complete if the of fundraising event contributions and groups of fundraising event contributions.	-			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
Φ			(event type)	(event type)	(total number)	coi. (c))
Revenue						
Rev	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	,	Cook prizes				
	4	Cash prizes				
	5	Noncash prizes				
ses						
pen	6	Rent/facility costs				
Direct Expenses	_	Food and haveness				
je	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)		>	
_	11	1				
Pa	ırt I		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
_	ı —	\$15,000 on Form 990-EZ, line 6a.	I	(L) Dull take (in atom)	T	(N Tabal manaham (a dal
e			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				gg		(u)
Ä	1	Gross revenue				
S	2	Cash prizes				
ense		Manageliandana				
Direct Expenses	3	Noncash prizes				
ect	4	Rent/facility costs				
ä						
	5	Other direct expenses				
			Yes %			
	6	Volunteer labor	No	No	No No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)		>	
	ļ '	Direct expense summary. And intel 2 timeagn	10 iii 00idiiii (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
		ter the state(s) in which the organization condu	-			
		he organization licensed to conduct gaming ac				. Yes No
K) IT "	No," explain:				
	_					
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	erminated during the tax	year?	Yes No
		Yes," explain:				_

Sch	edule G (Form 990 or 990-EZ) 2019 ST MARY'S FOOD BANK ALLIANCE	23-7353532	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No 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:		
	The organization's facility	13a	%
	An outside facility		
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
17	Title the hame 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
k	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount	t	
	of gaming revenue retained by the third party \$\bigs\\$		
(: If "Yes," enter name and address of the third party:		
	Name		
	Address ▶		
16	Coming manager information		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	s Is the organization required under state law to make charitable distributions from the gaming proceeds to		
٠	retain the state gaming license?	Yes	☐ No
ı			140
	 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 	ie .	
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); an	d Port III. linos 0	0h 10h
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	u Fait III, III les 9,	90, 100,
_	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
SCH	EDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:		
_			
/ T \	NAME OF BUILDING ORD ALDUA DOG MADADETNO		
(1)	NAME OF FUNDRAISER: RKD ALPHA DOG MARKETING		
(I)	ADDRESS OF FUNDRAISER: 8001 S 13TH ST, LINCOLN, NE 68512		
\ \ \ \			
/ T \	NAME OF BUNDDATCED. VELLY HADE AND ACCOUNTAGE		
<u>(T)</u>	NAME OF FUNDRAISER: KELLY HART AND ASSOCIATES		
(I)	ADDRESS OF FUNDRAISER: 2831 N 31ST AVE, PHOENIX, AZ 85009		
D 7 F	TITINE 2D COLUMN (V).		
LVL	T I, LINE 2B, COLUMN (V):		

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

2019

Open to Public Inspection

Employer identification number

ST MARY'S FOOI	BANK ALLIANO	CE					23-7353532
Part I General Information on Grants ar	nd Assistance						
Does the organization maintain records to	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	y for the grants or assi	stance, and the selection	on
criteria used to award the grants or assis	tance?						X Yes No
2 Describe in Part IV the organization's pro	cedures for monit	oring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to I	Domestic Organia	zations and Domesti	c Governments. C	complete if the org	anization answered "	Yes" on Form 990, Part	IV, line 21, for any
recipient that received more than \$	5,000. Part II can	be duplicated if addit	ional space is need	ed.			
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
					FEEDING		
AAAA ALCOHOL AND ADDICTION					AMERICA		
316 N 11TH WAY					VALUATION		
PHOENIX, AZ 85006	86-0267826	501(C)(3)	0.	102,905.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
AAAA ALCOHOL AND ADDICTION					AMERICA		
4430 N 23RD AVE					VALUATION		
PHOENIX, AZ 85015	86-0267826	501(C)(3)	0.	155,218.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ACADEMY OF MATH AND SCIENCES					AMERICA		
(PANTRY) - 3335 W FLOWER ST -					VALUATION		
PHOENIX, AZ 85017	27-3641289	501(C)(3)	0.	43,237.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
AGUA FRIA FOOD AND CLOTHING BANK					AMERICA		
(AVONDALE) - 405 E HARRISON -					VALUATION		
AVONDALE, AZ 85323	56-2515365	501(C)(3)	0.	1,287,646.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
AGUA FRIA FOOD AND CLOTHING BANK					AMERICA		
(ROBEY) (MP) - 5340 N WIGWAM CREEK					VALUATION		
BLVD - LITCHFIELD PARK, AZ 85340	56-2515365	501(C)(3)	0.	1,218,201.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
AGUA FRIA FOOD AND CLOTHING BANK					AMERICA		
(TONOPAH) - 36827 W INDIAN SCHOOL					VALUATION		
RD - TONOPAH, AZ 85354	56-2515365		0.	30,077.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
2 Enter total number of section 501(c)(3) ar	•	•	e line 1 table				356.
3 Enter total number of other organizations	listed in the line	1 table					
LHA For Paperwork Reduction Act Notice,	see the Instructi	ons for Form 990.					Schedule I (Form 990) (2019)

Part II Continuation of Grants and Other A	Assistance to Gov	vernments and Organ	izations in the Un	ited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
AIM RIGHT MINISTRIES					AMERICA		
1013 N 13TH ST					VALUATION		
PHOENIX, AZ 85006	86-0821440	501(C)(3)	0.	166,974.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ALHAMBRA ELEM SD 68 (SEVILLA) (MP)					AMERICA		
3801 W MISSOURI AVE					VALUATION		
PHOENIX, AZ 85019	86-6000510	GOVERNMENT	0.	12,410.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ALHAMBRA ESD 68 FAMILY RESOURCE					AMERICA		
CENTER - 4432 W MARYLAND AVE -					VALUATION		
GLENDALE, AZ 85301	86-6000510	GOVERNMENT	0.	6,431.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ALL FAITH COMMUNITY SERVICES					AMERICA		
214 S 5TH ST					VALUATION		
BUCKEYE, AZ 85326	54-2160931	501(C)(3)	0.	2,525,708.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ALL FAITH COMMUNITY SERVICES					AMERICA		
GOODYEAR - 14900 W VAN BUREN ST -					VALUATION		
GOODYEAR, AZ 85338	54-2160931	501(C)(3)	0.	120,483.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ANDRE HOUSE OF AZ INC					AMERICA		
213 S 11TH AVE					VALUATION		
PHOENIX, AZ 85007	86-0717841	501(C)(3)	0.	208,070.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ARIZONA BAPTIST CHILDREN'S					AMERICA		
SERVICES (TEFAP PA) - 2632 W					VALUATION		
AUGUSTA AVE - PHOENIX, AZ 85051	86-6053028	501(C)(3)	0.	42,710.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
ARIZONA ODD FELLOW (REBEKAH)					AMERICA		
(CSFP) - 222 E INDIANOLA AVE -					VALUATION		
PHOENIX, AZ 85012	86-0217129	501(C)(3)	0.	56,013.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
· ·				,	FEEDING		
ARIZONA RETIREMENT HOME OF					AMERICA		
SCOTTSDALE - 7310 E PALM LN -					VALUATION		

Schedule I (Form 990)

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(a) Name and address of organization or government (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of non-cash assistance (book, FMV, appraisal, other) (g) Description of non-cash assistance (h) Purpose of grant or assistance (book, FMV, appraisal, other)	ant
FEEDING	
ASH FORK FOURSQUARE CHURCH PATHWAY	
CHAPEL - 2400 N DOUBLE A RANCH RD VALUATION	
- ASH FORK, AZ 86320 86-0938376 501(C)(3) 0. 77,880.REPORT FOOD COMMUNITY FOOD ASS	ISTANCE
FEEDING	
ASSOCIATION OF AZ FOOD BANKS	
340 E CORONADO RD VALUATION	
PHOENIX, AZ 85004 86-0507679 501(C)(3) 0. 160,373. REPORT FOOD COMMUNITY FOOD ASS	ISTANCE
FEEDING	
ASTER AGENCY AMERICA	
7550 E ADOBE ST VALUATION	
MESA, AZ 85207 94-2596075 501(C)(3) 0. 9,234. REPORT FOOD COMMUNITY FOOD ASS	ISTANCE
FEEDING	
AZ CALL A TEEN YOUTH RES	
649 N 6TH AVE	
PHOENIX, AZ 85003 95-3239788 501(C)(3) 0. 10,418. REPORT FOOD COMMUNITY FOOD ASS	ISTANCE
FEEDING	
BANNER HEALTH AMERICA	
11250 N 107TH AVE VALUATION	
SUN CITY, AZ 85351 94-2745413 501(C)(3) 0. 1,658,907. REPORT FOOD COMMUNITY FOOD ASS	ISTANCE
FEEDING	
BAPTIST CENTER MINISTRIES AMERICA	
1431 E SOUTHERN AVE VALUATION	
PHOENIX, AZ 85040 20-1569551 501(C)(3) 0. 1,292,062. REPORT FOOD COMMUNITY FOOD ASS	ISTANCE
FEEDING	
BEAVER CREEK SCHOOL AMERICA	
4810 E BEAVER CREEK RD VALUATION	
RIMROCK, AZ 86335 86-0343804 501(C)(3) 0. 224,214. REPORT FOOD COMMUNITY FOOD ASS	ISTANCE
FEEDING	
BELLA'S PLACE INC	
BUILDING 469 ROUTE 64 VALUATION	
GRAND CANYON, AZ 86023 81-4025979 501(C)(3) 0. 264,745.REPORT FOOD COMMUNITY FOOD ASS	ISTANCE
FEEDING	
BETANIA REFUGEE AND IMMIGRANT	
RELIEF - 3001 W INDIAN SCHOOL RD VALUATION	
STE 210 - PHOENIX, AZ 85017 86-0657646 501(C)(3) 0. 29,449. REPORT FOOD COMMUNITY FOOD ASS	ISTANCE

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Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant non-cash assistance organization or government if applicable valuation or assistance cash grant non-cash (book, FMV, assistance appraisal, other) FEEDING BLACK FAMILY CHILD SERVICES (TEFAP AMERICA PA) - 1522 E SOUTHERN AVE STE 1 -VALUATION 66,729, REPORT PHOENIX, AZ 85040 86-0480412 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING BLUE GAP BIBLE MINISTRIES AMERICA 1/2 MI S OF BLUE GAP CHAPTER HOUSE VALUATION BLUE GAP, AZ 86520 01-0957679 501(C)(3) 0 90,262. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA BREAD OF LIFE MISSIONS CAMP VERDE VALUATION 1575 S SULLIVAN LN 28 CAMP VERDE, AZ 86322 86-0814302 501(C)(3) 0. 934,077, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING BUILDING ARIZONA FAMILIES AMERICA 8433 N BLACK CANYON HWY SUITE 152 VALUATION PHOENIX, AZ 85021 20-1387297 501(C)(3) 0 10,287. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA BULLHEAD CHRISTIAN CTR VALUATION 590 HANCOCK RD 86-0693439 501(C)(3) 450,738, REPORT BULLHEAD CITY, AZ 86442 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING CALVARY UNITED METHODIST CHURCH AMERICA 7949 W INDIAN SCHOOL RD VALUATION PHOENIX AZ 85033 86-0193155 501(C)(3) 79 395, REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING CAMERON ASSEMBLY OF GOD AMERICA 1MI SW OF CAMERON TRADING POST VALUATION 125 975 REPORT CAMERON AZ 86020 86-0441521 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING CARE AND SHARE FOOD BANK AMERICA VALUATION 2605 PREAMBLE POINT COLORADO SPRINGS, CO 80915 84-0731930 501(C)(3) 0. 58 180 REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING CARING HEARTS FOOD MINISTRY INC AMERICA VALUATION ROTARY PARK 2315 BALBOA DR. BHC BULLHEAD CITY, AZ 86442 27-0411265 501(C)(3) 432 053 REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

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Part II Continuation of Grants and Other A	Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Sch	edule I (Form 990), Pa	ırt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
CARTWRIGHT SCHOOL DIST 83					AMERICA		
4308 N 51ST AVE STE 103					VALUATION		
PHOENIX, AZ 85031	86-6000517	GOVERNMENT	0.	300,074.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CATHOLIC CHARITIES COMM SVCS					AMERICA		
1825 W NORTHERN AVE					VALUATION		
PHOENIX, AZ 85021	86-0223999	501(C)(3)	0.	138,404.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CHILCHINBETO CHAPTER					AMERICA		
2 MI S OF US 160 ON N59 AT CHAPTER					VALUATION		
KAYENTA, AZ 86033	86-0718204	501(C)(3)	0.	96,176.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CHINLE UNIFIED SCHOOL DISTRICT					AMERICA		
(SCHOOL PA) - HWY 191 & INDIAN					VALUATION		
ROUTE 7 - CHINLE, AZ 86503	86-6006232	GOVERNMENT	0.	30,394.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CHRIST COMMUNITY UNITED METHODIST					AMERICA		
CHURCH (MP) - 104 W WESTERN AVE -					VALUATION		
AVONDALE, AZ 85323	86-6051092	501(C)(3)	0.	387,061.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CHRIST EVANGELICAL LUTHERAN CHURCH					AMERICA		
(PA) - 918 S LITCHFIELD -					VALUATION		
GOODYEAR, AZ 85338	86-0476656	501(C)(3)	0.	113,459.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
CHRIST LUTHERAN CHURCH					AMERICA		
3901 E INDIAN SCHOOL RD					VALUATION		
PHOENIX, AZ 85018	86-0134466	501(C)(3)	0.	67,956.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
CHURCH FOR THE NATIONS (PA)					AMERICA		
6225 N CENTRAL AVE					VALUATION		
PHOENIX, AZ 85012	75-3114849	501(C)(3)	0.	140,859.		FOOD	COMMUNITY FOOD ASSISTANCE
,			1	,	FEEDING		
CIRCLE OF PAGE					AMERICA		
801 AQUA AVE					VALUATION		
PAGE, AZ 86040	30-0170553	501(C)(3)	0.	577 _, 115.		FOOD	COMMUNITY FOOD ASSISTANCE
	30 01/0333		1	1 3,7,113.	r 0111	<u> </u>	Octobrill 1/5 and 000

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Part II Continuation of Grants and Other A	ssistance to Gov	ernments and Organ	izations in the Un	ited States (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
CIRCLE THE CITY					AMERICA		
333 W INDIAN SCHOOL RD					VALUATION		
PHOENIX, AZ 85013	26-2420730	501(C)(3)	0.	140,375.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CIRCLE THE CITY					AMERICA		
210 S 12TH AVE					VALUATION		
PHOENIX, AZ 85007	26-2420730	501(C)(3)	0.	95,466.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CITY HELP INC OF PHOENIX					AMERICA		
75 N CENTRAL ST					VALUATION		
COLORADO CITY, AZ 86021	86-1001113	501(C)(3)	0.	1,309,753.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CITY OF AVONDALE (MP)					AMERICA		
995 E RILEY DR					VALUATION		
AVONDALE, AZ 85323	86-6000233	GOVERNMENT	0.	182,502.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CITY OF PHOENIX (DEER VALLEY					AMERICA		
SENIOR CENTER) - 2001 W WAHALLA LN					VALUATION		
- PHOENIX, AZ 85027	86-6000256	GOVERNMENT	0.	37,447.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CITY OF PHOENIX (GOELET A.C. BEUF					AMERICA		
SENIOR CENTER) - 3435 W PINNACLE					VALUATION		
PEAK RD - PHOENIX, AZ 85027	86-6000256	GOVERNMENT	0.	5,027.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CITY OF PHOENIX (SHADOW MOUNTAIN					AMERICA		
SENIOR CENTER) - 3546 E SWEETWATER					VALUATION		
RD - PHOENIX, AZ 85032	86-6000256	GOVERNMENT	0.	8,065.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CITY OF PHOENIX HOUSING SUPPORTIVE					AMERICA		
SERVICES PROG - 1725 E MCKINLEY ST					VALUATION		
- PHOENIX, AZ 85006	86-6000256	GOVERNMENT	0.	56,499.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				•	FEEDING		
CITY OF SURPRISE					AMERICA		
12425 W BELL RD STE 124					VALUATION		
SURPRISE, AZ 85388		GOVERNMENT	0.	26,773.	L	FOOD	COMMUNITY FOOD ASSISTANCE

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant non-cash (book, FMV, assistance appraisal, other) FEEDING CITY OF TOLLESON CAP (TEFAP PA) AMERICA 9555 W VAN BUREN VALUATION 182,622. REPORT TOLLESON, AZ 85353 86-6000264 GOVERNMENT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING CIVITAN FOUNDATION INC AMERICA 12635 N 42ND ST VALUATION PHOENIX, AZ 85032 23-7036797 501(C)(3) 0 50,964. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING COCONINO CO HEALTH DEPT AMERICA 2625 N KING ST VALUATION FLAGSTAFF, AZ 86004 86-0754044 GOVERNMENT 0. 21,964. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING COCONINO CO HEALTH DEPT AMERICA 100 E WOODHILL RD VALUATION 30-0170553 GOVERNMENT 0 7,225. REPORT FOOD COMMUNITY FOOD ASSISTANCE PAGE, AZ 86040 FEEDING COCONINO CO HEALTH DEPT AMERICA VALUATION 100 E WOODHILL RD 23-7353532 GOVERNMENT FREDONIA, AZ 86022 45,645. REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING COLORADO RIVER FOOD BANK (TEFAP) AMERICA 590 HANCOCK RD VALUATION BULLHEAD CITY, AZ 86442 88-0345703 501(C)(3) 1,107,754. REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD FEEDING COMMUNITY FOOD BANK (NOGALES) AMERICA 2636 N DONNA AVE VALUATION 745 739 REPORT NOGALES AZ 85621 51-0192519 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA COMMUNITY FOOD BANK (TUCSON) 3003 S COUNTRY CLUB RD VALUATTON 1,148,263. REPORT TUCSON, AZ 85713 51-0192519 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING COMMUNITY HOPE CENTERS AMERICA VALUATION 14185 N 83RD AVE PEORIA, AZ 85381 27-0957157 501(C)(3) 372 855. REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

Schedule I (Form 990)

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Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant valuation or assistance organization or government if applicable cash grant non-cash non-cash assistance (book, FMV, assistance appraisal, other) FEEDING CONCERNED CITIZENS FOR COMMUNITY AMERICA HEALTH - 1700 N GRANITE REEF RD -VALUATION 95-3416943 501(C)(3) 187,335. REPORT SCOTTSDALE, AZ 85257 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING CONCERNED CITIZENS FOR COMMUNITY AMERICA HEALTH - 7700 E ROOSEVELT STE 107 VALUATION - SCOTTSDALE, AZ 85258 95-3416943 501(C)(3) 0 160 111. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING CONGRESS COMMUNITY CHURCH INC AMERICA VALUATION 27400 SANTA FE CONGRESS, AZ 85332 86-0558310 501(C)(3) 0. 250,622, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING CONGRESS SENIOR CENTER AMERICA 26733 SANTA FE RD VALUATION 94-2882535 501(C)(3) 0 173,379, REPORT FOOD COMMUNITY FOOD ASSISTANCE CONGRESS, AZ 85332 FEEDING AMERICA COP HOUSING DEPT (DEVONSHIRE) 2802 E DEVONSHIRE VALUATION 86-6000256 501(C)(3) PHOENIX, AZ 85016 9,326, REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING COP HOUSING DEPT (MARCOS DE NIZA) AMERICA (TEFAP PA) - 305 W PIMA RD -VALUATION 86-6000256 501(C)(3) 97 215 REPORT PHOENIX AZ 85003 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING COP HOUSING DEPT (MARYVALE PKWY) AMERICA 4545 N MARYVALE PARKWAY VALUATION 53 727. REPORT PHOENIX AZ 85031 86-6000256 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING COP HOUSING DEPT (MCDOWELL PLACE) AMERICA VALUATION (TEFAP PA - 1845 E MCDOWELL RD -46,879. REPORT PHOENIX, AZ 85006 86-6000256 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING COP HS SENIOR CTR - INACTIVE AMERICA VALUATION 734 W ELM ST PHOENIX, AZ 85013 86-6000256 501(C)(3) 79 397, REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

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Part II Continuation of Grants and Other A	Assistance to Gov	ernments and Organ	izations in the Un	ited States (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
COP HS SENIOR CTR (ADAM DIAZ)					AMERICA		
4115 W THOMAS RD					VALUATION		
PHOENIX, AZ 85019	86-6000256	501(C)(3)	0.	45,519.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
COP HS SENIOR CTR (DESERT WEST)					AMERICA		
(TEFAP PA) - 6501 W VIRGINIA AVE -					VALUATION		
PHOENIX, AZ 85035	86-6000256	501(C)(3)	0.	28,437.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
COP HS SENIOR CTR (HELEN DRAKE)					AMERICA		
7600 N 27TH AVE					VALUATION		
PHOENIX, AZ 85051	86-6000256	501(C)(3)	0.	21,812.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
COP HS SENIOR CTR (SENIOR OPPS					AMERICA		
WEST) (CSFP) - 1220 S 7TH AVE -					VALUATION		
PHOENIX, AZ 85007	86-6000256	501(C)(3)	0.	37,219.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
COP HS SENIOR CTR (SOUTH MOUNTAIN)					AMERICA		
212 E ALTA VISTA					VALUATION		
PHOENIX, AZ 85042	86-6000256	501(C)(3)	0.	12,088.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
COP HS SENIOR CTR (SUNNYSLOPE)					AMERICA		
(TEFAP PA) - 802 E VOGEL -					VALUATION		
PHOENIX, AZ 85012	86-6000256	501(C)(3)	0.	11,339.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CORDES LAKES COMMUNITY ASSOCIATION					AMERICA		
16357 S CORDES LAKES DR					VALUATION		
CORDES LAKES, AZ 86333	86-0444010	501(C)(3)	0.	183,364.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CORNERSTONE COMMUNITY CHURCH OF					AMERICA		
GOD - 208 S MCLANE RD - PAYSON, AZ					VALUATION		
85541	86-0318215	501(C)(3)	0.	61,720.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CORNERSTONE MISSION PROJECT					AMERICA		
3049 SYCAMORE ST					VALUATION		
KINGMAN, AZ 86409	86-0960036	501(C)(3)	0.	292,899.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

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Part II Continuation of Grants and Other A	Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
COTTONWOOD SENIOR CENTER					AMERICA		
HWY 191 AND ROUTE N4					VALUATION		
BLUE GAP, AZ 86520	86-0718395	501(C)(3)	0.	69,918.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CPLC (CHICANOS POR LA CAUSA)	ļ				AMERICA		
CONFIDENTIAL					VALUATION		
PHOENIX, AZ 85009	86-0227210	501(C)(3)	0.	171,799.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CPLC (CHICANOS POR LA CAUSA)					AMERICA		
3639 W LINCOLN ST					VALUATION		
PHOENIX, AZ 85009	86-0227210	501(C)(3)	0.	163,494.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CPLC (CHICANOS POR LA CAUSA)					AMERICA		
6850 W INDIAN SCHOOL RD	ļ				VALUATION		
PHOENIX, AZ 85033	86-0227210	501(C)(3)	0.	361,617.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CPLC (CHICANOS POR LA CAUSA)					AMERICA		
1617 N 45TH AVE					VALUATION		
PHOENIX, AZ 85035	86-0227210	501(C)(3)	0.	227,588.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CREIGHTON FAMILY RESOURCE CENTER	ļ				AMERICA		
2052 N 36TH ST	ļ				VALUATION		
PHOENIX, AZ 85008	86-6000474	501(C)(3)	0.	39,088.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CREIGHTON SCHOOLS CHILD NUTRITION	ļ				AMERICA		
AND WELLNESS - 2801 E MCDOWELL RD	ļ				VALUATION		
- PHOENIX, AZ 85008	86-6000474	GOVERNMENT	0.	178,748.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				·	FEEDING		
CULTURAL CUP FOOD BANK					AMERICA		
342 E THOMAS RD					VALUATION		
PHOENIX, AZ 85012	81-0622721	501(C)(3)	0.	138,001.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
•				,	FEEDING		
CUSD CHINLE COMMUNITY CTR			I		AMEDICA		
	1				AMERICA		
US HWY 191 AND S OF IR 7					VALUATION		

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
FOOTHILLS FOOD BANK					AMERICA		
6038 E HIDDEN VALLEY DR					VALUATION		
CAVE CREEK, AZ 85331	86-0619725	501(C)(3)	0.	1,761,207.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
FOOTHILLS FOOD BANK AT BLACK					FEEDING		
CANYON CITY - 34550 S OLD BLACK					AMERICA		
CANYON HWY - BLACK CANYON CITY, AZ					VALUATION		
85324	86-0619725	501(C)(3)	0.	34,266.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
FOUNDATION FOR SENIOR LIVING					AMERICA		
ROESER (PA) - 454 E ROESER RD -					VALUATION		
PHOENIX, AZ 85040	86-0411904	501(C)(3)	0.	27,290.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
FOUNDATION FOR SENIOR LIVING 29					AMERICA		
PALMS (PA) - 4901 E HOLLY ST -					VALUATION		
PHOENIX, AZ 85008	86-0298945	501(C)(3)	0.	38,835.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				·	FEEDING		
FOUNDATION FOR SENIOR LIVING					AMERICA		
PEORIA - 8335 W JEFFERSON -					VALUATION		
PEORIA, AZ 85345	86-0298945	501(C)(3)	0.	401,700.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
FOUNDATION FOR SENIOR LIVING				,	FEEDING		
WICKENBURG (TEFAP) - 466 W					AMERICA		
WICKENBURG WAY - WICKENBURG, AZ					VALUATION		
85390	86-0298945	501(C)(3)	0.	95,778.		FOOD	COMMUNITY FOOD ASSISTANCE
				, -	FEEDING		
FRIENDLY HOUSE INC (TEFAP/PA)					AMERICA		
723 S 1ST AVE					VALUATION		
PHOENIX, AZ 85003	86-0120506	501(C)(3)	0.	82,178.		FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
FRIENDS OF THE QUARTZSITE FOOD					AMERICA		
BANK - 40 MOON MOUNTAIN RD -					VALUATION		
QUARTZSITE, AZ 85359	47-3013722	501(C)(3)	0.	647,478.		FOOD	COMMUNITY FOOD ASSISTANCE
×	1, 3013,22		· · ·	017,170.	FEEDING		The state of the s
GAP MINISTRIES					AMERICA		
2861 N FLOWING WELLS RD STE 161					VALUATION		
	86-0999503	501(C)(3)	0.	146,662.		FOOD	COMMUNITY FOOD ASSISTANCE
TUCSON, AZ 85705	00-0333303	DOT (C) (3)	<u> </u>	140,002.	KELOKI	Ł OOD	COMMONTIT FOOD ASSISTANCE

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					FEEDING		
GRAND CANYON FOOD PANTRY, INC.					AMERICA		
87 SUNSET DRIVE BUILDING 89 PARK S	3				VALUATION		
GRAND CANYON, AZ 86023	83-4318397	501(C)(3)	0.	37,965.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
GRATEFUL HEARTS FREE MEALS					AMERICA		
8066 N 49TH AVE					VALUATION		
GLENDALE, AZ 85302	81-5416809	501(C)(3)	0.	38,831.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
GREATER BETHEL AME CHURCH					AMERICA		
7040 S 40TH ST					VALUATION		
PHOENIX, AZ 85042	86-0973904	501(C)(3)	0.	95,259.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
GREATER BETHEL AME CHURCH					AMERICA		
7040 S 40TH ST					VALUATION		
PHOENIX, AZ 85042	86-0973904	501(C)(3)	0.	51,766.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
HARDROCK CHAPTER					FEEDING		
17 MILES N OF HOPI CULTURAL CTR ON					AMERICA		
HWY 264 - KYKOTSMOVI VILLAGE, AZ					VALUATION		
86039		501(C)(3)	0.	105,277.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				-	FEEDING		
HARVEST CHURCH ASSEMBLY OF GOD INC					AMERICA		
GLENDALE - 8340 W NORTHERN AVE -					VALUATION		
GLENDALE, AZ 85305	45-2654221	501(C)(3)	0.	246,166.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
·				,	FEEDING		
HAVASU COMMUNITY HEALTH FOUNDATION					AMERICA		
1980 KIOWA BLVD N					VALUATION		
LAKE HAVASU CITY, AZ 86403	20-1839858	501(C)(3)	0.	1,324,561.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				, ,	FEEDING		
HAVASUPAI TRIBE TOYS FOR TOTS					AMERICA		
PO BOX 480					VALUATION		
SUPAI, AZ 86435	86-0118596	501(C)(3)	0.	20,568.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				, ,	FEEDING		
HOMELESS ENGAGEMENT AND LIFT					AMERICA		
PARTNERSHIP INC - 9299 W OLIVE					VALUATION		
AVE SUITE 304 - PEORIA, AZ 85345	47-1110728	501(C)(3)	0.	56,758.		FOOD	COMMUNITY FOOD ASSISTANCE
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					FEEDING		
HOPE FOR HUNGER (PRM)					AMERICA		
5605 N 55TH AVE					VALUATION		
GLENDALE, AZ 85301	86-6057771	501(C)(3)	0.	5,813,417.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
HOPE LIVES VIVE LA ESPERANZA					AMERICA		
1551 W VAN BUREN ST					VALUATION		
PHOENIX, AZ 85007	45-2300190	501(C)(3)	0.	232,174.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
HOTEVILLA VILLAGE					AMERICA		
1 MILE NW OF HWY 264					VALUATION		
HOTEVILLA, AZ 86030	86-0642927	501(C)(3)	0.	153,972.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
HOUSE OF REFUGE SUNNYSLOPE INC					AMERICA		
9835 N 7TH PL					VALUATION		
PHOENIX, AZ 85020	86-1026266	501(C)(3)	0.	585,989.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
HUALAPAI EDUCATION AND TRAINING					AMERICA		
DEPARTMENT - 460 HUALAPAI WAY -					VALUATION		
PEACH SPRINGS, AZ 86434	86-0092282	501(C)(3)	0.	37,145.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
HUALAPAI SOCIAL SERVICES					AMERICA		
460 HUALAPAI WAY					VALUATION		
PEACH SPRINGS, AZ 86434	86-0092282	501(C)(3)	0.	116,581.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ICNA RELIEF USA PROGRAMS					AMERICA		
2515 W ORANGEWOOD					VALUATION		
PHOENIX, AZ 85051	04-3810161	501(C)(3)	0.	53,081.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
IGLESIA DEL VALLE DE LAS ASAMBLEA					AMERICA		
DE DIOS - 15406 N GREASEWOOD ST -					VALUATION		
SURPRISE, AZ 85378	86-0391434	501(C)(3)	0.	73,276.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				, ,	FEEDING		
JOSEPH CITY FOUNDATION			1				
					AMERICA		
8176 WESTOVER AVE					AMERICA VALUATION		

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					FEEDING		
JOSHUA TREE FEEDING PROGRAM					AMERICA		
214 E WILLETTA					VALUATION		
PHOENIX, AZ 85004	86-0789213	501(C)(3)	0.	243,025.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
JUSTA CENTER INC					AMERICA		
1001 W JEFFERSON ST					VALUATION		
PHOENIX, AZ 85007	47-2389424	501(C)(3)	0.	184,304.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
KAIBAB ESTATES WEST SPECIAL FIRE					AMERICA		
DISTRICT - 3918 DOUBLE A RANCH RD					VALUATION		
- ASH FORK, AZ 86320	86-0645055	501(C)(3)	0.	245,172.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
KAYENTA UNIFIED SCHOOL DISTRICT					AMERICA		
NORTH HWY 163 & MUSTANG BLVD					VALUATION		
KAYENTA, AZ 86033		GOVERNMENT	0.	306,414.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
KINGMAN ADVENTIST COMMUNITY					AMERICA		
SERVICES - 3180 WHITE CLIFFS RD -					VALUATION		
KINGMAN, AZ 86402	86-0131620	501(C)(3)	0.	263,408.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
KINGMAN AID TO ABUSED PEOPLE					AMERICA		
2016 MULLEN AVE (CONFIDENTIAL LOCAT	r				VALUATION		
KINGMAN, AZ 86401	86-0601113	501(C)(3)	0.	34,046.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
KINGMAN AREA FOOD BANK (PA)					AMERICA		
2930 E BUTLER AVE					VALUATION		
KINGMAN, AZ 86409	86-0503686	501(C)(3)	0.	1,931,852.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
•				, ,	FEEDING		
LIFE SHARING CENTER INC					AMERICA		
100 ASPEN DR					VALUATION		
TUBA CITY, AZ 86045	86-1047161	501(C)(3)	0.	856,423.		FOOD	COMMUNITY FOOD ASSISTANCE
		-, -, , -,	1	, , , , , , , , , , , , , , , , , , , ,	FEEDING		
LISA SCHEXNEIDER MINISTRIES					AMERICA		
1502 W NORTHERN AVE					VALUATION		
PHOENIX, AZ 85021	81-3876584	501(C)(3)	0.	71,912.		FOOD	COMMUNITY FOOD ASSISTANCE
	31 30,0304		· · ·	, 1, 512.		<u> </u>	75

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Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant valuation or assistance organization or government if applicable cash grant non-cash non-cash assistance (book, FMV, assistance appraisal, other) FEEDING LITCHFIELD ELEMENTARY SCHOOL AMERICA VALUATION DISTRICT - 5340 N WIGWAM CREEK 42,946, REPORT BLVD - LITCHFIELD PARK, AZ 85340 86-6000514 GOVERNMENT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING LITCHFIELD ELEMENTARY SCHOOL AMERICA DISTRICT - 2150 N RANCHO SANTA FE VALUATION BLVD - AVONDALE, AZ 85323 86-6000514 GOVERNMENT 0 49,073. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING LIVING HOPE HELPING HAND AMERICA VALUATION 13270 S SUNLAND GIN RD ARIZONA CITY, AZ 85223 65-1238877 501(C)(3) 0. 360,360, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING LIVING STREAMS CHRISTIAN CHURCH AMERICA 7000 N CENTRAL AVE VALUATION PHOENIX, AZ 85020 86-0538638 501(C)(3) 0 151,854, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA LUTHERAN CHURCH OF THE MASTER 2340 W CACTUS RD VALUATION PHOENIX, AZ 85029 43-0658188 501(C)(3) 69,875. REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING LUTHERAN SOCIAL SERVICES OF THE AMERICA SOUTHWEST - 5946 E UNIVERSITY DR VALUATION 24,713. REPORT 86-0252302 501(C)(3) MESA AZ 85205 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING MANZANITA OUTREACH AMERICA 406 S 6TH ST VALUATION 2,272,860, REPORT COTTONWOOD AZ 86326 27-4446452 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING MARICOPA COMMUNITY COLLEGE AMERICA VALUATION (PHOENIX COLLEGE) - 1202 W THOMAS 67,560, REPORT RD - PHOENIX, AZ 85013 86-0327449 GOVERNMENT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING MARICOPA COMMUNITY COLLEGE AMERICA DISTRICT - 7050 S 24TH ST STE 114 VALUATION - PHOENIX, AZ 85042 86-0327449 GOVERNMENT 126 808 REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
MARICOPA COMMUNITY COLLEGE					AMERICA		
DISTRICT - 3000 N DYSART RD -					VALUATION		
AVONDALE, AZ 85392	86-0327449	GOVERNMENT	0.	9,006.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MARICOPA COMMUNITY COLLEGE					AMERICA		
DISTRICT - 18401 N 32ND ST -					VALUATION		
PHOENIX, AZ 85032	86-0327449	GOVERNMENT	0.	36,680.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MARICOPA COMMUNITY COLLEGE					AMERICA		
DISTRICT - 108 N 40TH ST -					VALUATION		
PHOENIX, AZ 85034	86-0327449	GOVERNMENT	0.	33,310.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MARICOPA COMMUNITY COLLEGE					AMERICA		
DISTRICT - 6000 W OLIVE AVENUE -					VALUATION		
GLENDALE, AZ 85302	86-0327449	GOVERNMENT	0.	55,193.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MARICOPA PANTRY INC					AMERICA		
50881 W PAPAGO RD					VALUATION		
MARICOPA, AZ 85139	81-3081927	501(C)(3)	0.	206,573.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MARK ALLEN MANOR FOUNDATION					AMERICA		
2622 W STATE AVE					VALUATION		
PHOENIX, AZ 85051	94-2785374	501(C)(3)	0.	5,647.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MARYS MINISTRIES					AMERICA		
5017 S CENTRAL AVE					VALUATION		
PHOENIX, AZ 85040	86-0721211	501(C)(3)	0.	1,448,099.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MATTHEW'S CROSSING					AMERICA		
1368 N ARIZONA AVE					VALUATION		
CHANDLER, AZ 85225	55-0896414	501(C)(3)	0.	22,668.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				, ,	FEEDING		
MAYER AREA MEALS ON WHEELS INC					AMERICA		
10051 S MIAMI ST					VALUATION		
MAYER, AZ 86333	46-2135781	501(C)(3)	0.	268,477.		FOOD	COMMUNITY FOOD ASSISTANCE
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Part II Continuation of Grants and Other	Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Sch	edule I (Form 990), Pa	ırt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
MC ADULT PROBATION					AMERICA		
1022 E GARFIELD ST					VALUATION		
PHOENIX, AZ 85006	86-6000872	501(C)(3)	0.	63,085.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MCMULLEN VALLEY FB					AMERICA		
69725 CENTENNIAL PARK RD					VALUATION		
WENDEN, AZ 85357		501(C)(3)	0.	248,938.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
MEADVIEW AREA NECESSARY					FEEDING		
NUTRITIONAL ASSISTANCE - 330 E					AMERICA		
MEADVIEW BLVD SUITE B - MEADVIEW,					VALUATION		
AZ 86444	81-2507587	501(C)(3)	0.	149,453.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MERCY HILL CHURCH (MP)					AMERICA		
745 W FILLMORE ST					VALUATION		
PHOENIX, AZ 85007	47-1579225	501(C)(3)	0.	1,471,864.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MERCY HOUSING SOUTHWEST					AMERICA		
401 W BASELINE RD					VALUATION		
TEMPE, AZ 85283	86-0743192	501(C)(3)	0.	189,762.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
·				,	FEEDING		
MINISTERIO CRISTO SANA					AMERICA		
3632 E GREENWAY RD					VALUATION		
PHOENIX, AZ 85032	82-1139784	501(C)(3)	0.	132,678.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
MITCHELL SWABACK CHARITIES INC					AMERICA		
4744 E THUNDERBIRD UNIT 9					VALUATION		
PHOENIX, AZ 85032	27-0250769	501(C)(3)	0.	123,381.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
MOHAVE OASIS FELLOWSHIP					AMERICA		
12812 OATMAN HWY					VALUATION		
TOPOCK, AZ 86436	45-3706064	501(C)(3)	0.	18,597.		FOOD	COMMUNITY FOOD ASSISTANCE
			†		FEEDING		
MOHAVE VALLEY UNITED METHODIST					AMERICA		
CHURCH - 1593 E LIPAN BLVD - FORT					VALUATION		
MOHAVE, AZ 86426	86-0853050	501(C)(3)	0.	375,499.		FOOD	COMMUNITY FOOD ASSISTANCE
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Part II Continuation of Grants and Other	Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Sch	edule I (Form 990), Pa	ırt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
MURPHY ELEMENTARY SCHOOL DISTRICT					AMERICA		
NO 21 - 3140 W BUCKEYE RD -					VALUATION		
PHOENIX, AZ 85009	86-6000491	GOVERNMENT	0.	64,090.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NAOS INC					AMERICA		
14240 N 43RD AVE BUILDING 100					VALUATION		
GLENDALE, AZ 85306	86-0543988	501(C)(3)	0.	558,389.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NATIVE AMERICAN CONNECTIONS					AMERICA		
4520 N CENTRAL AVE STE 600					VALUATION		
PHOENIX, AZ 85012	86-0293585	501(C)(3)	0.	37,799.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NATIVE AMERICAN CONNECTIONS					AMERICA		
931 E DEVONSHIRE					VALUATION		
PHOENIX, AZ 85014	86-0293585	501(C)(3)	0.	191,753.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NATIVE HEALTH (CENTRAL)					AMERICA		
4041 N CENTRAL AVE BLDG C					VALUATION		
PHOENIX, AZ 85012	94-2540194	501(C)(3)	0.	58,416.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NEIGHBORHOOD CHURCH					AMERICA		
4633 W OSBORN RD					VALUATION		
PHOENIX, AZ 85031	86-0443992	501(C)(3)	0.	91,540.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NEIGHBORHOOD MINISTRIES INC					AMERICA		
1929 W FILLMORE ST					VALUATION		
PHOENIX, AZ 85009	86-0809052	501(C)(3)	0.	366,343.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NEW BEGINNINGS ASSEMBLY OF GOD					AMERICA		
5121 W OCOTILLO RD					VALUATION		
GLENDALE, AZ 85301	26-0072371	501(C)(3)	0.	162,568.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				-	FEEDING		
NEW BIRTH COMMUNITY CHURCH					AMERICA		
7449 W DESERT COVE					VALUATION		
PEORIA, AZ 85345	86-0901069	501(C)(3)	0.	66,732.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

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Part II Continuation of Grants and Other A	Assistance to Gov	ernments and Organ	izations in the Un	ited States (Sch	edule I (Form 990), Pa	rt II.)	
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					FEEDING		
NEW DESTINY CHRISTIAN CHURCH					AMERICA		
7848 S 27 AVE					VALUATION		
LAVEEN, AZ 85339	86-0805041	501(C)(3)	0.	28,981.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NEW DIMENSIONS IN RECOVERY					AMERICA		
1838 E CYPRESS ST					VALUATION		
PHOENIX, AZ 85006	27-2167017	501(C)(3)	0.	107,007.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NEW HORIZON YOUTH HOMES INC					AMERICA		
PO BOX 3296					VALUATION		
FLAGSTAFF, AZ 86003	86-1014335	501(C)(3)	0.	25,314.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NEW LIFE CENTER					AMERICA		
CONFIDENTIAL					VALUATION		
GOODYEAR, AZ 85338	86-0635950	501(C)(3)	0.	21,185.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NORTH MOUNTAIN CHRISTIAN AOG					AMERICA		
341 E MOUNTAIN VIEW RD					VALUATION		
PHOENIX, AZ 85020	86-0441912	501(C)(3)	0.	89,927.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NORTHMINSTER PRESBYTERIAN FOOD					AMERICA		
BANK - 13001 N 35TH AVE - PHOENIX,					VALUATION		
AZ 85029	82-0586529	501(C)(3)	0.	192,433.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
NOURISHPHX					AMERICA		
501 S 9TH AVE					VALUATION		
PHOENIX, AZ 85007	86-0401223	501(C)(3)	0.	5,405,912.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
OLD CONCHO COMMUNITY ASST CENTER					AMERICA		
35432 HIGHWAY 180A					VALUATION		
CONCHO, AZ 85924	86-0907044	501(C)(3)	0.	109,356.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
OLD TOWN MISSION					AMERICA		
116 E PINAL ST					VALUATION		
COTTONWOOD, AZ 86326	86-0667052	501(C)(3)	0.	776,394.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
PAULDEN CHRISTIAN FELLOWSHIP					AMERICA		
195 ASPEN RD					VALUATION		
PAULDEN, AZ 86334	86-0767780	501(C)(3)	0.	533,235.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PAZ DE CRISTO COMMUNITY CENTER					AMERICA		
424 W BROADWAY RD					VALUATION		
MESA, AZ 85210	26-1669496	501(C)(3)	0.	9,287.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PHOENIX ADVANTAGE CHARTER SCHOOL					AMERICA		
3738 N 16TH ST					VALUATION		
PHOENIX, AZ 85016	04-3309215	501(C)(3)	0.	19,440.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PHOENIX ALLIES FOR COMMUNITY					AMERICA		
HEALTH - 2902 W CLARENDON AVE -					VALUATION		
PHOENIX, AZ 85017	46-0650798	501(C)(3)	0.	40,388.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PHOENIX FIRST CHURCH OF THE					AMERICA		
NAZARENE INC - 19201 N 7TH AVE -					VALUATION		
PHOENIX, AZ 85027	86-0214745	501(C)(3)	0.	31,304.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
·				,	FEEDING		
PHOENIX RESCUE MISSION					AMERICA		
4013 W MARICOPA ST					VALUATION		
PHOENIX, AZ 85009	86-6057771	501(C)(3)	0.	42,683.		FOOD	COMMUNITY FOOD ASSISTANCE
,				, -	FEEDING		
PHOENIX RESCUE MISSION					AMERICA		
8335 W JEFFERSON ST					VALUATION		
PEORIA, AZ 85345	86-6057771	501(C)(3)	0.	119,049.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PHOENIX RESCUE MISSION COMMUNITY					AMERICA		
SOLUTIONS (TLC) - 1801 S 35TH AVE					VALUATION		
- PHOENIX, AZ 85009	86-6057771	501(C)(3)	0.	397,350.		FOOD	COMMUNITY FOOD ASSISTANCE
	30 003///1	551(5)(5)	· · ·	357,330.	FEEDING	1000	COLLEGE TO THE PROPERTY OF THE
PHOENIX RESCUE MISSION WOMANS					AMERICA		
CHANGING LIVES CTR - 338 N 15TH					VALUATION		
	86-6057771	501(C)(3)	0.	17,870.		FOOD	COMMUNITY FOOD ASSISTANCE
AVE - PHOENIX, AZ 85007	00-003///1	Por(C)(2)	1 0.	17,070.	KELOKI	F-00D	COMMUNITY FOOD ASSISTANCE

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant non-cash (book, FMV, assistance appraisal, other) FEEDING PILGRIM REST FOUNDATION KC AMERICA 1401 E JEFFERSON ST VALUATION 314,766. REPORT PHOENIX, AZ 85034 86-0885862 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING PINAL CO DIV OF PUBLIC HEALTH AMERICA 575 NORTH IDAHO RD. #301 VALUATION APACHE JUNCTION, AZ 85119 86-0454767 GOVERNMENT 0 86,042. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING PINAL CO DIV OF PUBLIC HEALTH AMERICA 119 W CENTRAL AVE STE 301 VALUATION COOLIDGE AZ 85128 GOVERNMENT 0. 53,914. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING PINAL CO DIV OF PUBLIC HEALTH AMERICA 302 E 5TH ST VALUATION 86-0397693 GOVERNMENT 0 148,948, REPORT FOOD COMMUNITY FOOD ASSISTANCE ELOY, AZ 85231 FEEDING AMERICA PINAL CO DIV OF PUBLIC HEALTH 330 N PINAL ST VALUATION 47-0987895 GOVERNMENT 36,542. REPORT FLORENCE, AZ 85132 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING PINAL CO DIV OF PUBLIC HEALTH AMERICA 355 ALDEN RD VALUATION 86-6000556 GOVERNMENT 97 819 REPORT COMMUNITY FOOD ASSISTANCE KEARNY, AZ 85237 0. FOOD FEEDING PINAL CO DIV OF PUBLIC HEALTH AMERICA 1870 W AMERICAN AVE VALUATION 86-6000556 GOVERNMENT 131 283 REPORT ORACLE AZ 85623 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA PINAL CO DIV OF PUBLIC HEALTH VALUATION 60 EAST MAIN STREET 78,309. REPORT SUPERIOR, AZ 85173 86-6000556 GOVERNMENT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING PRESCOTT MEALS ON WHEELS AMERICA VALUATION 1280 E ROSSER ST 14 376 REPORT PRESCOTT, AZ 86301 86-0417621 501(C)(3) COMMUNITY FOOD ASSISTANCE 0. FOOD

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant non-cash (book, FMV, assistance appraisal, other) FEEDING PRESCOTT SEVENTH DAY ADVENTIST AMERICA 2980 WILLOW CREEK RD VALUATION 86-0131620 501(C)(3) 140,228. REPORT PRESCOTT, AZ 86301 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING PRESCOTT VALLEY FOOD BANK INC AMERICA 8671 SPOUSE SUITE A VALUATION PRESCOTT VALLEY, AZ 86314 86-0469759 501(C)(3) 0 29,468. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING PROJECT RISING HOPE AMERICA VALUATION 750 E MINGUS AVE COTTONWOOD, AZ 86326 84-4062558 501(C)(3) 0. 1,274,433, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING PUENTE AMERICA 1937 W ADAMS RD VALUATION PHOENIX, AZ 85009 45-3697690 501(C)(3) 0 61,033. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA RADIANT CHURCH 15522 N PARADISE LN VALUATION 86-0886925 501(C)(3) SURPRISE, AZ 85374 28,229. REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING RAINBOW HOUSING ASSISTANCE AMERICA CORPORATION - 3838 W CAMELBACK RD VALUATION - PHOENIX AZ 85019 30-0108119 501(C)(3) 72 135. REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING RECOVERY INNOVATIONS OF ARIZONA AMERICA INC - 11361 N 99TH AVE SUITE 402 VALUATION 13 881 REPORT PEORIA AZ 85345 86-0671446 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING REVEREND PAULA HINES MINISTRIES AMERICA VALUATION 3602 W THOMAS RD SUITE 7 20,959. REPORT PHOENIX, AZ 85019 33-0872205 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING REVIVE FOUNDATION AMERICA VALUATION 13015 W GREENWAY RD EL MIRAGE, AZ 85335 45-2139245 501(C)(3) 64 285 REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

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(a) Name and address of organization or government (b) EIN (c) IRC section if applicable assistance (c) Amount of cash grant for oncash assistance assista	Part II Continuation of Grants and Other	Assistance to Gov	vernments and Organ	izations in the Un	ited States (Sch	edule I (Form 990), Pa	rt II.)	
ROAD RUNNER FOOD BANK 5840 OFFICE BLVD NE ALBUQUERQUE, NN 87109 85-0278525 501(C)(3) 0. 102,960, REPORT FOOD COMMUNITY FOOD ASSISTANCE ROOSEVELT SCHL DIST 66 3146 E WIER ST PHOENIX, AZ 85040 SOVERNMENT 0. 13,875, REPORT FOOD COMMUNITY FOOD ASSISTANCE ROUND VALLEY SENIOR CENTER 356 S PAPAGO ST SPRINGERVILLE, AZ 85938 86-6000796 501(C)(3) 0. 36,984, REPORT FOOD COMMUNITY FOOD ASSISTANCE RUNNINGELK MINISTRIES INC NAVAJOR RTE 60 MILE MARKER 10 DILKON, AZ 86047 47-2555939 501(C)(3) 0. 117,176, REPORT RUNDINGELK MINISTRIES INC NAVAJOR RTE 60 MILE MARKER 10 DILKON, AZ 86047 47-2555939 501(C)(3) 0. 117,176, REPORT FOOD COMMUNITY FOOD ASSISTANCE RUTH FISHER ELEMENTARY 38201 W INDIAN SCHOOL RD TONOFAH, AZ 85354 86-6000521 501(C)(3) 0. 236,873, REPORT FOOD COMMUNITY FOOD ASSISTANCE RUTH FISHER COMPORATION 21802 W WILLSON WHILSON WHITMANN, AZ 85361 86-0476466 501(C)(3) 0. 1,302,349, REPORT FOOD COMMUNITY FOOD ASSISTANCE REDING MARKICA VALUATION WHITMANN, AZ 85361 86-0476466 501(C)(3) 0. 1,302,349, REPORT FOOD COMMUNITY FOOD ASSISTANCE SAGUARO JANES CORPORATION 21802 W WILLSON WHITMANN, AZ 85361 86-0476466 501(C)(3) 0. 1,302,349, REPORT FOOD COMMUNITY FOOD ASSISTANCE REDING MARKICA VALUATION WHITMANN, AZ 85361 86-0476466 501(C)(3) 0. 1,302,349, REPORT FOOD COMMUNITY FOOD ASSISTANCE SAGUARO JANUARION WHITMANN, AZ 85361 86-0476466 501(C)(3) 0. 1,302,349, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SAGUARO JANUARION WHITMANN, AZ 85361 FOOD COMMUNITY FOOD ASSISTANCE FEEDING FEEDING FEEDING FOOD COMMUNITY FOOD ASSISTANCE FEEDING F		(b) EIN			non-cash	valuation (book, FMV,		
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SAGUARO JANES CORPORATION 21802 W WILSON WITTMANN, AZ 85361 86-0476466 501(C)(3) 0. 1,302,349. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA FEEDING AMERICA VALUATION SALT RIVER PIMA MARICOPA INDIAN COMMUNITY - 1952 N LONGMORE RD - SCOTTSDALE, AZ 85256 86-0143787 GOVERNMENT 0. 721,021. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING	TONOPAH, AZ 85354	86-6000521	501(C)(3)	0.	236,873.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
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COMMUNITY - 1952 N LONGMORE RD - SCOTTSDALE, AZ 85256 86-0143787 GOVERNMENT 0. 721,021.REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING						FEEDING		
SCOTTSDALE, AZ 85256 86-0143787 GOVERNMENT 0. 721,021.REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING	SALT RIVER PIMA MARICOPA INDIAN					AMERICA		
FEEDING	COMMUNITY - 1952 N LONGMORE RD -					VALUATION		
	SCOTTSDALE, AZ 85256	86-0143787	GOVERNMENT	0.	721,021.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
	·				•	FEEDING		
SALVATION ARMY (BULLHEAD CITY) AMERICA	SALVATION ARMY (BULLHEAD CITY)					AMERICA		
1461 PALMA RD VALUATION	1461 PALMA RD					VALUATION		
BULLHEAD CITY, AZ 86442 94-1156347 501(C)(3) 0. 89,577.REPORT FOOD COMMUNITY FOOD ASSISTANCE	BULLHEAD CITY, AZ 86442	94-1156347	501(C)(3)	0.	89,577.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
FEEDING	·				,			
SALVATION ARMY (CHANDLER)	SALVATION ARMY (CHANDLER)							
85 E SARAGOSA ST VALUATION								
CHANDLER, AZ 85225 94-1156347 501(C)(3) 0. 24,625.REPORT FOOD COMMUNITY FOOD ASSISTANCE		94-1156347	501(C)(3)	0.	24,625.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant non-cash (book, FMV. assistance appraisal, other) FEEDING SALVATION ARMY (FLAGSTAFF) AMERICA 507 N HUMPHREYS ST VALUATION 66,418, REPORT FLAGSTAFF, AZ 86003 94-1156347 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SALVATION ARMY (GLENDALE) AMERICA 6010 W NORTHERN AVE STE 200 VALUATION GLENDALE, AZ 85301 94-1156347 501(C)(3) 0 489,198, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SALVATION ARMY (HERBERGER CENTER) AMERICA 2707 E VAN BUREN ST VALUATION PHOENIX, AZ 85008 94-1156347 501(C)(3) 0. 164,742, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SALVATION ARMY (KINGMAN CORPS) AMERICA 1200 E ANDY DEVINE VALUATION KINGMAN, AZ 86401 94-1156347 501(C)(3) 0 103,333, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SALVATION ARMY (LAURA DANIELI SR VALUATION ACTIVITY CTR) - 628 N 3RD AVE -94-1156347 501(C)(3) PHOENIX, AZ 85003 10,372. REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SALVATION ARMY (MESA) AMERICA 255 E 6TH ST VALUATION 94-1156347 501(C)(3) 19 856. REPORT FOOD COMMUNITY FOOD ASSISTANCE MESA AZ 85201 0. FEEDING SALVATION ARMY (PHOENIX) (CSFP) AMERICA 613 N 4TH AVE VALUATION 28 353 REPORT PHOENIX AZ 85003 94-1156347 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SALVATION ARMY (PRESCOTT) VALUATTON 237 S MONTEZUMA ST 99,790. REPORT PRESCOTT, AZ 86303 86-0096791 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SALVATION ARMY MESA CITADEL AMERICA VALUATION 241 E 6TH ST MESA, AZ 85201 94-1156347 501(C)(3) 0. 334 881 REPORT COMMUNITY FOOD ASSISTANCE FOOD

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Part II Continuation of Grants and Other A	Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Sch	nedule I (Form 990), Pa	rt II.)	T age 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
SANTO NINO CATHOLIC COMMUNITY MP					AMERICA		
3206 W MELVIN ST					VALUATION		
PHOENIX, AZ 85009	47-1795408	501(C)(3)	0.	554,541.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
SDA COMMUNITY SERVICES (AVONDALE)					AMERICA		
PO BOX 442					VALUATION		
AVONDALE, AZ 85323	86-0131620	501(C)(3)	0.	27,311.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
SDA COMMUNITY SERVICES (CAMP					AMERICA		
VERDE) - 1406 N BOOTHILL DR - CAMP					VALUATION		
VERDE, AZ 86332	86-0131620	501(C)(3)	0.	1,553,506.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
SDA COMMUNITY SERVICES (PHOENIX)					AMERICA		
1320 N 15TH ST					VALUATION		
PHOENIX, AZ 85006	52-0643036	501(C)(3)	0.	82,927.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
SECOND HARVEST HEARTLAND					AMERICA		
1140 GERVAIS AVE					VALUATION		
ST PAUL, MN 55109	23-7417654	501(C)(3)	0.	46,780.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				, -	FEEDING		
SELIGMAN CARE CLUB TEFAP					AMERICA		
53490 N BRIDGE CANYON PKWY					VALUATION		
SELIGMAN, AZ 86337		501(C)(3)	0.	601,979.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
SENIOR PERSONAL ASSISTANCE CORP					AMERICA		
1255 W. BASELINE RD. SUITE A212					VALUATION		
MESA, AZ 85202	45-4551483	501(C)(3)	0.	34,814.		FOOD	COMMUNITY FOOD ASSISTANCE
11111, 111 00101	13 1331103	301(0)(3)		31,011.	FEEDING	1002	
SHEPHERDS KITCHEN FOOD BANK					AMERICA		
344 W 4TH STREET SOUTH					VALUATION		
	86-0887516	501(C)(3)	0.	2,991,435.		FOOD	COMMUNITY FOOD ASSISTANCE
SNOWFLAKE, AZ 85937	00-000/310	501(0)(3)	1	2,331,433.	FEEDING	E 00D	COMMONITY FOOD ASSISTANCE
CHONINO DDEDADAMODY COHOO! DICHDIOM							
SHONTO PREPARATORY SCHOOL DISTRICT					AMERICA		
RTE 98 AND 6320, E 5 MILES	06 0007306	E01/G\/3\		94 613	VALUATION	FOOD	GOMMINITAN ECOD AGGICANAGE
SHONTO, AZ 86054	86-0827306	DOT(C)(3)	0.	84,613.	KEPOKT	FOOD	COMMUNITY FOOD ASSISTANCE

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant non-cash (book, FMV, assistance appraisal, other) FEEDING SICHOMOVI VILLAGE AMERICA PO BOX 941 VALUATION 112,735. REPORT POLACCA, AZ 86042 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SILVER CREEK SENIOR CENTER AMERICA 1658 S MAIN STREET #1495 VALUATION SNOWFLAKE, AZ 85937 94-2745417 501(C)(3) 0 98,394. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SIPAULOVI VILLAGE AMERICA HWY 264 1 MILE NORTH OF MP 390 VALUATION SECOND MESA, AZ 86043 86-0933509 501(C)(3) 0. 89,825. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SOJOURNER CENTER AMERICA 2330 E FILLMORE ST (CONFIDENTIAL) VALUATION PHOENIX, AZ 85036 94-2465081 501(C)(3) 0 37,785. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SOUTH PHOENIX BAPTIST CHURCH VALUATION 2006 E BROADWAY RD 73-1659656 501(C)(3) PHOENIX, AZ 85040 304,288, REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING ST JOHN INSTITUTIONAL BAPTIST AMERICA 1428 S 13TH AVE VALUATION 80,312. REPORT PHOENIX AZ 85007 86-0448117 501(C)(3) FOOD COMMUNITY FOOD ASSISTANCE 0. FEEDING ST JOHN VIANNEY CATHOLIC PARISH AMERICA 539 E LA PASADA BLVD VALUATION 90-0429155 501(C)(3) 42 214 REPORT GOODYEAR AZ 85338 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING ST LUKE'S AT THE MOUNTAIN AMERICA VALUATTON 848 E DOBBINS RD 474,258. REPORT PHOENIX, AZ 85042 31-1629166 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING ST STEPHEN'S EPISCOPAL CHURCH AMERICA VALUATION 2310 N 56TH ST PHOENIX, AZ 85008 86-0182823 501(C)(3) 0. 70 974 REPORT COMMUNITY FOOD ASSISTANCE FOOD

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Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant non-cash (book, FMV, assistance appraisal, other) FEEDING STAND TOGETHER AND RECOVER (STAR) AMERICA 2144 E ROOSEVELT ST VALUATION 86-0586210 501(C)(3) 28,681, REPORT PHOENIX, AZ 85006 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING STEP ONE HALFWAY HOUSE AMERICA 9636 N 11TH AVE VALUATION PHOENIX, AZ 85021 86-1032253 501(C)(3) 0 203,656, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA STEPPING STONES FOUNDATION INC CONFIDENTIAL 3301 N MAJESTY VALUATION PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 24,707. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SUNSHINE GROUP HOMES AMERICA 17201 N 63RD AVE VALUATION GLENDALE, AZ 85308 86-0815254 501(C)(3) 0 6,575. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SUNSHINE RESCUE MISSION HOPE VALUATION COTTAGE - 124 S SAN FRANCISCO ST 86-0815254 501(C)(3) 179,373, REPORT FLAGSTAFF, AZ 86001 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SV GLEANERS (DESERT WEST) AMERICA 6501 W VTRGINIA VALUATION 126,005. REPORT PHOENIX AZ 85035 86-0419881 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SV GLEANERS (GILA BEND) AMERICA 202 N EUCLID VALUATION 16 013 REPORT GILA BEND, AZ 85337 86-0419881 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SV GLEANERS (YWCA) VALUATION 8561 N 61ST AVE 172,457. REPORT GLENDALE, AZ 85302 86-0419881 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SV GLEANERS AVONDALE PARKS AMERICA RECREATION - 1007 S 3RD ST -VALUATION AVONDALE, AZ 85323 86-0419881 501(C)(3) 433 139 REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

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Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government valuation non-cash assistance or assistance if applicable cash grant non-cash (book, FMV, assistance appraisal, other) FEEDING SVDP CASA GRANDE (GR) AMERICA 405 E 2ND ST VALUATION 86-0570967 501(C)(3) 295,755, REPORT CASA GRANDE, AZ 85122 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SVDP CORDES LAKES AMERICA 16231 S INDIAN BEND RD VALUATION CORDES LAKES, AZ 86333 86-0096789 501(C)(3) 0 210,906, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SVDP IMMACULATE CONCEPTION AMERICA 825 W MINGUS VALUATION COTTONWOOD, AZ 86326 86-0096789 501(C)(3) 0. 60,837. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SVDP LAKE HAVASU (PA) AMERICA 1841 ACOMA BLVD WEST VALUATION LAKE HAVASU CITY, AZ 86403 86-0096789 501(C)(3) 0 399,480, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SVDP NEEDLES (PA) VALUATION 10287 BARRECKMAN RD 33-0627839 501(C)(3) 159,347, REPORT MOHAVE VALLEY, AZ 86406 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SVDP OUR LADY OF PERPETUAL HELP AMERICA 5614 W ORANGEWOOD VALUATION 134,980. REPORT 86-0096789 501(C)(3) GLENDALE AZ 85301 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SVDP OUR LADY OF THE DESERT AMERICA CONFERENCE - 7141 11TH ST - DOLAN VALUATION 146,040, REPORT SPRINGS AZ 86441 86-0096789 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SVDP OUR LADY OF THE VALLEY AMERICA VALUATION (TEFAP) - 3220 W GREENWAY -84,948. REPORT PHOENIX, AZ 85053 86-0096789 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SVDP PHOENIX AMERICA 420 W WATKINS ST VALUATION PHOENIX, AZ 85002 86-0096789 501(C)(3) 2 014 111 REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant non-cash (book, FMV, assistance appraisal, other) FEEDING SVDP SACRED HEART PARKER AMERICA 1015 JOSHUA AVE VALUATION 180,532. REPORT PARKER, AZ 85344 86-0096789 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SVDP ST FRANCIS XAVIER AMERICA 4715 N CENTRAL AVE VALUATION PHOENIX, AZ 85012 86-0096789 501(C)(3) 0 29,089. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SVDP ST GERMAINE AMERICA 8030 JOHN COURT VALUATION PRESCOTT VALLEY, AZ 86314 86-0096789 501(C)(3) 0. 141,596, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SVDP ST GREGORYS AMERICA 3437 N 18TH AVE VALUATION PHOENIX, AZ 85015 86-0096789 501(C)(3) 0 18,458, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SVDP ST JEROMES (PA) 10815 N 35TH AVE VALUATION 86-0096789 501(C)(3) 8,880. REPORT PHOENIX, AZ 85029 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SVDP ST JOHN VIANNEY SEDONA AMERICA 180 ST JOHN VIANNEY IN VALUATION 5,004. REPORT 86-0096789 501(C)(3) COMMUNITY FOOD ASSISTANCE SEDONA, AZ 86336 0. FOOD FEEDING SVDP ST MARY'S BASILICA (PA) AMERICA 231 N 3RD ST VALUATION 39 286 REPORT PHOENIX AZ 85004 86-0096789 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SVDP ST WILLIAMS (PA) VALUATION 11003 W 3RD ST 20,629. REPORT CASHION, AZ 85329 86-0096789 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING TANNER CHAPEL AME CHURCH AMERICA VALUATION 20 S 8TH ST PHOENIX, AZ 85034 86-0310590 501(C)(3) 68 491 REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

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Part II Continuation of Grants and Other	Assistance to Gov	vernments and Organ	izations in the Un	ited States (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
TEEN CHALLENGE OF ARIZONA					AMERICA		
PO BOX 13444					VALUATION		
PHOENIX, AZ 85002	86-0255257	501(C)(3)	0.	128,562.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
TEMPE COMMUNITY ACTION AGENCY CSFP					AMERICA		
2146 E APACHE BLVD					VALUATION		
TEMPE, AZ 85281	86-0254820	501(C)(3)	0.	37,279.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
THANK A VET					AMERICA		
8625 W HORIZON RD					VALUATION		
GOLDEN VALLEY, AZ 86413	47-1263706	501(C)(3)	0.	209,783.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
THE SALVATION ARMY ADULT RECOVERY					AMERICA		
CENTER - 15 E PIMA ST - PHOENIX,					VALUATION		
AZ 85004	94-1156347	501(C)(3)	0.	110,455.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
THINK JESUS FELLOWSHIP					AMERICA		
2309 N CENTER					VALUATION		
FLAGSTAFF, AZ 86003	71-1006154	501(C)(3)	0.	117,384.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
THREE SQUARE FOOD BANK					AMERICA		
4190 N PECOS					VALUATION		
LAS VEGAS, NV 89115	30-0396918	501(C)(3)	0.	44,329.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
TOLANI LAKE SENIOR CENTER					AMERICA		
LEUPP ORAIBI RD AND INDIAN RTE 24					VALUATION		
WINSLOW, AZ 86047		501(C)(3)	0.	46,764.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
TOLIKAN SENIOR COUNCIL CENTER (MP)					AMERICA		
IR 35 AND DR 5045					VALUATION		
TEEC NOS POS, AZ 86514		501(C)(3)	0.	168,323.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
TOLLESON ELEMENTARY SCHOOL DIST					AMERICA		
9261 W VAN BUREN RD					VALUATION		
TOLLESON, AZ 85353	86-6000490	GOVERNMENT	0.	280,203.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant non-cash (book, FMV, assistance appraisal, other) FEEDING TOLLESON ELEMENTARY SD AMERICA 9261 W VAN BUREN ST VALUATION 20,256. REPORT TOLLESON, AZ 85353 86-6000490 GOVERNMENT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING TOWN OF FREDONTA AMERICA 100 E WOODHILL RD VALUATION FREDONIA, AZ 86022 86-0186382 GOVERNMENT 0 456,744, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING TOWN OF FREDONIA SENIOR CENTER AMERICA VALUATION (SK) - 80 N 100 WEST - FREDONIA AZ 86022 86-0186382 501(C)(3) 0. 44,366. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING TOWN OF GILA BEND AMERICA 303 E PIMA ST VALUATION GILA BEND, AZ 85337 86-0180960 GOVERNMENT 0 61,396. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA TOWN OF GILA BEND 202 N EUCLID AVE VALUATION 86-0180960 GOVERNMENT GILA BEND, AZ 85337 389,592, REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING TOWN OF GUADALUPE CAP CSFP AMERICA 9241 S AVENIDA DE YAQUI VALUATION 60,789. REPORT GUADALUPE AZ 85283 86-0297728 GOVERNMENT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING TRINITY BIBLE CHURCH AMERICA 3420 W PEORIA AVE VALUATION 183 943 REPORT PHOENIX AZ 85029 86-0215940 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA TRINITY UNITED METHODIST CHURCH VALUATION 3104 W GLENDALE AVE PHOENIX, AZ 85051 86-6007917 501(C)(3) 0. 52 145 REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING UMOM (NEW DAY CENTERS) AMERICA VALUATION 3333 E VAN BUREN PHOENIX, AZ 85008 86-0521062 501(C)(3) 91 448 REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

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Part II Continuation of Grants and Oth	er Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Sch	edule I (Form 990), Pa	ırt II.)	T uge T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
UNION ELEMENTRY SCHOOL DIST					AMERICA		
3834 S 91ST AVE					VALUATION		
TOLLESON, AZ 85353		GOVERNMENT	0.	92,694.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
UNITED FOOD BANK					AMERICA		
245 S NINA DR					VALUATION		
MESA, AZ 85210	86-0505273	501(C)(3)	0.	553,072.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VALLEYWISE HEALTH					AMERICA		
2601 E ROOSEVELT ST					VALUATION		
PHOENIX, AZ 85008	86-0830701	501(C)(3)	0.	65,562.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VALLEYWISE HEALTH					AMERICA		
33 W TAMARISK					VALUATION		
PHOENIX, AZ 85041	86-0830701	501(C)(3)	0.	19,235.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VICTORY COLLEGIATE ACADEMY					AMERICA		
3535 N 63RD AVE					VALUATION		
PHOENIX, AZ 85033	81-0693484	501(C)(3)	0.	14,395.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
VILLAGE OF BACAVI					AMERICA		
264 WEST					VALUATION		
HOTEVILLA, AZ 86030	86-0664160	GOVERNMENT	0.	55,466.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
· · · · · · · · · · · · · · · · · · ·				,	FEEDING		
VILLAGE OF TEWA					AMERICA		
HWY 264 MP 392.5					VALUATION		
POLACCA, AZ 86042	86-0894453	GOVERNMENT	0.	178,874.		FOOD	COMMUNITY FOOD ASSISTANCE
,					FEEDING		
VILLAGE OF WALPI					AMERICA		
1/2 MILE N HWY 264 MP 391					VALUATION		
POLACCA, AZ 86042	86-0956879	GOVERNMENT	0.	128,416.		FOOD	COMMUNITY FOOD ASSISTANCE
	1 22 0330073		· · · · ·		FEEDING		
VINEYARD COMMUNITY CHARITIES					AMERICA		
6250 W PEORIA AVE					VALUATION		
GLENDALE, AZ 85302	74-2467930	501(C)(3)	0.	186,367.		FOOD	COMMUNITY FOOD ASSISTANCE
CHILDING, NO 05502	1 /4 240/930	P01(C/(J/	1 0.	100,307.	KLII OKI	F 00D	COMMONITY FOOD ASSISTANCE

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Part II Continuation of Grants and Other	Assistance to Gov	vernments and Organ	izations in the Un	ited States (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FEEDING		
VINEYARD COMMUNITY CHURCH					AMERICA		
601 S COOPER RD					VALUATION		
GILBERT, AZ 85233	86-0607313	501(C)(3)	0.	12,762.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VIVRE					AMERICA		
2501 W ELM ST					VALUATION		
PHOENIX, AZ 85017	45-4743181	501(C)(3)	0.	115,218.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WAY OF LIFE CHURCH AOG					AMERICA		
5802 S 15TH AVE					VALUATION		
PHOENIX, AZ 85041	86-0655205	501(C)(3)	0.	171,698.		FOOD	COMMUNITY FOOD ASSISTANCE
WESTCARE AZ I INC SAFE HOUSE					FEEDING		
1160 AGATE AVE (CONFIDENTIAL SAFE					AMERICA		
HOUSE LOCATION) - BULLHEAD CITY,					VALUATION		
AZ 86442	86-0968693	501(C)(3)	0.	42,170.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WHAT-KNOTS SECOND HAND AND MORE					AMERICA		
479 PARK AVENUE					VALUATION		
ASH FORK, AZ 86320	86-1043856	501(C)(3)	0.	152,270.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WHITE HILLS COMMUNITY ASSOCIATION					AMERICA		
INC - 8599 W WHITE HILLS RD -					VALUATION		
WHITE HILLS, AZ 86445	94-2620976	501(C)(3)	0.	74,429.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WHITE MOUNTAIN CATHOLIC CHARITIES					AMERICA		
3807 PORTER MOUNTAIN RD					VALUATION		
LAKESIDE, AZ 85929	85-0225263	501(C)(3)	0.	96,605.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WILLCOX DISTRIBUTION CENTER					AMERICA		
931 N BISBEE AVE					VALUATION		
WILLCOX, AZ 85643	51-0192519	501(C)(3)	0.	553,124.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WILLIAMS FOOD PANTRY AND MORE					AMERICA		
125 S 3RD ST					VALUATION		
WILLIAMS, AZ 86046	82-1634562	501(C)(3)	0.	475,550.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

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Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government valuation non-cash assistance or assistance if applicable cash grant non-cash (book, FMV, assistance appraisal, other) FEEDING WILLIAMS FOOD PANTRY AND MORE AMERICA 123 S 3RD VALUATION 25,424. REPORT WILLIAMS, AZ 86046 82-1634562 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING WINSLOW COUNCIL ON AGING AMERICA 212 E 2ND ST VALUATION WINSLOW, AZ 86047 86-0310351 501(C)(3) 0 500,785, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA WINSLOW ROTARY CLUB VALUATION 101 E HILLVIEW ST WINSLOW, AZ 86047 83-2560165 501(C)(3) 0. 46,014, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING YARNELL FOOD BANK INC AMERICA 22815 HIGHWAY 89 VALUATION YARNELL, AZ 85362 47-3449359 501(C)(3) 0 288,343, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA YAVAPAI APACHE NATION VALUATION 3364 HAMALEY AVE 86-0210241 GOVERNMENT CAMP VERDE, AZ 86322 108,245, REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING YAVAPAI CO COMM HEALTH (ASH FORK) AMERICA 242 W LEWIS AVE VALUATION 47,679. REPORT 45-4731785 501(C)(3) ASH FORK, AZ 86320 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING YAVAPAI CO COMM HEALTH (CORDES AMERICA LAKES) - 16357 S CORDES LAKES DR VALUATION 20 752 REPORT CORDES LAKES AZ 86333 86-0444010 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING YAVAPAI CO COMM HEALTH (MAYER) AMERICA VALUATION 10001 WICKS AVE 23,427. REPORT MAYER, AZ 86333 46-2135781 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING YAVAPAI CO COMM HEALTH SVCS (CAMP AMERICA VALUATION VERDE) - 75 E HOLLAMON ST - CAMP VERDE, AZ 86322 86-6000561 GOVERNMENT 105 398 REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant non-cash (book, FMV, assistance appraisal, other) FEEDING YAVAPAI CO COMM HEALTH SVCS (CHINO AMERICA VALLEY) - 650 ROAD 3 SE (OFF HWY VALUATION 49,015. REPORT 89A) - CHINO VALLEY, AZ 86323 GOVERNMENT 0. FOOD COMMUNITY FOOD ASSISTANCE YAVAPAI CO COMM HEALTH SVCS FEEDING (PRESCOTT VALLEY) - 8866 E LONG AMERICA MESA DR - PRESCOTT VALLEY, AZ VALUATION 86314 GOVERNMENT 0 47,825. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA YAVAPAI CO COMM HEALTH SVCS (PRESCOTT) - 937 RUTH ST -VALUATION PRESCOTT, AZ 86301 23-7353532 GOVERNMENT 0. 83,708, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING YAVAPAI FOOD BANK INC AMERICA 8866 E LONG MESA DR VALUATION 1,541,932.REPORT PRESCOTT VALLEY, AZ 86314 86-0709163 501(C)(3) 0 FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA YUCCA COMMUNITY FOOD PANTRY 12349 S FRONTAGE RD VALUATION 38-4139944 501(C)(3) 784,361. REPORT YUCCA, AZ 86438 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING YUMA COMMUNITY FOOD BANK AMERICA 2404 E 24TH ST STE A VALUATION 86-0457836 501(C)(3) 704 296 REPORT FOOD COMMUNITY FOOD ASSISTANCE YUMA AZ 85365 0. FEEDING YWCA MARICOPA COUNTY AMERICA 8561 N 61ST AVE VALUATION 86-0098936 501(C)(3) 33 360 REPORT GLENDALE AZ 85302 0. FOOD COMMUNITY FOOD ASSISTANCE SMFB FOUNDATION 2831 N 31ST AVE PHOENIX, AZ 85009 27-0277109 501(C)(3) 14,000,000. 0. GENERAL OPERATIONS

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Schedule I (Form 990)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
				OTHER - FEEDING AMERICA	
DISTRIBUTION	0	0.	37,860,089.	FOOD VALUATION REPORT	FOOD
t IV Supplemental Information. Provide the information	required in Part I, lin	e 2; Part III, column	(b); and any other ac	 ditional information.	
I, LINE 2:					
R FOOD IS DISTRIBUTED, NO FURTHER MONITORING	IS CONSIDERED	NECESSARY.			
·					

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

2019

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

ST MARY'S FOOD BANK ALLIANCE

Employer identification number 23-7353532

Pa	art I Questions Regarding Compensation				
	·			Yes	No
1 a	Check the appropriate box(es) if the organization provided any	y of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any re	elevant information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organizatio	on follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described a	above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursin	ng or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, r	regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to	o establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check at	ny boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but ex	xplain in Part III.			
	Compensation committee	X Written employment contract			
	Independent compensation consultant	X Compensation survey or study			
	X Form 990 of other organizations	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, S	Section A, line 1a, with respect to the filing			
	organization or a related organization:				
а	Receive a severance payment or change-of-control payment?		4a		Х
b	Participate in, or receive payment from, a supplemental nonqu	ualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based comp	pensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the a	applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organization	ons must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, di	id the organization pay or accrue any compensation			
	contingent on the revenues of:				
а	The organization?		5a		Х
b	Any related organization?		5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, di	id the organization pay or accrue any compensation			
	contingent on the net earnings of:				
а	The organization?		6a		Х
			6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a, di				
			7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or acc	crued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.	.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttab	ole presumption procedure described in			
	Regulations section 53.4958-6(c)?		9		

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

Schedule J (Form 990) 2019

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

23-7353532

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)	
(A) Name and Title	•	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	berients	(B)(i)-(D) 265,777 0 201,238 0 197,694 179,087 0 161,711	reported as deferred on prior Form 990	
(1) TOM KERTIS	(i)	242,347.	0.	0.	10,288.	13,142.	265,777.	0.	
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) SARAH STUCKEY	(i)	177,505.	2,500.	0.	8,377.	12,856.	201,238.	0.	
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) LISA NOTARO-GOIN	(i)	171,657.	3,500.	0.	8,017.	14,520.	197,694.	0.	
CHIEF DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) DUANE LAWSON	(i)	169,790.	0.	0.	7,553.	1,744.	179,087.	0.	
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) MARCOS GAUCIN	(i)	142,669.	0.	0.	6,517.	12,525.	161,711.	0.	
CHIEF PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 3:
THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS MEETS TO REVIEW THE
PERFORMANCE OF THE CEO AND DETERMINE APPROPRIATE COMPENSATION COMMENSURATE
WITH PERFORMANCE. THE COMMITTEE USES COMPARABILITY DATA FROM TAX EXEMPT
ORGANIZATIONS IN THE LOCAL AREA AND THE COMMITTEE'S DECISIONS ARE
DOCUMENTED IN THE COMMITTEE MINUTES. THE CEO'S REVIEW IS SCHEDULED ANNUALLY
IN JULY.
PART I, LINE 7:
THE ORGANIZATION PROVIDED NON-FIXED PAYMENTS (BONUSES) TO CERTAIN EMPLOYEES
BASED ON MEETING ORGANIZATIONAL GOALS AND WERE APPROVED BY THE CEO.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ 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.

Employer identification number ST MARY'S FOOD BANK ALLIANCE 23-7353532

Par	rt 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 de noncash contribu			3
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory	Х	70,542	149,511,522.	FEEDING AMERICA V	VALUAT	'IO	
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other							
26	Other							
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organiz	zation during	the tax year for c	ontributions				
	for which the organization completed Form 828	33, Part IV, [Donee Acknowledg	gement 29			14	
							Yes	No
30a	During the year, did the organization receive by	/ contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least three years from the date	of the initia	l contribution, and	which isn't required to be us	ed 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 p	oolicy that re	equires the review of	of any nonstandard contribut	ions?	31	Х	
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) foi	r a type of property	for which column (a) is chec	ked,			
	describe in Part II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2019

932142 09-27-19

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Inspection

Name of the organization

ST MARY'S FOOD BANK ALLIANCE

Employer identification number 23-7353532

DI MIKI D 1000 DINK MEHIMEE	25 7555552
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:	
AGENCY SHOPPING AND SCHOOL AND COMMUNITY DISTRIBUTIONS: ST. MARY'S	
PROVIDES PERISHABLE AND NON-PERISHABLE FOOD, FREE OF CHARGE, TO	
HUNDREDS OF LOCAL AGENCIES THAT, IN TURN, PROVIDE FOOD TO THEIR CLIENTS	
(INDIVIDUALS AND FAMILIES IN NEED THROUGHOUT ARIZONA). APPROXIMATELY	
107 MILLION POUNDS OF FOOD WERE DISTRIBUTED DURING THE YEAR.	
MOBILE PANTRIES: NOT EVERYONE CAN COME TO A ST. MARY'S FOOD BANK	
ALLIANCE LOCATION FOR EMERGENCY BOXES, SO WE HAVE EXPANDED OUR EFFORTS	
TO BRING THE FOOD BANK TO THEM. DRIVE PAST A CERTAIN PRIMARY SCHOOL IN	
PHOENIX ONE WEDNESDAY EACH MONTH, AND YOU WILL SEE A ST. MARY'S FOOD	
BANK TRUCK, ALONG WITH PALLETS OF FRUITS, VEGETABLES, AND BREAD AS WELL	
AS DOZENS OF NEIGHBORHOOD FAMILIES AWAITING THIS MUCH-NEEDED,	
NUTRITIOUS FOOD. THIS SCENE IS PLAYING OUT IN COUNTLESS COMMUNITIES	
THROUGHOUT ARIZONA AS THE ST. MARY'S MOBILE PANTRY PROGRAM, WHICH HAS	
GROWN TO MORE THAN 156 SITES IN BOTH RURAL AND URBAN LOCATIONS,	
BRINGING FOOD DIRECTLY TO NEIGHBORHOODS IN THE GREATEST NEED. THROUGH	
THIS PROGRAM, ST. MARY'S DISTRIBUTED MORE THAN 9.7 MILLION POUNDS.	
BACKPACK PROGRAM: THE BACKPACK PROGRAM PROVIDES "CHRONICALLY HUNGRY"	
CHILDREN IN ARIZONA WITH NON-PERISHABLE FOOD, PRIMARILY MEALS THAT KIDS	
CAN TAKE HOME AND EAT ON WEEKENDS WHEN NOT IN SCHOOL. PRIOR TO	
COVID-19, WE COLLABORATED WITH MORE THAN 132 SCHOOLS AND COMMUNITY	
CENTERS TO PROVIDE MORE THAN 7,000 BACKPACKS IN ARIZONA AS A	
SUPPLEMENTAL FOOD SOURCE THAT IS DISTRIBUTED TO CHILDREN EACH FRIDAY.	
IN MARCH 2020, THE PANDEMIC FORCED SCHOOLS TO CLOSE ACROSS THE STATE.	
DURING THE HEIGHT OF COVID-19, WE HAD 90 SCHOOLS AND COMMUNITY CENTERS	
CONTINUE PROVIDING MORE THAN 5,500 BACKPACKS TO CHILDREN USING A	

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

Name of the organization ST MARY'S FOOD BANK ALLIANCE	Employer identification number 23-7353532
DRIVE-THRU DISTRIBUTION MODEL.	
SOURCE DISTRIBUTION: SOURCE DISTRIBUTION IS A VOLUME-BUYING SERVICE	
OFFERED BY ST. MARY'S FOOD BANK TO ITS PARTNER AGENCY ORGANIZATIONS. BY	
PURCHASING IN TRUCKLOAD QUANTITIES, ST. MARY'S IS ABLE TO PROCURE	
POPULAR FOOD ITEMS, WHICH ARE NOT NORMALLY AVAILABLE AS DONATIONS, AT	
WHOLESALE PRICES AND PASS THE SAVINGS ON TO ITS AGENCIES.	
AS THE ORGANIZATION RESPONDED TO AN UNPRECEDENTED SPIKE IN NEED FOR	
EMERGENCY FOOD DUE TO THE COVID-19 PANDEMIC, A \$430,000 ADVERTISING	
CAMPAIGN WAS LAUNCHED AT THE END OF FISCAL YEAR 2020 TO REASSURE THE	
COMMUNITY THAT THE FOOD BANK WAS OPEN AND AVAILABLE TO SERVE THE	
PUBLIC.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	
OFTEN PART OF AN AFTER-SCHOOL PROGRAM THAT ALSO INCLUDES TUTORING,	
HOMEWORK STUDY GROUPS AND ATHLETIC ACTIVITIES, KIDS CAFE PARTNERS WITH	
AREA CHURCHES, SCHOOLS, COMMUNITY CENTERS AND CITY PARKS & RECREATION	
DEPARTMENTS TO PROVIDE MEALS FOR KIDS WHO MIGHT NOT HAVE A DEPENDABLE	
EVENING MEAL AT HOME.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
THE COMMUNITY KITCHEN IS A LIFE SKILLS AND FOOD SERVICE TRAINING	
PROGRAM FOR THOSE WITH BARRIERS TO EMPLOYMENT. STUDENTS GAIN THE SKILLS	
TO GET JOBS OFFERING LIVABLE WAGES, BENEFITS, AND OPPORTUNITIES FOR	
ADVANCEMENT THROUGH HANDS-ON FOOD SERVICE TRAINING AS WELL AS CLASSROOM	
STUDIES. DURING THE PAST DECADE, THE COMMUNITY KITCHEN HAS PROVIDED	
THOUSANDS OF MEALS TO THOSE IN NEED, WHILE TRANSFORMING THE LIVES OF	
COUNTLESS PARTICIPANTS AND FAMILIES. IN ADDITION TO TRAINING, EACH	
200040 00 00 40	shadula O (Form 990 or 990 E7) (2019)

Name of the organization ST MARY'S FOOD BANK ALLIANCE	Employer identification number 23-7353532
STUDENT RECEIVES JOB-PLACEMENT ASSISTANCE AND SUPPORT FOLLOWING	
GRADUATION.	
EXPENSES \$ 1,031,975. INCLUDING GRANTS OF \$ 0. REVENUE \$ 44,289.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND WAS REVIEWED BY THE	
ORGANIZATION'S CEO AND CFO PRIOR TO FILING. FORM 990 WILL BE SUBMITTED FOR	
APPROVAL TO THE AUDIT AND FINANCE COMMITTEE AND SUBSEQUENTLY THE BOARD OF	
DIRECTORS WILL RECEIVE A COPY OF THE DRAFT FOR REVIEW PRIOR TO A BOARD	
MEETING, AT WHICH POINT IT WILL BE APPROVED.	
FORM 990, PART VI, SECTION B, LINE 12C:	
THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY THAT ADDRESSES THE	
CONSIDERATION OF POTENTIAL CONFLICTS OF INTEREST BY THE BOARD OF DIRECTORS,	
COMMITTEE MEMBERS, VOLUNTEERS, KEY EMPLOYEES, AND THEIR RELATIVES. AS PER	
THE POLICY, BOARD AND COMMITTEE MEMBERS MUST MAKE DISCLOSURES OF ANY	
POTENTIAL CONFLICTS OF INTEREST AND MUST ABSTAIN FROM VOTING ON ANY ACTION	
IN WHICH THEY MAY HAVE AN INTEREST. ON AN ANNUAL BASIS, ALL BOARD MEMBERS	
ARE REQUIRED TO SIGN OFF ON AN ANNUAL CONFLICT OF INTEREST FORM, EITHER	
STATING ANY KNOWN CONFLICTS, OR STATING THAT THERE ARE NONE.	
FORM 990, PART VI, SECTION B, LINE 15A:	
THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS MEETS TO REVIEW THE	
PERFORMANCE OF THE CEO AND DETERMINE APPROPRIATE COMPENSATION COMMENSURATE	
WITH PERFORMANCE. THE COMMITTEE USES COMPARABILITY DATA FROM TAX EXEMPT	
ORGANIZATIONS IN THE LOCAL AREA AND THE COMMITTEE'S DECISIONS ARE	
DOCUMENTED IN THE COMMITTEE MINUTES. THE CEO'S REVIEW IS SCHEDULED ANNUALLY	
IN JULY.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

• Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

23-7353532

(a)	(b)	(c)	(d)	(e)		(f)		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)	or Total inco	me End-of-yea	r assets		ontrolling ntity	g
Part II Identification of Related Tax-Exempt Orgorganizations during the tax year.	ganizations. Complete if the organization	 answered "Yes" on Form 990), Part IV, line 34, b	ecause it had one	or more	related tax-exe	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section		(f) ct controlling entity	cont	g) 512(b)(13) rolled tity?
Ü		Toroigir oburitry)		501(c)(3))		,	Yes	No
MFB FOUNDATION - 27-0277109 331 N 31ST AVE	LONG-TERM FINANCIAL SUPPORT OF ST MARY'S FOOD							
HOENIX, AZ 85009	BANK ALLIANCE	ARIZONA	501(C)(3)	LINE 11A, I	N/A			Х

ST MARY'S FOOD BANK ALLIANCE

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David III	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 34, be	cause it had one or more related
	organizations treated as a partnership during the tax year.			, ,	

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes No								(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General of managin partner?	(k) Percentage ownership

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled tity?
		country)		,				Yes	No
-									
-									-
-									

(4)

(5)

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No	
1	During the tax year, did the organization engage in any of the following transactions with or	one or more rela	ated organizations listed ir	Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity							
	Gift, grant, or capital contribution to related organization(s)							
	Gift, grant, or capital contribution from related organization(s)							
d	Loans or loan guarantees to or for related organization(s)							
					1e		Х	
f	Dividends from related organization(s)				1f		Х	
					1g		Х	
i	Exchange of assets with related organization(s)							
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х	
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х	
- 1	Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)							
m	m Performance of services or membership or fundraising solicitations by related organization(s)						Х	
	m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s)							
р	Reimbursement paid to related organization(s) for expenses	Intribution from related organization(s) Is to or for related organization(s) It does by related organization(s) It does with related organization						
							Х	
r	Other transfer of cash or property to related organization(s)				1r		Х	
					1s		Х	
2	If the answer to any of the above is "Yes," see the instructions for information on who mus-	st complete this	s line, including covered re	lationships and transaction thresholds.				
	Name of related organization Tra	ansaction		(d) Method of determining amount invo	lved			
1)								
2)								
<u>-,</u>								
3)								

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation Yes N	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) r Percentage ownership
	<u> </u>									

Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

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

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 a 6-month automatic extension of time to file any of the

OMB No. 1545-0047

forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print 23-7353532 ST MARY'S FOOD BANK ALLIANCE File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 2831 N 31ST AVE return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHOENIX, AZ 85009 Enter the Return Code for the return that this application is for (file a separate application for each return) 1 Return **Application Application** Return Code Is For Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 SARAH STUCKEY The books are in the care of > 2831 N 31ST AVE - PHOENIX, AZ 85009 Telephone No. ▶ 602-343-3110 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and TINs of all members the extension is for. MAY 17, 2021 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year or , and ending JUN 30, 2020 ▶ X tax year beginning JUL 1, 2019 Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason:

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

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

using EFTPS (Electronic Federal Tax Payment System). See instructions.

Form 8868 (Rev. 1-2020)

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MAIL TO: DEPARTMENT OF THE TREASURY

INTERNAL REVENUE SERVICE CENTER

OGDEN UT 84201-0045

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less

If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

estimated tax payments made. Include any prior year overpayment allowed as a credit.

Change in accounting period

any nonrefundable credits. See instructions

3b